

REPUBLIQUE DU CAMEROUN  
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DECENTRALISATION ET DE  
DEVELOPPEMENT LOCAL  
REGION DU NORD-OUEST

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REPUBLIC OF CAMEROON

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*Peace – Work – Fatherland*

MINISTRY OF DECENTRALISATION  
AND LOCAL DEVELOPMENT  
NORTH WEST REGION

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NGOKETUNJIA  
DIVISION

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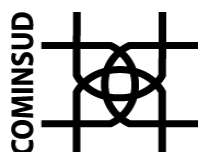
BALIKUMBAT  
COUNCIL

***Citizen Report Card mechanism (SCORECARD)***  
***Assessment of public services in the sectors of water, health,  
education, and council services within the Balikumbat Council  
Area***



**REPORT OF THE STUDY**

**With the Technical and financial support of the National Community Driven  
Development Program (PNDP)  
in collaboration with the National Institute of Statistics (INS)  
Realized by: Community Initiative for Sustainable Development (COMINSUD)**



**COMINSUD**  
Community Initiative  
for Sustainable Development



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## LIST OF ABBREVIATIONS

CRCM/SCORECARD:	Citizen Control Reporting Card Mechanism
CDE ;	Camerounaise des Eaux
CDO:	Council Development Officer
CFO :	Council Financial Officer
CDP:	Council Development Plan
CID:	Council Institutional Diagnosis
CS PRO	Census and survey Processing System
DD:	Divisional Delegate
COMINSUD:	Community Initiatives for Sustainable Development
DH	District Hospital
DMO:	District Medical Officer
MHC	Medicalized Health Centre (CMA)
DO:	Divisional Officer
EA	Enumeration Area
FEICOM:	Council Support Fund for Mutual Assistance
GESP:	Growth and Employment Strategy Paper
GCHP	General Census and housing Population
GHS:	Government High School
GPS:	Geographic Positioning System
GS:	Government School
GSS:	Government Secondary School
GTC:	Government Technical College
LSO:	Local Support Organization
MINEE:	Ministry of Water and Energy
MINEPAT:	Ministry of Economy, Planning and Regional Development
PIB:	Public Investment Budget
PNDP:	National Community Driven Development Program
PTA	Parents Teachers Association
PVC:	Positive Vision Cameroon
NIS:	National Institute of Statistic
SDO:	Senior Divisional Officer
SPSS	Statistical Package for Social Sciences
SSI:	Semi Structured Interviews
VDC:	Village Development Committee

## PREFACE

This project Citizen reporting Card mechanism (SCORECARD) is intended to assess the perception of the population in our municipality of some public services rendered to them in the domain of water, health, education and council services. The provision of these basic needs is the responsibility of the council and other sectoral ministries. However, the people's attitude and willingness to contribute to community development plays a key role in meeting up with some of the expectations advanced by households regarding the use of public services. As a tool and reference document in planning, implementation, monitoring and evaluation of projects in the primary areas listed above, the Scorecard in our council is highly important.

It has come to foster citizens' participation in the development activities carried out by the councils and promote decentralization via two baskets of Equity and Performance. The interest and relevance of the Scorecard for the Council with the Mayor, the DO, National Community Driven Development Program (PNDDP), the local support organization, Community Initiatives for Sustainable Development (COMINSUD) and other authorities' expectations regarding the implementation of this mechanism are highly valued and appreciated. It seeks to determine the level of involvement of the citizens in identification, planning, execution, evaluation and the sustainable management of council projects in the fields surveyed for the wellbeing of the community in Balikumbat Council Area.

This study indicates the level of satisfaction of the people of the Balikumbat council area with respect to the services rendered by the council. It also indicate the areas that the council is doing well in these four sectors and equally identify gaps or lapse that have to be redressed in these sectors. At the end, it would make recommendations to us all, the Balikumbat Municipal Council executive and the people so we can all work together to redress these gaps for the growth of our council area.

The above action would be carried out by making use of the proposed plan of action put forth by the study for us to use to strengthen our work in the areas we are lacking in. This study is realistic and should be taken as a reference document by the council, technical services, financial partners and other development stakeholders

**The Mayor, Balikumbat Council**



*Warime Augustine Lehdogha*

## **EXECUTIVE SUMMARY**

The government of Cameroon came up with 28 sectors each with a strategic vision that if arrived at will plunge the country to emergence by 2035. Government will through these sectors, transfer powers and resources to local councils who will then be responsible for the management of the resources and implementation of projects. Priority social sectors have been selected; sectors that the government knows will directly impact on the lives of Cameroonians of all spheres of life, thus improving on their socio economic situation.

The main strategy of making development community-driven is to make sure that all actors fully participate at the various levels. The citizen control mechanism has been put in place to facilitate community ownership of development projects. The scorecard program was done in the form of beneficiary questioning and perceptions about the projects implemented in priority sectors for the past years. Citizen reporting card mechanism for public action” (SCORECARD) was conducted with the global objective to capture the populations’ perceptions about their level of satisfaction with public services delivery in four sectors (Water, health, education and council services) in order to promote good governance at the local level, and ensuring increase efficiency in public action. In order to attain these objectives, a perception study was conducted. The data for this survey was collected from 8-13 October 2017 from 320 households in Balikumbat Council Area using questionnaire interviews, analysed using CS pro and SPSS. The sample households were randomly selected.

From the findings of this survey, and concerning water supply it was revealed through the declaration of the households (gathered using questionnaires) that 63.4% of households in the Balikumbat Council Area depend largely on public water sources made up of rivers/springs, wells, boreholes and potable water for water provisions. 69.1% of the household surveyed said their water was of good quality while 15.3% of them who paid an average monthly amount of 406CFA francs for their water source. 62.6% of the households declared that their water source was available throughout the year, 27.8% declared that their water source had a breakdown during the past six month before October 2017. 33.9% of the households expressed the need for water during the past six months and 25.8% of them had their expected met or satisfied while 52.1% of the households were not satisfied with their water supply for various reasons.

With respect to the health sector, 47.7% of the households go to the district hospital, 29.9% go to private health centres while 22.4% go to the Integrated Health Centres (IHC) for consultations. With respect to the preference of the health unit for consultations, 52.4% of the households go to

district hospital, 29.1% to the integrated Health Centres, and 16.1% to private health centres while 0.7% go to traditional healers. With respect to the households whose members have visited a health care unit for the past 12 months, 97.2% of them declared that the personnel were present at the health units, 92.9% said the units were equipped, 100% of them said there were hospitalisation rooms, 99.1% said pharmacies were available and 87% said drugs were present in the pharmacies. Concerning consultation fees, 96.3% of the households pay consultations fees and 55.8% of this portion consider the fees to be high. The major expectation of households 59.3% is the provision of more health care units.

Pertaining to the education sector, 94.4%, 93.8% and 69.6% of the households declared that there were nursery, primary and secondary educational cycles respectively in their villages. With respect to the complete cycles in the area 96.4% households declared that the primary school cycle was complete, 99.1% of them declared first cycle for secondary school was complete while 79.9% of them declared that there were complete second cycle secondary schools in the municipality. Of the households surveyed 100%, 99% and 100% of them said they pay fees in the nursery, primary and secondary cycles of education respectively and more than 75% of them considered the fees high in all three cycles. In terms of repair works carried out when the infrastructure of the schools were damaged, more than 95% of the household declared that the PTAs were responsible for the repairs in all cycles of education in the municipality. With respect to the non-satisfaction with the educational cycles in the municipality, 4.4%, 12.8% and 11% of the households were not satisfied with the nursery, primary and secondary cycles respectively. The community of the Balikumbat Municipality would like to have schools located nearby their household, increase number of classrooms, have the schools equipped and have teacher recruited in the schools.

Concerning the council services, the issuance birth certificate is the service requested most by 23% of the households, and 86.7% of them declared there were rendered good services. 13.5% of the households who requested for this document think that the time lapse taken by the council to process it was long. 61.2% the households participate or are involved in the village/ quarter programming and budget sessions and 40.2% of them are not satisfied with the council services. 45.8% of the households in the municipality would like to see an increase involvement of the population in the decision making process of the Balikumbat Municipality.

Considering the problems identified in the course of this study as well as the proposed solutions to respectively handle the problems, a plan of action has been elaborated and will be implemented in collaboration with all the local development stakeholders.

## GENERAL INTRODUCTION

Citizen Reporting Card Mechanism (SCORCECARD) is one of the widely used tools encouraged by advanced democracies and now in Cameroon, it is used to encourage citizen participations in the local developments of their councils. Government will through some sectors transfer powers and resources to local councils who will then be responsible for the management of the resources and the implementation of projects. Priority social sectors have been selected; sectors that the government knows will directly impact on the lives of Cameroonians of all spheres of live, thus improving on their socio economic situation. This is based on two major scales of Equity and Performance in the council activities and actions, giving the population the chance to score their council activities; while expressing their perception with regard to four sectors of Water, Health, Education and council services. The Scorecard study was first carried out in Cameroon by PNDP in 2010, with only one council from the North West Region (Kumbo) and now this elaborated phase is in 15 councils in the North West Region, Balikumbat inclusive.

This third phase which is regarded as the consolidated phase is more elaborate and it is carried out with scientific partners like the National Institute of Statistics (NIS), World Bank, councils, sectorial ministries concerned, local authorities and selected Local Support Organizations. In the North West Region, the Community Initiative for Sustainable Development (COMINSUD) and Positive Vision Cameroon (PVC) are working for the facilitation of this third phase.

After selecting the two local support organizations, the project was launched at the national and regional level with the putting in place of administrative and technical units. COMINSUD launched SCORCECARD in 7 councils each during the month of September 2017, with Balikumbat inclusive and sensitized the community about the project and its importance. Enumerators who were residents of Balikumbat were call for via the councils and the local media to apply for these 15 placements. The 15 preselected candidates based on gender balance, were trained in Ndop for 3 days by PNDP, NIS and COMINSUD from 5-7) October 2017. After a written test, the first 10 were finally selected as enumerators and they collected the data for the survey from 8-13 October 2017. The survey was carried out across the council area using a six page questionnaire. The households were selected using a statistical technique called second degree random sampling by NIS; and EC-ECAM codes and their cartographic files helped the enumerators to identify the selected 320 houses in Balikumbat Council area. The data was cross checked by the supervisors to correct minor errors, submitted to PNDP, entered into CSPro software, analyzed, the results developed into full reports which are presented with recommendations and a way forward suggested to the Balikumbat Council authorities and

community at large. It is important to note that the socio-political tensions in the Region did not only prolong the time of data collection but it was also very risky to conduct the survey in some areas.

This report comprises four chapters and sections. Chapters 1 and 2 are introducing the SCORECARD, its legal framework and objectives, and the Balikumbat Council area. Chapter 3 portrays the results of the survey in four sections with tables and charts for proper understanding. This chapter contains five main sections used in the six page questionnaire;

- The background information: This to look at the age, sex and position of the individual in the household
- Water sector; it expands on the different water sources in existence, whether it is private or public, their quality; availability, accessibility, affordability, satisfaction and expectations according to the population perception currently.
- Health sector: This assesses the population perception on the types of health units nearest to them, their experiences with the said health unit (s) for the past six months, their preferred mode of treatment, quality; availability, accessibility, affordability, satisfaction and expectations vis a vis health services in Balikumbat Council.
- Educational section assesses the various educational cycles (nursery, primary, secondary and vocational) that exist in village/quarter, the experience for those who have a household member attending any school, quality; availability, accessibility, affordability, satisfaction and expectations according to the population perception in 2016 (before this crises).
- Council services: This portrays different council services like birth certificates, building permit etc and seeks to assess the perception of those who have been involved with any of such service in the past one year(from October 2016); the way they were treated, level of satisfaction and expectations of the Balikumbat Council .

The need of improving the four sectors of water, health, education and council services is urgently needed as declared by the population in figures and percentages. Their dissatisfactions and expectations will help the authorities solve what they need the most with the limited available resources. Some recommendations were made which could help speed up the development of this area.

## **CHAPTER 1: FRAMEWORK OF DECENTRALISATION AND LOCAL DEVELOPMENT IN CAMEROON**

This chapter gives a brief insight on the evolution and laws that have fostered and are still fostering decentralization and local development with focus on municipal councils. Currently the ministry of decentralization and local development is in charge of the decentralization in Cameroon.

### **1.1. Legal framework of decentralisation in Cameroon**

Decentralization is gradually becoming one of the most pursued institutional reforms in developing states. It is embedded with the goal to improve efficiency in service delivery and radically reducing intervening forces or obstacles in service delivery. It empowers various actors along the line to improve on quality, accountability, performance and productivity of whatever service is provided to the public. Cameroon's decentralization Laws came into force since July 2004, with various levels of authorities and local stakeholders striving to ensure that decentralization is actually implemented. Decentralization is a prime mover of development, democracy and good governance at the local level. In its most basic definition, decentralization is the transfer of part of the powers, tasks and resources of the central government to regional or local authorities (Municipal Councils). The Municipality, which is the basic level of decentralization is better able to meet the needs of the people and can defend local interests, enable people to participate in decision making and deliver more efficient basic economic, social, health, educational, cultural and sports services.

Following the implementation of the constitutional provisions of 18 January 1996 in Cameroon, three important laws were voted in June 2004 and passed into laws in July 2004. They are:

- Law No. 2004/017 of 22 July 2004 on the orientation of decentralization in Cameroon.
- Law No, 2004/018 of 22 July 2004 laying down rules applicable to Councils
- Law No. 2004/019 of 22 July 2004 laying down the rules applicable to Regions

The law on Orientation of Decentralization defines in general, the rules applicable to decentralization in the country. It defines decentralization as the devolution of special powers and appropriate resources to Regional and Local Authorities (RLA) for the promotion of development, democracy and good governance at the local level while preserving the unity, territorial integrity and primacy of the state.

The law establishes the Common Decentralization Fund (CDF) for the partially financing of the decentralization process as per the financial implications of devolution of powers. It warrants that the state either through ceded revenue or tax transfers or both shall devolve financial resources to RLA (sect. 22, 23). As per section 66 of the law, the authority of the President of the Republic, the minister in charge of RLA and the representatives of the state in each region (Governors) and division (Senior Divisional Officers) shall exercise supervisory authority over RLA. Section 68 compels instruments or decisions issued by RLA to be forwarded to the representatives of the state who within fifteen days from the issuance of a receipt may request for second reading before such a decision (instrument) becomes binding upon its publication.

Art. 3 of this law states that the council has a general mission of local development and the improvement of the living conditions of its inhabitants. Part III, and section 16 of this law concerning 'powers devolved upon councils' states that powers to provide drinking water supply shall be devolved upon councils. Section 19 is concern with the setting up, equipping, managing and maintaining council health centres in keeping with the health map of the council, as well as assisting health and social centres. Section 20(a) of the same law states that the following power shall be devolved upon councils: in keeping with the school map, setting up, managing, equipping, tending and maintaining council nursery and primary schools and pre-school establishment

## **1.2. Promotion of local development**

Many partners have engaged in the promotion of local developments over the years. Partners like PNDP, FEICOM, NGOs and other international partners like World Bank, etc; have been great promoters of local economic developments. More prominently PNDP and its several projects and trainings for councils like Citizen Reporting Card mechanism.

Local Economic Development (LED) is the process by which public, business, and Non-Governmental partners work collectively to create better conditions for economic growth and development. The aim of this is to improve the quality of life for all. In this respect, collective projects are organized and supervised by the council since it is its duty to promote the economic, social, health, educational, cultural and sports development of the Council Area. This duty is bestowed upon all councils by Law N0 2004/018 of 22 July 2004. According to sections 15, 16, &17 of this law; councils have the power to foster development in the following ways:

- Developing local agricultural, pastoral, handicraft, fishing and farming activities.
- Development of local tourist attractions.

- Building, equipment, management and maintenance of markets, bus stations and slaughter houses.
- Protection of underground surface and water resources.
- Constructing and maintaining unclassified rural roads.
- Contributing to the electrification of areas inhabited by the poor.

Like in most rural areas of Cameroon, the main occupation of the population of Balikumbat is agriculture. From farming and livestock activities and the extraction of local building materials (sand, stones, etc.), they are able to take care of the basic consumable needs of the household while surpluses are sold. The money is used for the education of children and to procure manufactured goods as well as provide shelter for their families. Incomes of household heads range from less than 10,000 FCFA to more than 100,000 FCFA monthly. The low level of household incomes partly accounts for poor living conditions of the inhabitants. Balikumbat council promotes the local economic development by ensuring that all communities have access to basic social facilities. This is illustrated in table 1.1.

**Table 1.1: Contribution of the council to Local Economic Development**

<b>Sector</b>	<b>Activities of the inhabitants</b>	<b>Support provided by the Council</b>
Education	Opening of lay private schools	Provision of PTA teachers Provision of didactic materials to schools Provision of scholarships to poor and needy
Health	Vaccinations, consultations, medicine stores management,	Provision of mutual health schemes to the council area, provision of health equipment to the health units
Water and Energy	Building of tanks, Boreholes, Wells, rural electrification	Protection of water sources, Training of water management committees Planting of water friendly trees Extension of potable water and electricity to communities
Trade	Marketing of products	Ensure security of goods Provision of market spaces Facilitation of loan schemes
Agriculture	Farming,	Promote sale of products through annual

	crop production Rice production, fishing, Wood extraction	agricultural shows, Provision of farm inputs to farmers every season. Provision of storage facilities Opening of farm to market roads
Mines and Industrial development	Sand and stone Extraction, building and construction	Insurance schemes, opening of roads to sand and stone pits,
Governance	Civil registration Elaboration of council development planning process, Promotion of sporting activities	Assisting the vulnerable to establish birth certificates, Sponsoring sporting activities at council level, Provision of holiday jobs to students, Employment of inhabitants to execute temporal projects of the council
Environment and Nature protection	Tree planting campaigns for environmental protection	Provision of trash cans, Provision of public toilet facilities, Creation of dump sites, Provision of trees to fight land degradation environmental management campaigns

### 1.3. Brief presentation of Balikumbat council

#### 1.3.1 History of Balikumbat Council

Before the creation of Balikumbat Council, Balikumbat was under the Ndop-Bafut Council. Balikumbat council was finally created in 1995 and went operational in 1996. Since the creation of this council area, it has been managed by 03 mayors with the pioneer being the previous fon of Balikumbat village. Balikumbat council is presently having 31 councilors

#### 1.3.2 Administrative level

Balikumbat council is situated in Ngoketunjia Division of the North West region of Cameroon. As per the population census of 2005, Balikumbat council area is having a population of 68,537 over an estimated surface area of 320km<sup>2</sup>. The subdivision is bounded to the north by Tubah subdivision, to the west by Bamenda I and Balikumbat subdivisions, to the south by West Region, and to the east by Ndop subdivision.

Balikumbat council area is highly inhabited by the Tikaris, Chambas and Fulanis. The language highly spoken in this council area is Pidgin English.

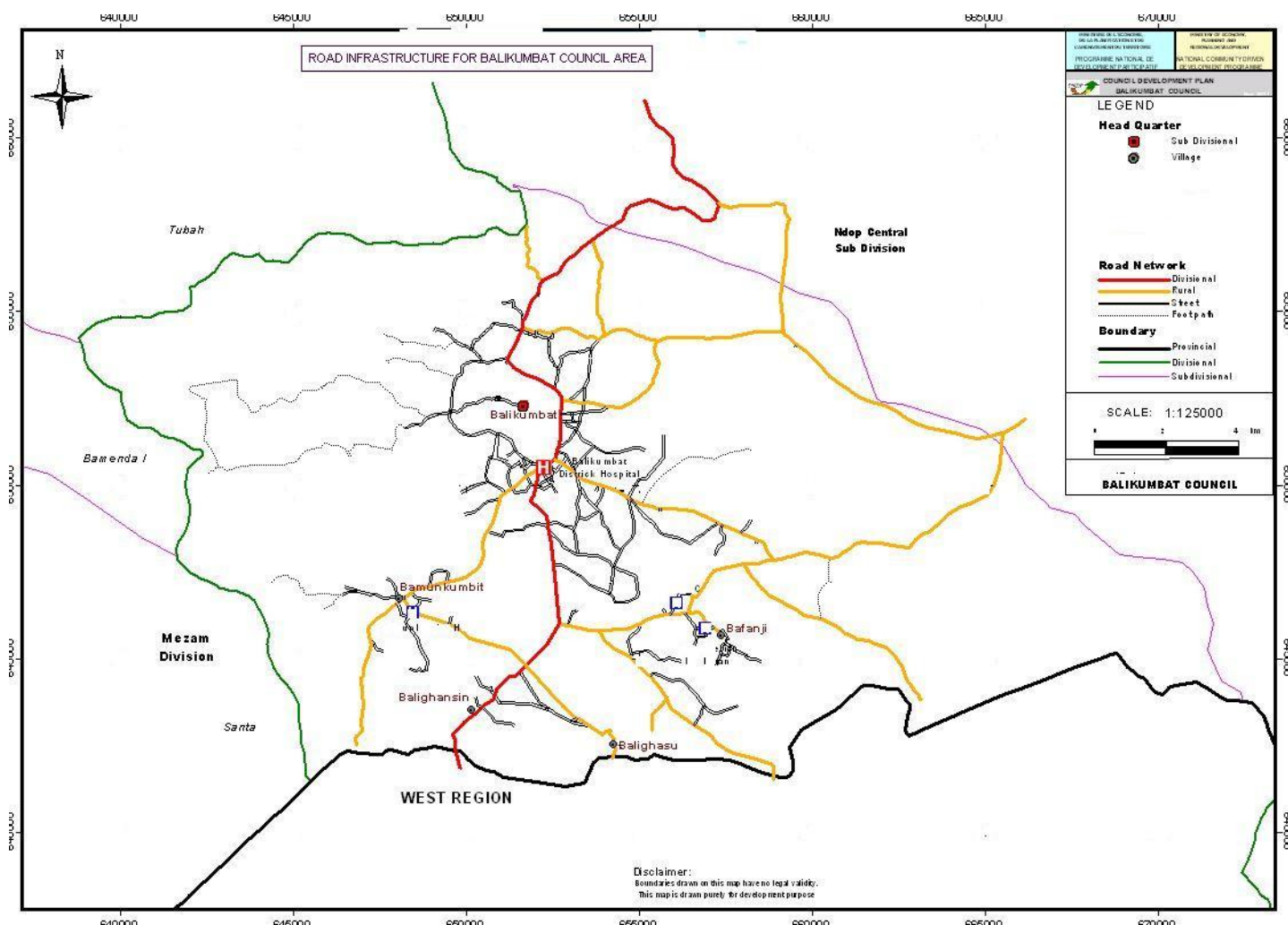
Balikumbat council area is made up of five villages with Balikumbat village being the largest and headquarters of the council. Table below shows the villages and their estimated population per gender in 2005.

**Table 1. 2:** Population per village with gender specifications

Village	sex		Total
	Men	Women	
Bafanji	8753	9137	17890
Baligansin	538	542	1080
Baligashu	1928	2174	4102
Balikumbat	17302	22346	34569
Bamunkumbit	5227	5669	10896

Source: 3<sup>rd</sup> GCPH 2005

**Figure 1. 1:** Map of Balikumbat



Source: CDP Balikumbat 2017

### **1.3.3 Biophysical milieu**

#### ***1.3.3.1 Relief description (Topography)***

The relief is both undulating gentle slope and hills. Attitude ranges from 600-1500mm above sea level with a plateau. The undulating sloping nature of the land favours dispensation of eroded material from the hills thus rendering the soils in the plains fertile. The nature of the plateau favours the cultivation of food crops like rice. Settlement is highly observed in the plains.

#### ***1.3.3.2 Hydraulic and Climate description***

##### **a) Hydraulic**

Balikumbat is situated on the upper part of the Ndop plain. All the water bodies from the Mezam highland take their rise in the Balikumbat sub division before reaching the Ndop plain.

Most of the water found in Balikumbat sub division is in Marshy areas. Only few streams flow across Balikumbat sub division where local fishing is taking place. Some of the water is used for farming, especially for crops like tomatoes, okro, pepper, groundnuts and rice.

The types of fish present in this water bodies are Tilapia, mudfish and the smaller types locally called milleunisi (Njanga). Also sand is extracted from these streams by individual as a source of living.

##### **b) Climate**

Balikumbat council area is characterized with the equatorial type of climate. The climate of this area is made up of two distinct seasons which are the rainy season and the dry season. The rainy periods usually starts from the month of March (ending March) and extends to ending November. The dry season usually starts in November till March and at times extends to April. This council area usually experiences an annual rain fall ranging between 1700mm to 2200mm.

The average daily temperatures are between 24<sup>0</sup>c and 27<sup>0</sup>c. The hottest periods are observed during the days in the dry season the coldest periods in the night and morning. The temperature of this area favours the cultivation of food crops.

#### ***1.3.3.3 Soil description***

The soils of this area ranges from volcanic soils, loam soils (in the plains) and feralitic soil (reddish soils on mountains or slope).The soils are purely reddish up the hills and very dark in the plains hence a good potential for the cultivation of crops like groundnuts, maize, plantains, beans,

coco-yams, rice, oil palm, Robusta and Arabica coffee. Erosion is common since the savanna zones are sparsely vegetated.

### ***1.3.3.3 Fauna and Flora description***

#### **a) Fauna**

Despite the uprising degradation of vegetation (especially the forest by bush fire), there is still the presence of animals like the red Monkey, Rabbits, cane rats and rat moles. Domestic animals are also kept for personal use. Some of these domestic animals include pigs, goats, sheep, dogs and table birds. These animals are sold in times of hardship thus serves as a means to preserve money. These domestic animals help for payment of school fees, bride price and death celebrations.

#### **b) Flora**

Balikumbat sub division is highly covered with grass and with patches of secondary forest along the slopes. There are galleries of forest down the marshy valley, which are gradually exploited for fuel wood. Some shrubs found in this council area include Hypericaceae, leae genesis, Aspilia African, Azonopus SP, Macaranga SP, Tinonia diversifolia, Elephantus SP, Chromolean Odorata and Hurungana madagascarensis

## **1.3.4 Thematic maps and Main Potentials and Resources of the Council**

### ***1.3.4.1 Thematic maps***

#### **1.3.4.1.1. Health**

Balikumbat council area is having 03 government health centers of which 01(in Balikumbat) is a medicalized health center. There is also the presence of a Presbyterian health center in Bafanji.

#### **1.3.4.1.2. Basic and Secondary Education**

Balikumbat council area is having 12 government primary schools with only Baligansin not having one. All the villages that make up this council area have government primary schools.

At the secondary level, This council area has two government high schools, 03 government secondary schools and 01 Government technical college.

#### **1.3.4.1.3. Water and Energy**

Only 2 villages (Bafanji and Balikumbat) are supplied with electricity from ENEO.

The situation of potable water in this council area is poor and there is a need for rehabilitation and construction of new water catchments.

### ***1.3.4.2 Main Potentials and Resources of the Council***

#### **1.3.4.2.1. Mineral resources**

Balikumbat council area has potential resources such as sand, clay, stones, and laterite. These resources are exploited by individuals for personal use. Legalized quarries are not found in this council area and hence the mineral resources are illegally exploited.

#### **1.3.4.2.2. Protected areas.**

There is a man-made forest created by the council and natural patches of forest which can serve as forest reserves. These are the main protected areas in Balikumbat council area.

## **CHAPTER 2: METHODOLOGICAL FRAMEWORK OF THE SCORE CARD STUDY**

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

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

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

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

### **2.2. Objectives and Methodology of CRCM Study**

#### **2.2.1 Objectives of CRCM**

The global objective of this survey was to capture the populations' perceptions about their level of satisfaction with public service delivery in the targeted sectors to promote good governance at the local level, ensuring increase efficiency in public action. This means ensuring that best public services are offered, public policies are well conceived and designed and provisions are made to ensure that the voice of the vulnerable and marginalized population is heard.

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

- Appreciate the population's perception on public services in the targeted sectors (water, health, education and council services).

- Build the capacities of councils, enabling them to capitalize on the lessons learnt and effect changes and equally following the results of the operation.
- Empower councils and local development actors with the capacity to replicate this operation after successive periods.

### **2.2.2 Methodology of CRCM**

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

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

Secondary data was also used for this study. This data was sourced from existing documents like the recent council development plan of Balikumbat.

## **2.3 Sample Methodology**

### **2.3.1 Sampling method and Constitution of the sample**

The SCORECARD sample is designed to obtain estimates of household satisfaction indicators with respect to the following sectors at the level of the councils: Water, Health, Education and Council Services. In the North West Region (NWR), 15 councils were involved namely: Ndop, Tubah, Ndu, Nkambe, Kumbo, Jakiri, Bafut, Wum, Mbengwi, Batibo, Fundong, Belo, Balikumbat, Balikumbat and Oku.

The sampling frame used consists of the Enumeration Areas (EAs) <sup>1</sup>of the cartography of the Fourth Cameroonian Survey of (ECAM 4) and its Complementary Survey (EC-ECAM 4) carried out by the National Institute of Statistics (NIS). The SCORECARD sample is a stratified one drawn at two stages. The different strata are obtained by combining the 159 concerned councils

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<sup>1</sup>An EA is a portion of the territory bounded by visible details and in principle contains between 700 and 1,100 inhabitants, or between 140 and 220 households on average. For the purpose of the 3<sup>rd</sup> GPHC, the Cameroonian territory was divided into 17 800 ZD which constitute the basic units.

for SCORECARD and their corresponding two strata of residence (semi-urban / urban, rural), which gives a total of 318 defined survey strata.

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

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

### **2.3.2 Distribution of the sample**

The 4,802 households sampled in the NWR were distributed among 276 sampled EAs. Out of the total sampled households and EAs in the Region, the “Balikumbat Council” had 320 households distributed among 20 EAs. At the end of the conduct of the SCORECARD survey, all EAs were covered and out of the 320 sampled households drawn from this council area, 296 households were successfully identified and interviewed, giving a coverage rate of 92.5%.

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

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

### **2.3.4. Sample frame and selection of clusters**

The drawing of the SCORECARD sample was based on that of the EC-ECAM4, which was based on the results of the last General Population and Housing Census in 2005 (3<sup>rd</sup> GPHC 2005) in Cameroon. The base for drawing the primary sampling unit for SCORECARD is the same as the

base for drawing the primary sampling units for the EC-ECAM4 survey which resulted from a two-stage sampling.

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

### 2.3.5. Selection of households

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

The following table provides a breakdown of the number of EAs, sample households and households successfully interviewed in Balikumbat Council.

**Table 2. 1:** Distribution of the number of sampled EAs and households interviewed by council in the councils covered by COMINSUD.

Council	Number of EAs			Number of households previewed in the sample	Number of households successfully interviewed	Coverage rate of households successfully interviewed (%)
	Urban/ Semi-urban	Rural	Total			
⇒ Balikumbat	3	17	20	320	296	92.5
Jakiri	6	14	20	320	290	90.6
Kumbo	19	0	19	321	278	86.6
Ndop	9	9	18	321	307	95.6
Ndu	4	16	20	320	279	87.2
Nkambe	5	15	20	320	306	95.6
Oku	6	12	18	320	311	97.2
<b>Total</b>	<b>52</b>	<b>83</b>	<b>135</b>	<b>2242</b>	<b>2067</b>	<b>92.2</b>

Source: SCORECARD, 2017; PNDP North West Region

## 2.4. Questionnaires and Manuals

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

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

- Signage : Household identification
- Portable water
- Health
- Education
- Council services

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

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

The training of the pre-selected candidates for the final selection of interviewers or controllers for the fieldworks was done in 12 days and 4 groups of persons were trained for 3 days each in four different chosen centres:

- **Ndu training centre** : for the training of pre-selected candidates from the Nkambe, Ndu and Kumbo Councils,
- **Ndop training centre** : for the training of the pre-selected candidates from the Jakiri, Ndop, Oku and Balikumbat Councils, and the

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

Towards the end of the training period, candidates spent time to practice simulated interviews in Pidgin-English, in English and in the various local languages spoken in the concerned councils.

On the emphasis laid on field practice, a day was dedicated to this practical phase of the training in order to make the field agents confront the realities on the field.

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

For various reasons, several households sampled could not be interviewed during the normal collection period and consequently, a catch-up organized for the location and interviewing of those temporarily absent households. This activity was done from the **21<sup>st</sup> October** 2017 to the **23<sup>rd</sup> October** 2017. The purpose of this activity was to improve on the success rate of responses from households.

## **2.6. Community sensitisation and awareness.**

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

## **2.7. Data processing**

Data entry and processing was done using the software version 6.3 of CSPro. The agents selected for the data entry attended a 3-day training course to familiarise themselves with the operating tools (questionnaires, data entry application) of the SCORECARD survey. The actual entry started on 16/10/ 2017 and ended on 23/10/ 2017. In order to ensure quality control and to minimise typing errors, all the questionnaires were double-entered, and internal consistency checks were performed. The errors detected were systematically corrected.

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

## **CHAPTER 3: MAIN RESULTS OF THE STUDY, CONCLUSION AND RECOMMENDATIONS FOR IMPROVEMENT**

This chapter deals with the analysis and presentation of the general results of the survey in the four sectors namely water, health education and council services. The main aim of this survey is to promote good governance at the local level, and increase the efficiency of public action (The best public services offered, the clearest Conception of public policies); make the voice of the vulnerable and marginalised population heard. The level of satisfaction or non-satisfaction of community of Balikumbat council is used as an indicator for the rate the services rendered to the community in the four sectors surveyed.

### **3.1 Presentation of the sampled population**

This section of the study seeks to present characteristics of the sampled population (Respondents and household head). It focuses on the age and sex as characteristics. The histogram and camamber below will be used to illustrate the distribution (%) of the sampled population per sex and age group in *Balikumbat Council*

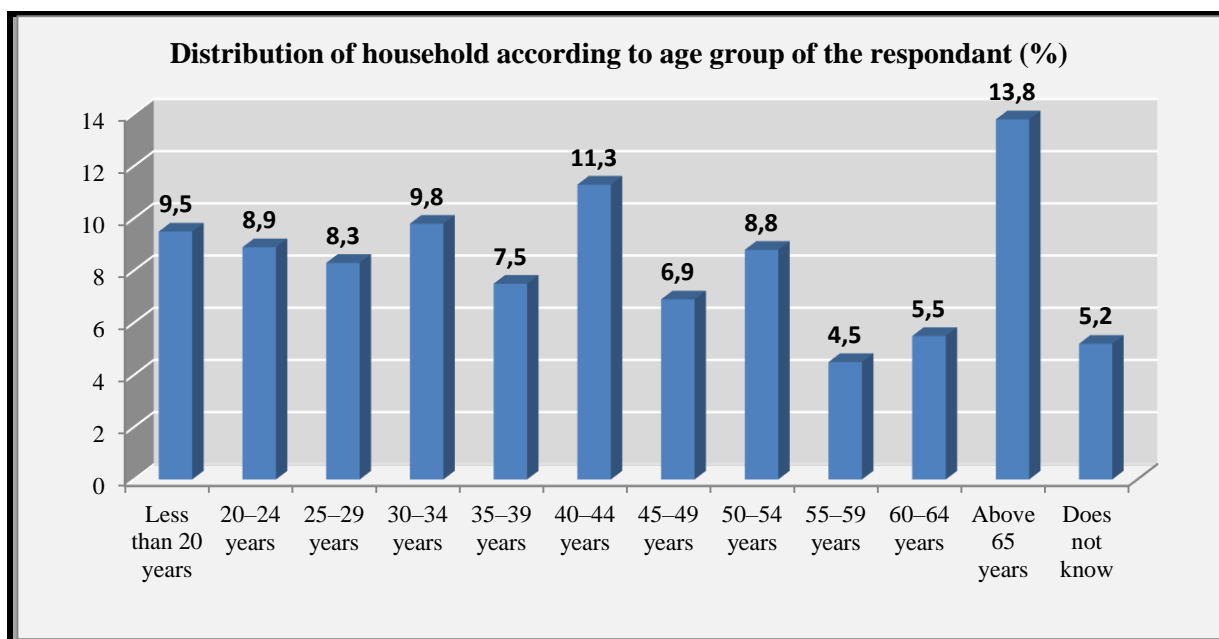
#### **3.1.1 Characteristics of the respondents**

The scorecard survey took into consideration the characteristics of respondents in terms of age and sex. This was to get an insight into the age and sex composition of respondents that took part in this survey. These information are presented respectively on the figures 3.1 and 3.2 below

##### **3.1.1.1 Distribution of respondents by age group in Balikumbat council**

The respondents of this municipality cut across all the age groups, showing that every age group is interested in the developmental actions in the community; however, among the respondents in the council area, there are more persons above 65 years (13.8%) followed by the middle age group 45-45 years(11.3%). It's important to notice that 26.7%, more than the one fourth of the respondents aged less than 30 years old.

**Figure 3. 1:** Repartition (%) of respondents by age group

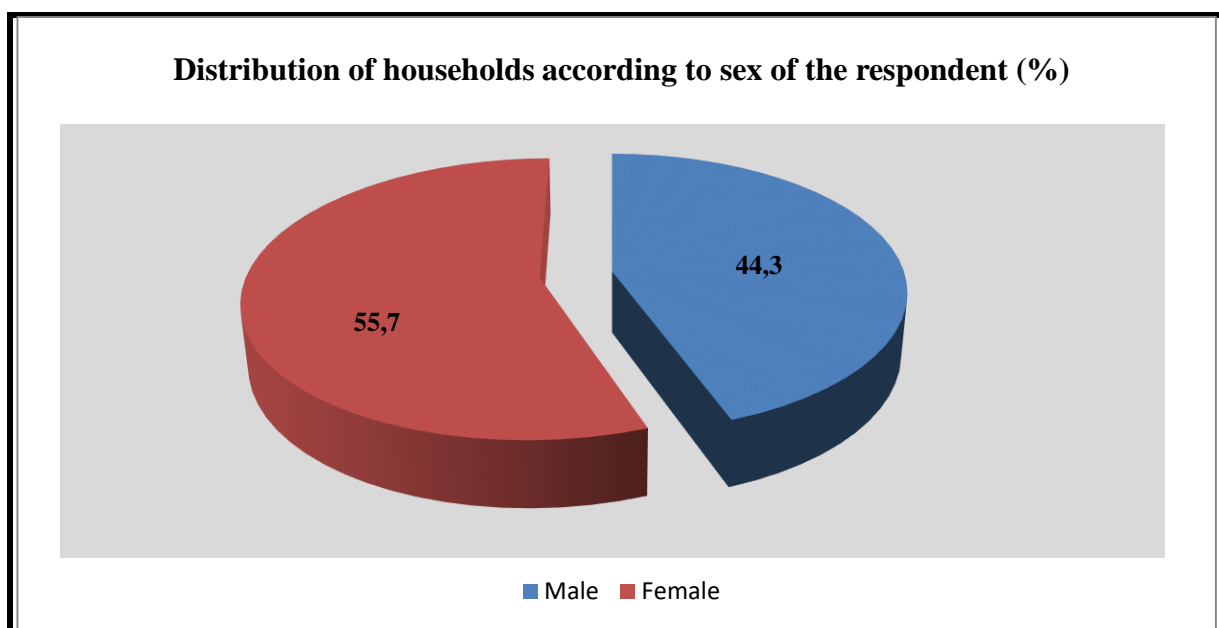


Source: SCORECARD survey, Balikpapan council November 2017

### 3.1.1.2 Distribution of respondents by sex in Balikpapan council

The question about sex of the respondent of the questionnaire for each household has also been asked during the survey. The result came from analysis of this variable show that in Balikpapan subdivision 55.7% of the respondents were women.

**Figure 3. 2:** Repartition (%) of respondents by sex



### 3.1.2 Characteristics of the Household head

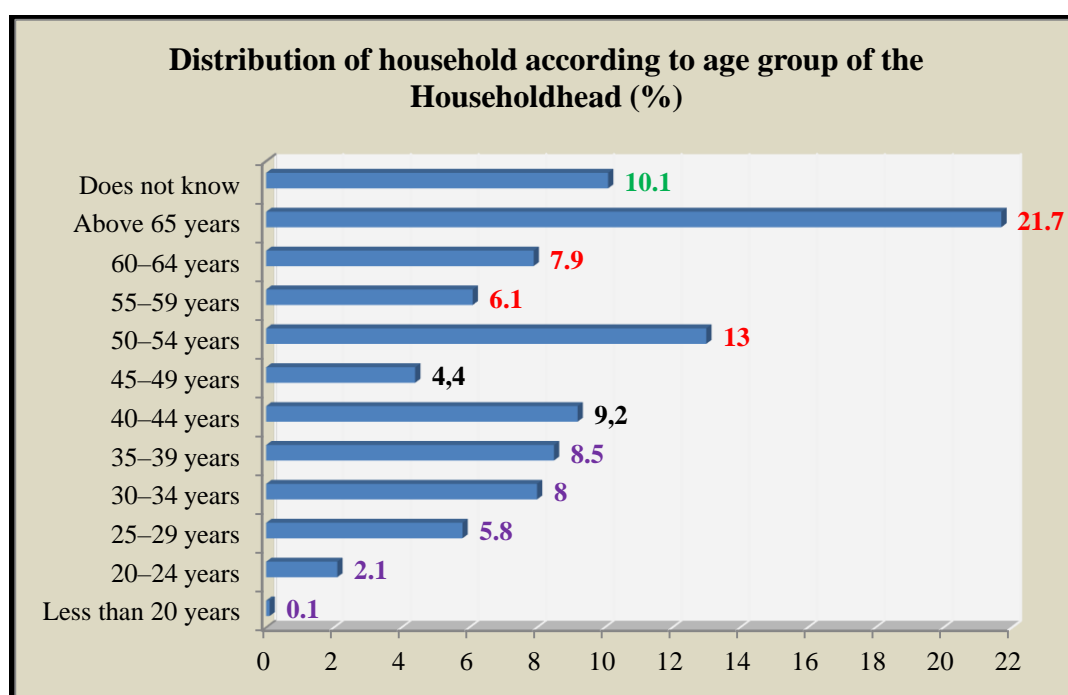
During the study, information about age and sex of the household head has been taken. The responses of those questions were given by the main respondent who could be the household head himself or not.

#### 3.1.2.1 Distribution of Household head by age group in Balikumbat council

The analysis of the chart below show that almost (48.7%) half of the household heads found in the selected household aged at least 50 years old and one household out of 4 (24.5%) has as his head a person aged less than 40 years old.

Sometimes, due to the absence/unavailability of the household head who were supposed to be the main respondent for the household, the respondent was another member of the household (aged 15 years or more). This member did not know the age of the head of household all the time. Thus, for 10.1% of the households selected, the age of their head was unknown.

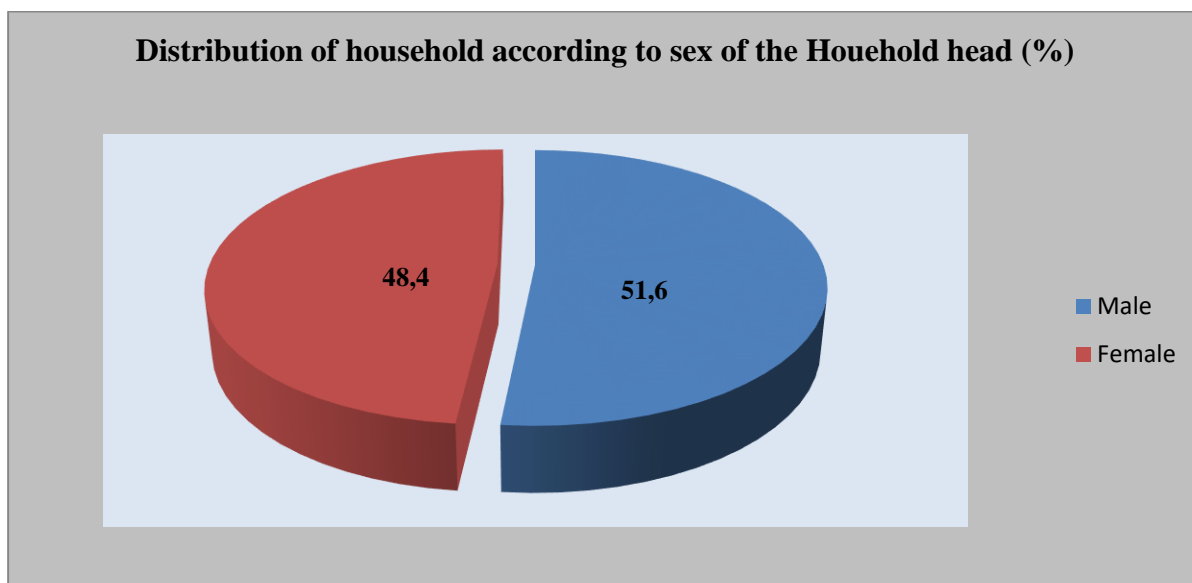
**Figure 3. 3:** Repartition (%) of household head by age group



#### 3.1.2.2 Distribution of Household head by sex in Balikumbat council

Pertaining to gender, Almost half of the selected households for the study has at their a man (51.6%). The other half (48.4%), has a woman as household head.

**Figure 3.4:** Repartition (%) of Household head by sex



### 3.2. WATER SECTOR

Water is one of the most essential resources necessary for life. It is even said that water is life so the availability of water for a community is very important. This section seeks to identify the different types of water supply systems existing in the council area and the portability of one mainly use according to the declaration of the households.

In addition to the existence of the water supply systems, it also seeks the availability throughout the year of the water at the main public water point used and the accessibility through the time taken to go on foot fetch water and back by households.

This section also discusses the state of public water points mainly used by households, the needs for drinking water supply during the last 6 months preceding the survey and the level of satisfaction, the needs and expectation in terms of water supply in the community.

Several sources of water are available in the municipality. They are:

- a. Well equipped with a pump. This refers to a well equipped with a manual pump, the operation of which is likely to ease water sourcing during the supply process.
- b. Open pit well: As the name implies, it is a well pit that is exposed and is a form of an unprotected well. This means that it is not protected from run-off waters and/or not protected from bird's droppings and animal dungs.
- c. Protected well: A well protected from run-off waters by a shaft lining or a well casing constructed above the ground level and a platform that channels overflowing water.

Furthermore, a protected well is covered a bit to remain out of bird's droppings and animal dungs.

- d. Spring/ river: A spring corresponds to a spot where water comes out of the ground in a natural way. As to a river, it corresponds to surface water. Water flows into a river, dam, lake, pond and irrigation canals from which it is directly drawn.
- e. Tap water: This modality takes into account water that has undergone a prior treatment process in a bid to become drinkable and which are later on channelled to the residential areas (CDE, CAMWATER...).
- f. Boreholes equipped with manual pump: deep hole dug or drilled for the purpose of reaching the groundwater. Pipe / boreholes are made of ducts or pipes, whereby holes, of modest diameter, are protected from collapse and infiltration of runoff. Water is routed from a tube well or borehole by a hand pumps.

### 3.2.1 Availability and usage of Water Supply Schemes in the Balikumbat Council Area.

#### 3.2.1.1 Availability of water supply schemes

From the data displayed on Table 3.1 below, 36.7% and 35.2% of households reported that their village/neighbourhood has Access to Spring/River and tap water (pipe borne water) respectively, suggesting that these are the most common in this locality.

Other available sources of water supply systems as declared by the population include: Open pit well (1.9%), Protected well (11.1%), Boreholes equipped with manual pump (6.1%) and well equipped with a pump(1.9%). It is evident from the opinions of the household as displayed on the table below, that Spring/River and tap water (pipe borne water) are the major water supply systems available in most communities in the Balikumbat council area.

**Table 3.1:** Water supply schemes available (%)

	water supply system					
	<i>Well equipped with a pump</i>	<i>Open pit well</i>	<i>Protected well</i>	<i>Boreholes equipped with manual pump</i>	<i>Spring/ River</i>	<i>Access to tap water (pipe borne water)</i>
<b>Total</b>	1.9	16.1	11.1	6.1	36.7	35.2

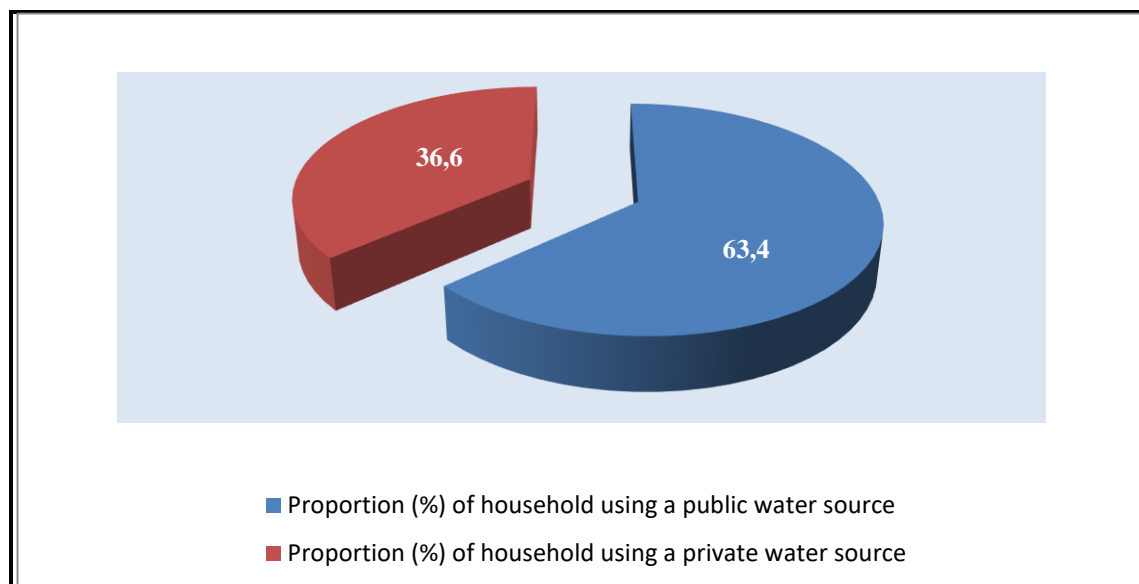
Source: SCORECARD survey, Balikumbat council November 2017

### 3.2.1.2 Usage of water supply schemes

Of the several sources of water available in the area, a household may have access to more than one source of water supply. These water supply systems in the Balikumbat neighbourhood can be classified into two, public (open use) and private (restricted use) as can be seen on the figure below. This section seeks to determine the main public source of water used in households and the type.

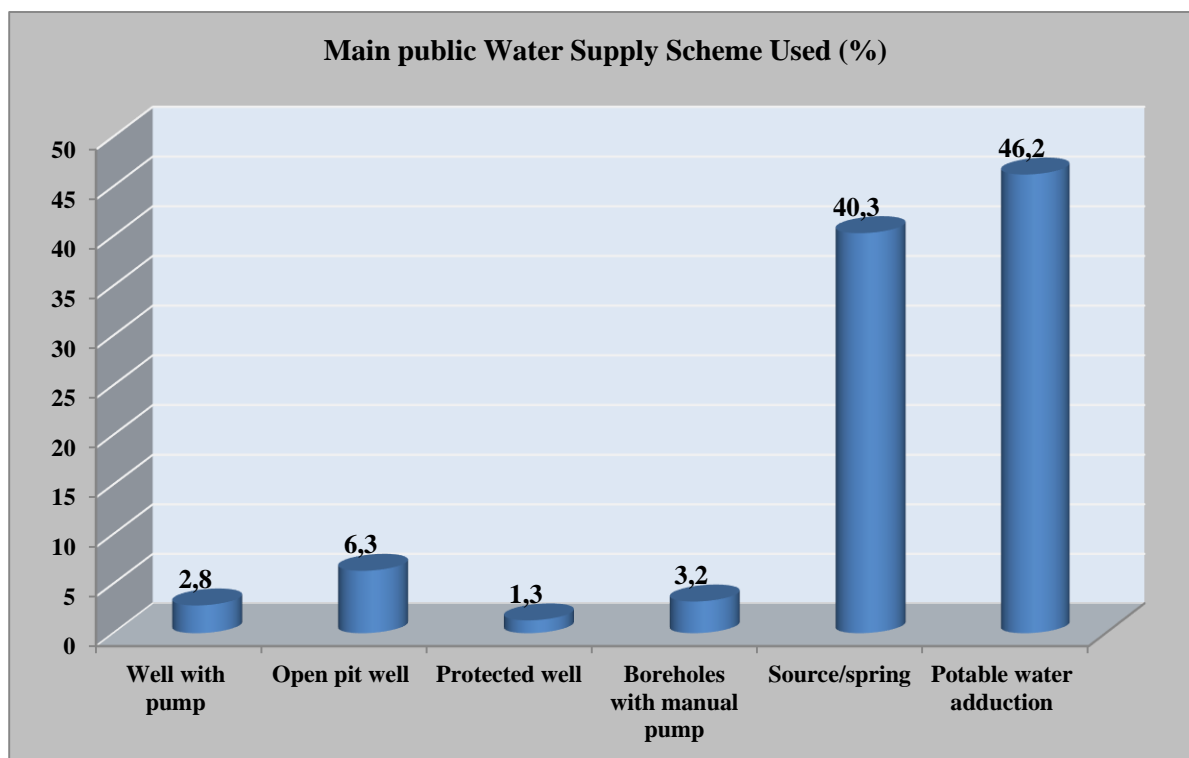
Although there are two major sources of water supply systems in the Balikumbat council area notably public and private, according to figure 3.5 below, the households are mostly dependent on public water supply systems as declared by almost two third (63.4%) of them.

**Figure 3. 5: Partitioning of households according to the entity supplying their main source of Water**



Among the households which use public Water Supply Scheme, 46.2% and 40.3% declared that their main public water source is the *Potable water adduction and River/spring* respectively. Only 6.3% declared having *Open pit well* as public Water Supply Scheme Used This is clearly painted on the figure below.

**Figure 3. 6: Distribution (%) of Households According to the Main Water Supply Scheme Used**



### 3.2.2 Cost and quality of water services

#### 3.2.2.1 Cost of water service

In addition to information on the availability and usage of water supply system in the community, the study also captured the household's opinion on free water, average cost paid by household for water and the quality of water.

From the table below, just a very small proportion of the households (15.3%) indicated that they pay for the water they get from the public water supply system in their locality. This means that the remaining majority (of more than 80% of the population) doesn't pay for water in their neighbourhood.

Households that pay for water at their main public water supply system, pay on average 405.9 CFA F per month and in their majority judge this amount reasonable (77.5%). This amount was considered high by 18.1% and insignificant by 4.4% of them.

**Table 3. 2:** Distribution % of households in Balikumbat Council following their appreciation of the amount they pay for using the main source of public water and cost.

	Proportion (%) of households paying for water at the main public water source they are using	Average monthly expenditure (CFA Francs) for households which pay for water	Partitioning (%) of households, paying for water, per appreciation of the amount paid			Total
			High	Reasonable	Insignificant	
<b>Total</b>	15.3	405.9	18.1	77.5	4.4	100.0

Source: SCORECARD survey, Balikumbat council November 2017

### 3.2.3.2 Quality of public water mainly used

The quality of the public water used by households in the municipality was also given special attention. It was captured by means of three criteria: the smell/odour, the colour and the taste.

The analysis results of the questions related to quality of water in table 3.3, shows that the majority of household declared that the public water they use does not have odour/smell (72.2%), does not have taste (76.2%) and does not have colour (68.0%).

In overall, almost seven households out of ten declare that the public water supply source they mainly use is of good quality (69.1%).

**Table 3. 3:** Appraisal of the quality of main water supply source used according to some criteria by the households.

	Proportion (%) of households reporting that the main source of public water supply used is of good quality	Proportion (%) of households who have declared that the main public source of water		
		<i>Does not have odour/smell</i>	<i>Does not have taste</i>	<i>Does not have colour</i>
Total	69.1	72.2	76.2	68

Source: SCORECARD survey, Balikumbat council November 2017

### 3.2.3 Appreciation of Availability and accessibility of water at the main public Water Supply source used by the household in the Balikumbat Council Area.

The objective of this sub section was to see the daily access (at any moment) and the yearly availability of water at the main public water supply source used by the households, time taken by the member of the household for a round trip to get water, as well as how they see the current state of service delivery regarding water supply (break down of water point and maintenance).

#### 3.2.3.1 Availability and accessibility of water frequency

According to the results displayed on table 3.4, about 62.6% of the household whose main source of water supply is public declared that the water was available throughout the year and the majority of households (95%) held that they even have access to this water point at any moment of the day. That is to say that they can fetch water from the main public supply source throughout the day without disruption.

Regarding, the time needed for households to go on foot fetch water and come back, the majority of households (55%) of declared that they use less than 15 minutes to complete a round trip and 7.5% has water on their spot. Three households out of ten (29.5%) declared that their member who use to carry water need between 15 and 30 minutes, and only 8.1% need more than 30 minutes to go on foot fetch water and return home.

**Table 3.4: Yearly availability, daily access to water point and time taken to get water and back**

	Proportion (%) of households with water from public main source available throughout the year	Time taken to go on foot fetch water and back				Proportion (%) of households having access to main public water source used at any moment of the day	Proportion (%) of households whose frequency to access to public main water source used corresponds to their need for water
		On the spot	Less than 15 minutes	between 15 and 30 minutes	More than 30 minutes		
Total	62.6	7.5	55.0	29.5	8.1	95.2	*

*Source: SCORECARD survey, Balikumbat council November 2017*

- Brackets means that the sample size was between 30 and 49 and so it did not permit generalisation for the entire municipality

- \*Asterisk means that the sample size was below 30 and is therefore insignificant for any analysis.

### 3.2.3.2 Service delivery regarding water supply

The availability of water and access to the water point also depend on the maintenance services of these water points. This study was also interested in the state of the public water point during the last 6 months preceding the survey, and in case of breakdown, the time elapsed before the return to service.

As regards this aspect, the confined data in Table 3.5 shows that about 27.8% of the households in the municipality whose main source of water is public declared that their source of water had a break down during the last six month preceding the survey. Among the households that reported that the public water point they use was down during the said period, 29.9% said the water point return into service (after repairs) in less than a week, 25.3% between a week to a month, 33.1% said it took from one month but less than three months while 3.6% declared that it took more than three months to return to service.

However, for 8.2% of households sourcing mainly from public water points that have experienced a breakdown in the last 6 months preceding the survey, the return to service of this water point is still awaited.

**Table 3. 5:** Breakdown and Time taken to return into service of the main public water source during the last six months

	Proportion (%) of households who have declared a breakdown of the main public water source used in the course of the past six months	Time taken to return into service					Total
		Less than a week	Between a week and a month	Between a month excluded and three months	More than three months	Not yet	
Total	27.8	29.9	25.3	33.1	3.6	8.2	100

Source: SCORECARD survey, Balikumbat council November 2017

When the public water point used by households is out of service, in the majority of cases (53.5%), re-activation is done by the Village/ quarter head as reported by households. 20% of households affirmed that the breakdown was resolved by mayor and 31.2% by the Water management committee.

As a whole, the households of the municipality of Balikumbat are unanimous that when the water points are down, CAMWATER/SNEC/CDE and the State (MINEE), do nothing for the return to service of these public water points.

**Table 3.6:** Proportion (%) of the households according to the body who repair the breakdown of water point during the last 6 months preceding the survey

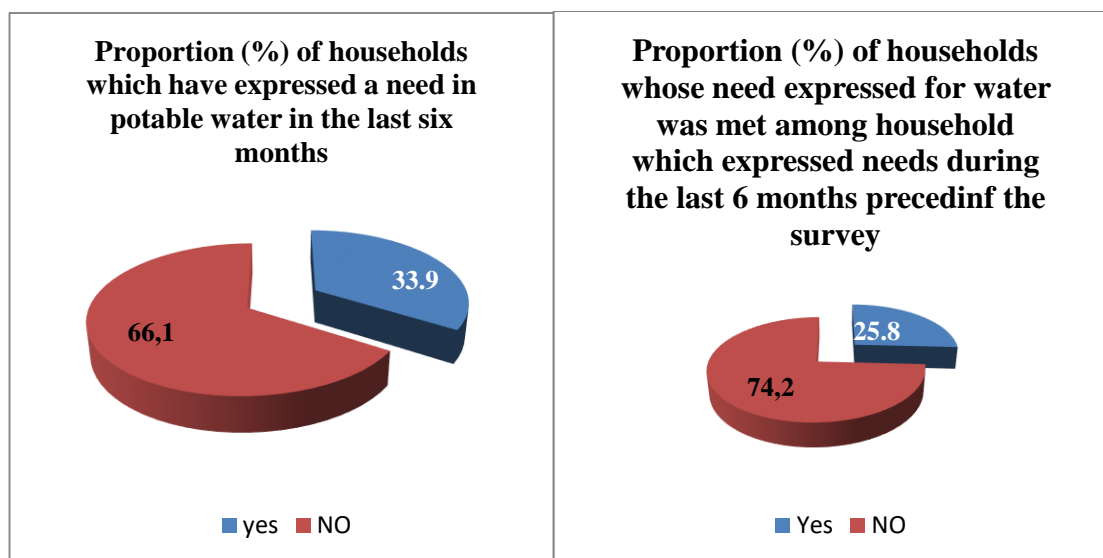
Proportion (%) declaring that the breakdown declared was resolved by the:						
Mayor	State (government services)	Elite	Water Management Committee	village/quarter head	CAMWATER/SNEC/CDE	others
20.0	0.0	8.1	31.2	53.1	0.0	6.9

Source: SCORECARD survey, Balikumbat council November 2017

### 3.2.4 Need for drinking water supply during the 6 last months preceding the survey

The study also examined household needs in terms of drinking water supply. According to the data in Figure 3.7, one household out of three (33.9%) expressed needs. Among those who expressed the needs, only 25.8% of the household saw their needs expressed for drinking water met.

**Figure 3.7:** Needs expressed in water supply and fulfilled expectations



Source: SCORECARD survey, Balikumbat council November 2017

Concerning the body to whom population express their needs in terms of drinking water supply, Table 3.7 shows that the households declared that they mainly expressed their needs to the village/quarter head (33.9%), the mayor (26.3%), an elite (23.6%) and the Water Management Committee (18.5%). Only few household expressed their needs to the State (3.1%), the Administrative Authority (3.6%) and Camwater/SNEC (6.2%). this very small proportion of households having expressed their needs to the state and CDE can explain the fact made above that these two entities did not repair the public water points when they were out of order.

**Table 3.7:** Proportion (%) of households which have expressed a need for potable water provision in the last six months according to the body to which they express their need.

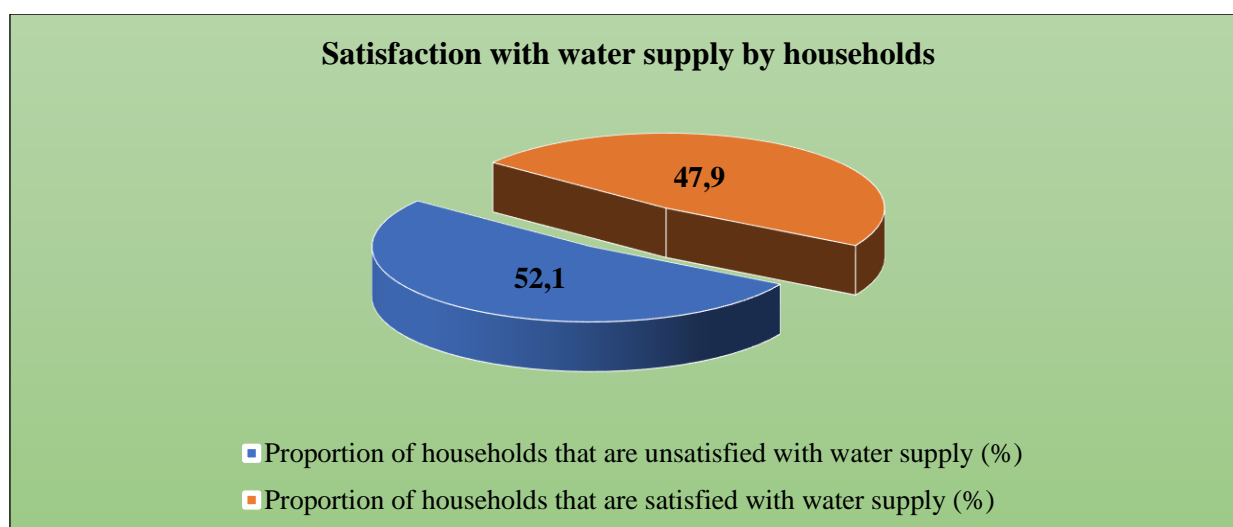
Body to which households have expressed their need during the last 6 months before the survey							
To the Mayor	To the State (government services)	To an Elite	To the Water Management Committee	To the village/ Quarter head	To the Administrative Authority	To Camwater/ SNEC	To others
26.3	3.1	23.6	18.5	33.9	3.6	6.2	22.4

Source: SCORECARD survey, Balikumbat council November2017

### 3.2.5. Satisfaction and expectations in terms of drinking water supply in the community

Overall, the households in Balikumbat municipality are not satisfied with the water supply in their community (52.1%) (Figure 3.8).

**Figure 3. 8: satisfaction with water supply**



Source: SCORECARD survey, Balikumbat council November2017

The main reasons for non-satisfaction advanced by the households are the poor quality of water (64.8%), the number of points insufficient (34.8%), the distance from the water point (34.8%). 48.3%), poor management of water points (18.9%) and maintenance in the event of failure of a water point (11.3%). Only 1.4% of households are not satisfied because of High cost of water provision (Cf.table 3.7).

**Table 3.8:** Proportion (%) of households unsatisfied with the water supply according to the reason of non-satisfaction

Reasons of dissatisfaction with water supply in the community (%)						
Far distance of the water point	Poor water quality	Insufficient water points provision	Management of water points	Lack of/Slowness of maintenance in case of a breakdown	High cost of water provision	Others
47.2	64.8	34.8	18.9	11.3	1.4	27.6

*Source: SCORECARD survey, Balikumbat council November 2017*

In addition to the level of dissatisfaction and the reasons for dissatisfaction, the survey also helped to capture households' expectations for drinking water supply. Table 3.8 shows that households in the commune are mainly expecting an increase in the number of water points 42.9%, an improvement of the quality of water in the existing water points 22.2%, a reparation of the damaged water points 13.1%, an improvement in terms of the management of the existing water points 17.3%. For few of households, a Reduction of prices to access water 0.8% is their expectation while 21.4% of them have other expectations than the one specified.

**Table 3.9:** Proportion (%) of households in Balikumbat Council according to expectations in water supply

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

42.9	17.3	13.1	22.2	0.8	21.4
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Source: SCORECARD survey, Balikumbat council November 2017

### 3.3: HEALTH SECTOR

As the popular saying goes, “health is wealth”. Health comes at the centre of most if not all development endeavours. In Cameroon, health services are provided by both the private and the public sectors and are largely a responsibility of the government under the supervision of the ministry of public health. When talking local development, health cannot be left out as it is one of the major sectors that are widely taken into consideration when making policy. Access to healthcare services is critical to good health, yet semi urban and rural residents face a variety of access barriers. The major impairments to accessing healthcare services in most local communities has to do with affordability, proximity, and quality compared with what obtains elsewhere especially in big towns and cities. The population’s ability to benefit from good/quality health care depends on the availability of healthcare units, the cost of benefiting from such services/units, the time they have to cover in order to benefit from one, and the quality of such units in terms of personnel, equipment, and medication. Health care institutions are either managed/run by the state or the private sector. Health care units from the public sector are made up of: the public Hospital, health care unit (IHC/HC/Dispensary/PMI), the Sub-divisional medical Centre (CMA), any other public medical centres. Private health care units from the private sector comprise: lay Hospital/private Clinic, private denominational Hospital, private Pharmacy, Physician’s office, Health Centre, denominational/Dispensary, and any other private medical structure.

#### 3.3.1. Availability, accessibility and usage of health units in Balikumbat Council

##### 3.3.1.1 Availability and accessibility of health units

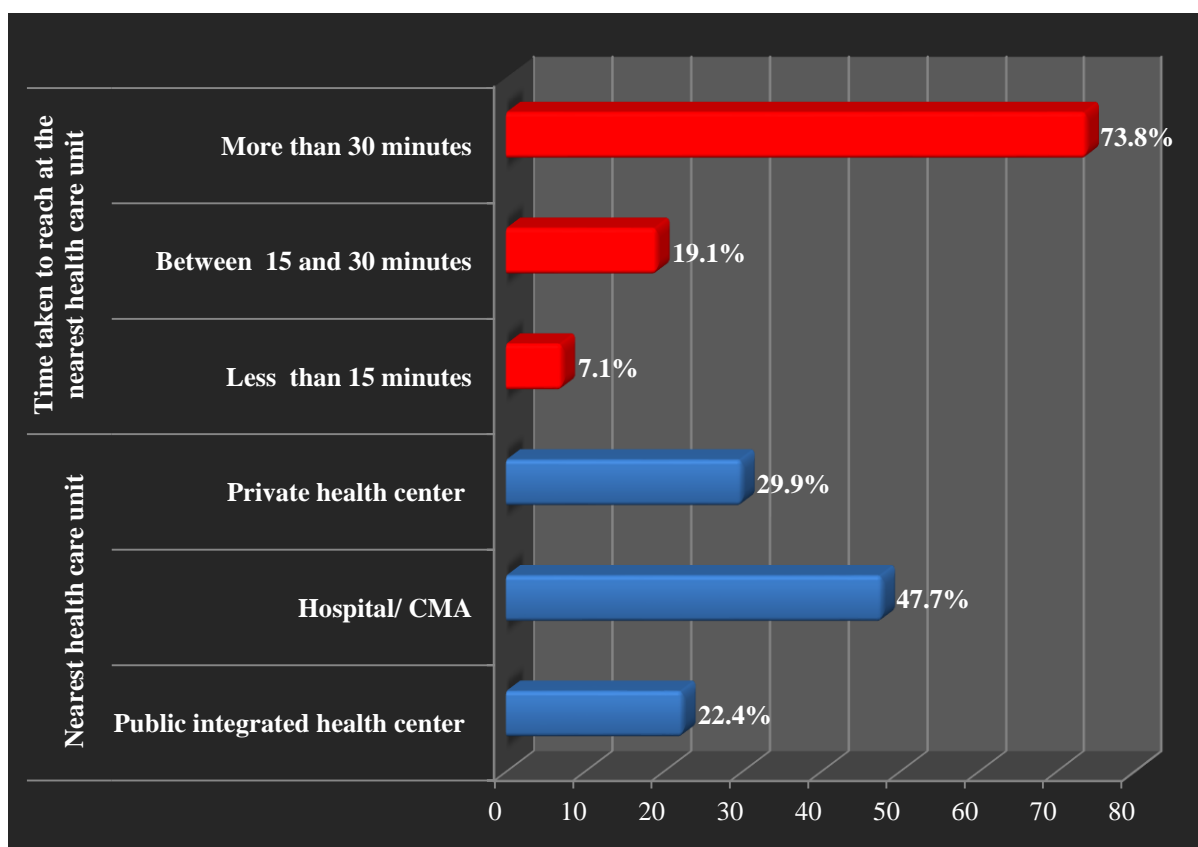
During the survey, availability and the accessibility of the health units have been captured through the nearest health facility to the households and the time taken to reach there respectively

According to the figure 3.9, Hospital/CMA is the nearest health care unit to the home of households in the Balikumbat council, about one household out of two 47.7% declared that. The remaining households consider the private health centre 29.9% and Integrate Health centre 22.4% as their nearest health facility. Meanwhile, there is only one medicalized health centre which is equipped and used as a sub-divisional hospital situated in Balikumbat village and the population is

expected to first of all seek medical attention at the health centres before proceeding to the sub divisional hospital in case their concerns are not addressed.

With respect to the time taken to reach the nearest health care unit by the households, four households out of ten say they need more than 30 minutes 73.8%, 19.1% of them need between 15 and 30 minutes while the rest 7.1% take generally less than 15 minutes to reach to the nearest health unit from their home.

**Figure 3. 9: Availability and accessibility of the Health facility by the households**



Source: SCORECARD survey, Balikumbat council November 2017

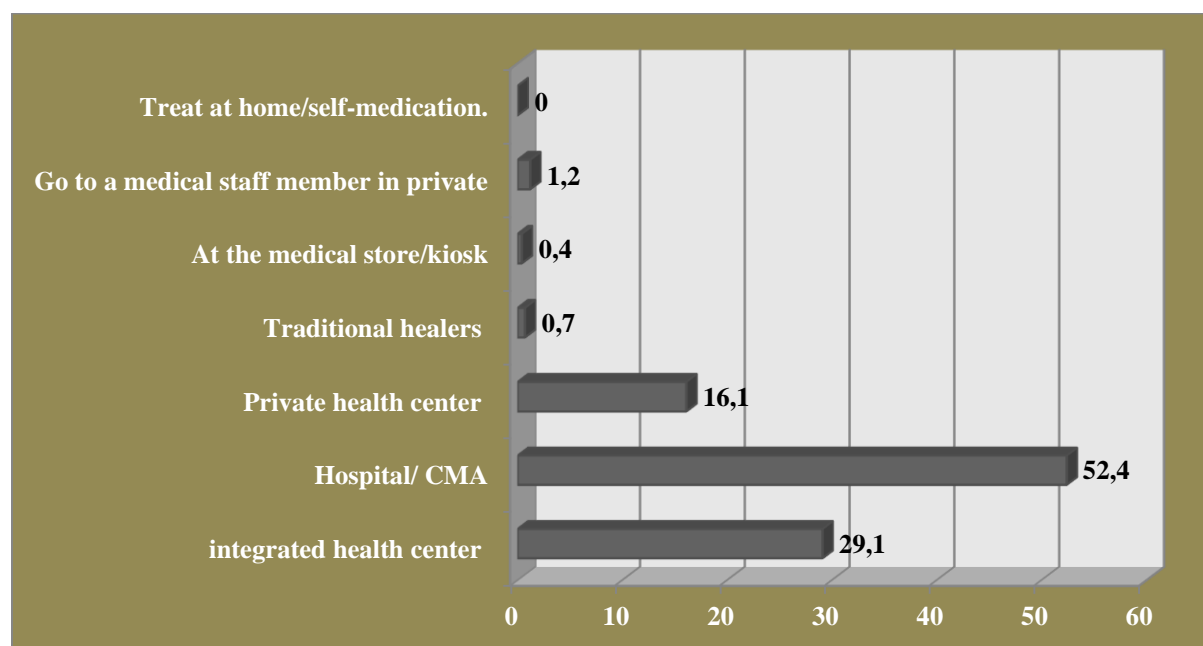
### 3.3.1.2 Usage of health units

In terms of usage, the survey aimed at knowing the preferred health care units the households use when they have health problems and attendance at health facility in the past 12 months.

The data of figure below shows that the majority of households in the municipality prefer to use the sub-divisional hospital 52.4%, public integrated health center 29.1% and private health center 16.1% when a member of their household has a health problem. The other places where they prefer to go to, have the solution for the health problems are medical staff member in private 1.2%, traditional healer 0.7% and medical store/kiosk 0.4%. Most of the people seek medical

attention in the government health care unit (sub divisional hospital and public integrated health center). This situation can be explained by the fact that the nearest health care unit to the residence of the households are government health care units. However, this indicates that the level of health education is relatively high as the phenomenon of auto-medication is extremely low in municipality which is mostly a rural setting.

**Figure 3.10: Distribution (%) of households per preferred choice of health solutions, in Balikumbat Council.**



Source: SCORECARD survey, Balikumbat council November 2017

Regarding the attendance during the past 12 months presented in table 3.10, for two households out of three, at least one member has been to the nearest health care unit at least one time during the past 12 months 62.8%. Among the households where at least one member has visited the nearest health care unit during the said period, 61.8% say that the person responsible in that health care unit was a Medical Doctor and while 37.2% declared that the health facility were headed by nurses. This finding further confirms the fact that the nearest health care unit is the CMA which is directed by a Medical doctor.

**Table 3.10: Recourse to the nearest health care unit**

Proportion (%) of households requesting the nearest health center and distribution (%) of households for which a member requested the nearest health center, by health center manager.					
Proportion (%) of households where at least one member has been at the nearest health	Head of the nearest health care unit (%)				Total
	Medical Doctor	Nurse	Nurse aider	others	

care unit during the past 12 months.					
62.8	61.8	37.2	0.0	0.0	100.0

Source: SCORECARD survey, Balikumbat council November2017

### 3.3.2 Cost, quality of health services and Characteristics of health care Units

#### 3.3.2.1 Cost of Health service

Access to healthcare is not yet free in the health sector in our country. As shown on the table below, almost all households 96.3% have paid a fee for the consultation at last time they have visited the nearest health care unit. Regarding the amount spent for the consultation, 7 out of 10 households 71.7% of those that paid consultation fees declared that they spent on average, between 500 and 1000 FCFA during their last visit to their nearest health care unit, 2 out of 5 households 21.3% declared that they paid more than 1000 FCFA, while the rest of those that have paid pointed out that they paid less than 500 FCFA as consultation fees. It can generally be noted that, most households paid consultation fees between 500 and 1000 Frs.

With regards to the assessment of the amount of fees paid as consultation, a majority of households 55.8% of those who have paid consultation fees) believe that the amount is high. Though this amount (500F to 1000F) is perceived to be high by majority of the households, it is however important to note that this range contains what is supposed to, and applies in public hospitals (600FCFA per person). It is therefore necessary to check for possible abnormal charges which are not in line with official text in healthcare institutions.

**Table 3.11:** Appreciation of the amount paid for consultation at the Health care unit

Proportion (%) of the household who paid for the consultation in the nearest health care unit during their last visit	Average amount paid for consultation (F CFA)			Total	Appreciation of the amount paid for consultation			Total
	less than 500 FCFA	between 500 and 1000 FCFA	more than 1000 F CFA		high	Reasonable	Insignificant	
96,3	7,0	71,7	21,3	100,0	55,8	44,2	0,0	100,0

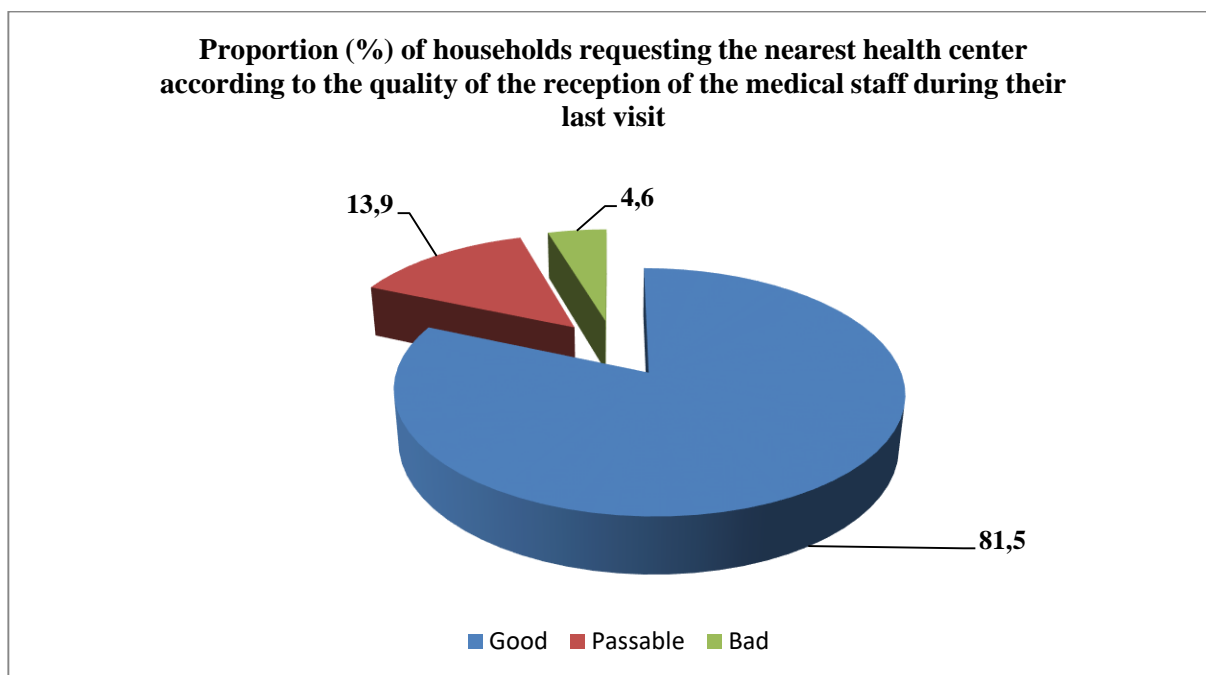
Source: SCORECARD survey, Balikumbat council November2017

#### 3.3.2.2 Quality of Health service

The quality of the health service was evaluated during the Score Card Survey by the assessment of the quality of the reception by the medical staff and some characteristics in terms of the

availability of staff, equipment, hospitalization beds, pharmacy, drugs as perceived by households during the last visit of the nearest health centre. It appears from Figure 3.11 that the majority of households where at least one member used the health care units during the last 12 months think the reception was good at their last visit 81.3%.only 4.6% did not appreciate the quality of the welcome at their last visit while 13.6% qualified as passable, the reception.

**Figure 3.11: Appreciation of the quality of the reception**



Source: SCORECARD survey, Balikumbat council November2017

During the interview, households were asked about some characteristics of the nearest health facility the last time one of their members visited.

The table 3.12 shows that, the vast majority of households confirm the existence of a pharmacy / pro-pharmacy 99.2% within the health facility, the presence of staff during the time of their visit 97.2% and the Availability of basic material/equipment 92.9%. According to the 13% households who visited the nearest health facility during the past 12 months, the last time they visited this health facility, drugs were not available at the pharmacy.

For all households, the last time they visited the nearest health centre, this one had a hospitalization room. Regarding the number of beds found in those hospitalisation rooms, one out of two households 50.8% report that the hospitalisation room had between 5 and 10 beds during the last visit, 32.1% say that the number of beds was less than 5 and only 11.9% declare more than 10, the number of beds found in the hospitalisation room at their last visit during the past 12 months.

**Table 3.12:** Characteristics of nearest health care units visited by the households in Balikumbat Council during the last 12 months (%)

Proportion (%) of households who visited the nearest health care unit in the last 12 months and reporting that:					Repartition of households according to the number of beds found in the hospitalization rooms			
the staff was present	The health facility has the basic materiel/equipment	The health facility has pharmacy/pro-pharmacy	The health facility has pharmacy/pro-pharmacy where drugs are available	The health facility has hospitalisation room	less than 5 beds	between 5 and 10 beds	more than 10 beds	Don't Know
97,2	92,9	99,1	87,0	100,0	32,1	50,8	11,9	5,3

Source: SCORECARD survey, Balikumbat council November 2017

### 3.3.3 Appreciation of health services

The appreciation of health services here is assessed in terms of the capacity of the nearest health care units to solve the health problems, satisfaction of the health service and the reasons of dissatisfaction as perceived by the households.

The table below indicates that 66.1% of households declared that the nearest health care unit solves most of the health problems of their members. Also, 3 out of 10 households reported that they are not satisfied with the health services rendered in the nearest health facility.

**Table 3.13:** Solving household health problems and level of satisfaction

	Proportion (%) of households reporting that the nearest FOSA resolves most of their health problems	Proportion (%) of households with one member not satisfied with health services
Total	66,1	29,4

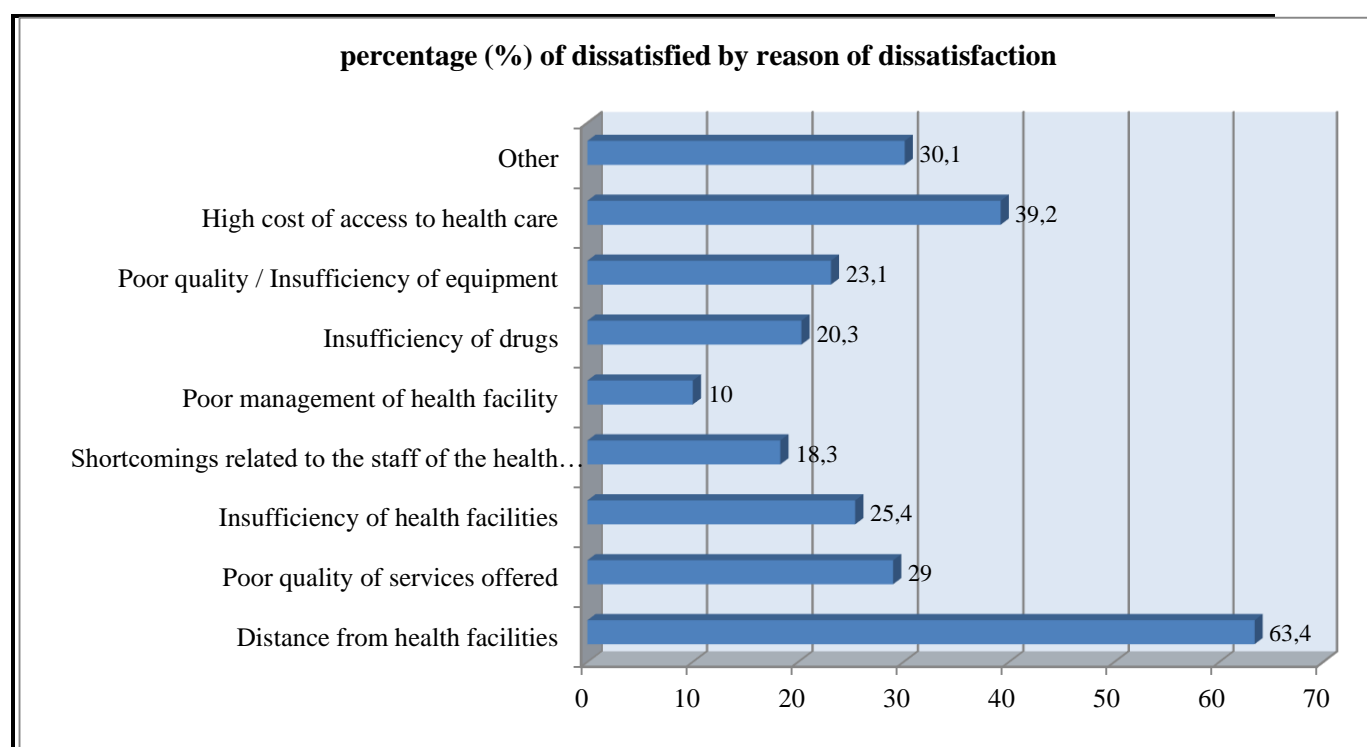
Source: SCORECARD survey, Balikumbat council November 2017

### 3.3.4 Reasons for the non-satisfaction of the Household's population

Out of the households who reported that they are not satisfied with health services rendered in the nearest health facility they visited at least once within the past 12 months, 63.4% claimed their dissatisfaction is tied to the far distance they have to cover each time they want to visit the facility, while 39.2% link their dissatisfaction to the high cost with regards to healthcare access. The other important reasons for non-satisfaction put forward by the households by order of importance are: Poor quality of services offered 29%, insufficiency of health facilities 25.3%, Poor quality /

insufficiency of equipment 23.1% and insufficient drugs 20.3%. The others reasons as are displayed on the figure 3.12 below.

**Figure 3.12: Reasons for non-satisfaction**



Source: SCORECARD survey, Balikumbat council November 2017

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

Faced with all the reasons for non-satisfaction mentioned above, households expressed some expectations in relation to improving on healthcare services. By order of importance, households expect the creation and the construction of additional health care units 59.3%, assignment of more competent health personnel 47.5%, supply of drugs in the pharmacy of the health 28.8% and provision of quality equipments in the health facility 28.5% (Cf. Table 3.14). The suggestion of additional health facility ties so much with the fact that they have to trek for long just to benefit from health services.

**Table 3. 14:** Main Expectations in terms of health services in Balikumbat council

	Percentage of households that a member is waiting for:				
	Additional health facility	Supply of drugs	Transfer of competent staff	Provision of Facility of quality equipment	Other
Total Balikumbat	59.3	28.8	47.5	28.5	33.0

Source: SCORECARD survey, Balikumbat council November 2017

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

In investigating the degree of satisfaction of the households whose members have declared that the nearest health care unit solves most of their health problems, it came out that 66.1% of them said the nearest health care units address most of their health problem while 29.4% of them were not satisfied with the services rendered by the nearest health care units they use. Amongst the population not satisfied by the services of the nearest health care units, 63.4% said the health units were far from their households, 29% of them said the services rendered by these units was bad, 25.4% said the available health care units were insufficient, 18.3% said these health units lack medical staff, 10% said these units were poorly managed, 20.3% said they were not fully equipped with essential drugs, 23.1% said the equipment at these units was either of bad quality or insufficient, 39.2% said the cost of access to treatment was high while 30.1% of them said they were not satisfied for other reasons.

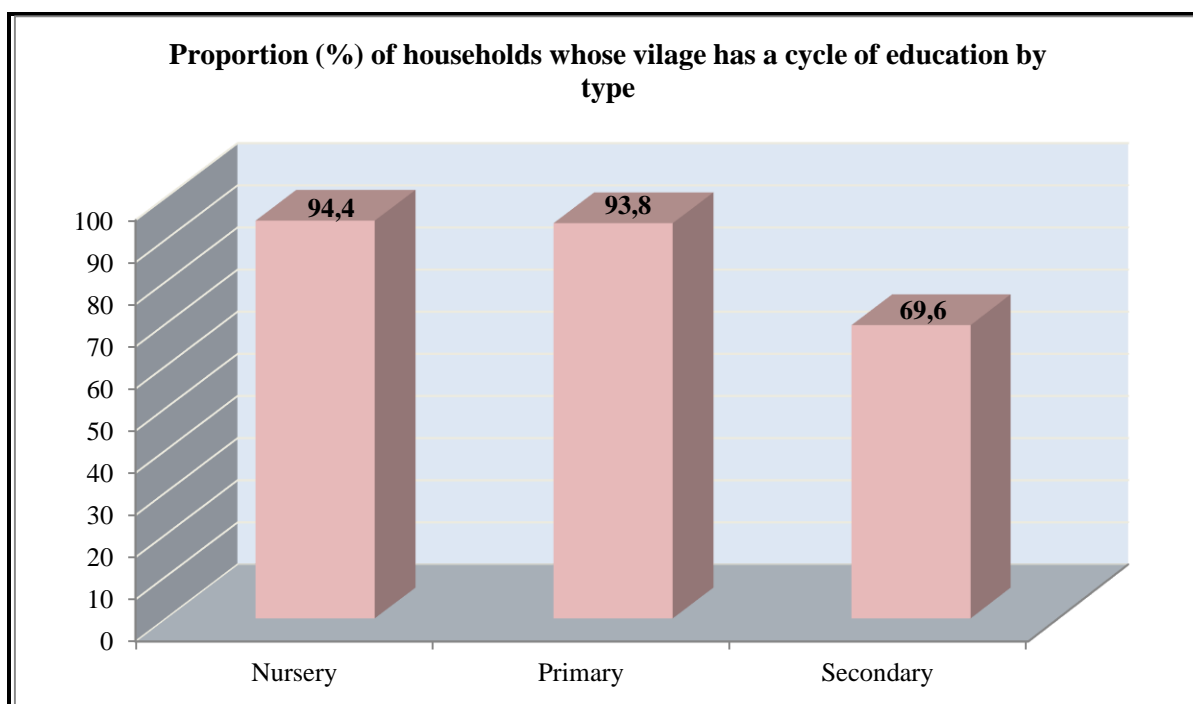
## **3.4 EDUCATION**

This section seeks to evaluate the educational services in the council area, the various educational cycles (nursery, primary, secondary and vocational) that exist in village/quarter, the experience for those who have a household member attending any school in terms of quality, availability, accessibility, affordability, satisfaction and expectations according to the population perception in 2016 (before the advent of the socio-political tensions in the Region which disturbed the schools).

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

In evaluating the type of educational cycles and professional training available in the council area it came out that there are nursery, primary and secondary cycles of educational institutions in the council area. The study indicates that 94.4% of the households report that they have nursery schools in their localities, 93.8% have primary schools while 69.6% of them have secondary schools. This information is displayed on the figure below.

**Figure 3.13: Availability of services in the domain of Education per cycle**



*Source: SCORECARD survey, Balikumbat council November 2017*

The study also went down to find out the average number of children from each household that was attending each educational cycle in the nearest school. The results of the survey revealed that for the nursery cycle, each household had averagely 1.5 children attending the nearest nursery school. In terms of the distance covered by children who attend nursery school to reach this nearest nursery school, 6 out of 10 household claims that their children cover less than 1 km, while for 4 out of 10 households, children cover a distance of between 1 and 5 km to reach the school. In average, those children attending nursery school spent 36.3 minutes time on foot to reach the school as declared by the households.

Considering the primary cycle, a household had 2.2 children on average who attend the nearest primary school. The distance covered by those children to reach that school is generally less than 1 km and between 1 to 5 km according to the declaration of 63.2% and 34.3% of the households respectively. Pupils covered the distance to reach the school on foot in average time of 33.8 minutes.

At the secondary level, each household had on average 2 children who attend the nearest secondary school. As reported by about 9 out of 10 households, children cover less than 5 km to reach the nearest secondary while only 12.9% said their children cover more than 5 km to reach their school. The average time taken by children to reach the nearest school on foot is 56.9 minutes at the secondary level.

**Table 3.15:** Average number of children per household in the secondary level and accessibility to the nearest secondary school

	average number of children of the household who attend the cycle	Distance covered by children of the household to reach the nearest School of the cycle				Total	Average time taken by children to reach school on foot
		Less than 1 km	Between 1 km and 5 Km	More than 5 km	DK		
Nursery	1,5	60,2	37,8	1,9	0,0	100,0	36,3
Primary	2,2	63,2	34,8	2,0	0,0	100,0	33,8
Secondary	2,0	25,3	61,7	12,9	0,0	100,0	56,9

Source: SCORECARD survey, Balikumbat council November 2017

### 3.4.2. Characteristics of school infrastructure

The characteristics of schools here are looked at in terms of the following: Whether a school has a complete cycle, a classroom per class level, benches for all pupils to sit on and if school textbooks are distributed to students/pupils in the school.

For the nursery schools, the following propulsions declared that the nursery school in their area where their children attend has a classroom per class level 70.7%, has benches for pupils to sit on 93.1% and that text books are distributed to pupils 17.4%

With regards to the primary schools, 96.4% of households declared that the primary school in the village has a complete cycle, with 82.1% of respondent declaring that there are classrooms per level in these primary schools. About 93% of households pointed out that there are benches for all pupils to sit on in these schools while just 15.9% declared that text books are distributed to students.

Considering the secondary and high schools attended in by children Balikumbat municipality, 99.1% of households declared that the secondary 1<sup>st</sup> cycle school attended by their children has a complete cycle and 79.9% stating that the secondary 2<sup>nd</sup> cycle schools attended by their children has a complete cycle in their locality. In terms of classrooms and benches, 87.3% of households declared that classrooms are available for all class cycle in these schools and about 92% pointing to the fact that there are benches for all students to sit on.

Looking through the various characteristics of school infrastructures, it can be concluded that textbook distribution is still a myth at the nursery and primary levels of education, this is

supported by the rather small proportion of households that declared that text books are distributed as opposed to the majority that refused.

**Table 3. 16:** Characteristics of schools attended by children in Balikumbat municipality

Educational cycle		Proportion of households according to the Characteristics of the school attended by their children (%)			
		Has a complete cycle	Has a classroom per class level	Availability of benches for all pupils to sit on	Distribution of school textbooks in the school
Nursery			70.7	93.1	17.4
Primary		96.4	82,1	93.4	15.9
Secondary	1 <sup>st</sup> cycle	99.1	87,3	97.5	
	2 <sup>nd</sup> cycle	79.9			

Source: SCORECARD survey, Balikumbat council November 2017

### 3.4.2 Cost and quality of services in the educational sector per cycle

#### 3.4.2.1 Cost of Education

According to the norms of basic education in Cameroon, Nursery and primary education is supposed to be tuition free in the public institutions. As shown on the table below, all households have paid a fee (Tuition, PTA, Registration,) for education in all cycles. On average, households spend annually FCFA 17 399 for the education of one child in the nursery school and that majority 76.6% of these household think that this fee is high.

For the primary, each parent pays an average of FCFA 5 627 for the education of one child of their household. Out of all these parents who pay a fee for the education of their children at this level, 52% think that the fee is high.

Considering the secondary and high school levels of education, the majority (83.8%) of households think that the average amount paid per child (FCFA 24 602) by all for school fee is high declared that they pay FCFA 24 602 on average for the education of their children in secondary schools.

Since more than half of the households at the various levels of education (primary, secondary and high school) see what they pay as school fees for their children to be high, and most of the school

at primary and nursery level in Balikumbat are public, it is just logically correct to think that it is a sensitive issue that should be addressed.

**Table 3.17:** Appraisal of the amount paid for education by households in Balikumbat Council

Educational cycle	Proportion (%) of population having paid the required fees (registration, tuition, PTA) for education	Average school fees expenditure spent throughout a school year per child (CFA Francs)	Partitioning (%) of populations paying fees required per appreciation of the amount paid		
			High	Reasonable	Insignificant
Nursery	100	17.399	76.6	23.4	0.0
Primary	99	5.627	75.4	23.1	0.6
Secondary	100	24.602	83.8	16.2	0.0

*Source: SCORECARD survey, Balikumbat council November 2017*

### 3.4.2.2 Quality of teaching

The appreciation of the quality of the teaching received by the pupils can be strongly dependent on the number of students per classroom, the availability of benches and the presence of the teachers. Thus, during the data collection for the scorecard survey, questions were asked about these two aspects of the quality of education in the council area. It should be recalled that in Cameroon, an average of 30 pupils per classroom is recommended for Nursery and primary school and 60 students per classroom for secondary schools.

The analysis of this information collected from the field reveals that for households with children in secondary school, 67.3% say that, on average, there are more than 60 pupils in the classrooms where their children attend, 28.6% of them report an average number of pupils between 30 and 60 in their children's classrooms, and only 3.2% report less than 30 students on average in classrooms. Regarding the frequency of the presence of secondary school teachers, the majority of households consider that they have regular 73.6% or averagely regular 17.7%.

Looking at these aspects in the primary cycle, it appears that the majority 79.9% of households with children enrolled in this cycle state that the classrooms in which their children have on

average have less than 60 pupils (respectively 17.8% of parents for less than 30 students per classroom and 62.1% of them for an average of 30 to 60 students). Only small part 15.2% of the population of households with children attending this cycle, report an average of more than 60 students per classroom. This trend is the same in the nursery cycle where 87.8% of households report less than 60 students on average in their children's classrooms and only 1.5% of them, an average of more than 60 students per classroom. The vast majority of households believe that teachers are regular in nursery 91.2% and primary 76.1% cycles.

The negative finding that emerges from these analyzes is that classrooms are overcrowded in all the cycles in Balikumbat if you compare the situation with the recommended number of pupils and students in the classrooms.

**Table 3.18:** Number of pupils and appraisal of teacher's presence in school in Balikumbat Council

	Distribution (%) of households whose children are going to school and are in classrooms with an average number of pupils.				Distribution(%) of households according to the appraisal of the teacher's presence in classroom.			
	Less than 30	Between 30 and 60	above 60	DK	Regular	Averagely regular	Irregular	DK
Nursery	33.8	54	1.5	10,7	91.2	8.8	0	0,0
Primary	17.8	62.1	15.2	4,9	76.1	17.5	3.9	2,6
Secondary	3.2	28.6	67.3	0,9	73.6	17.7	5.6	3,1

Source: SCORECARD survey, Balikumbat council November 2017

### 3.4.3 Appreciation of services in the domain of education per cycle

Different stakeholders are involved in the education of Cameroonians of all ages and levels. It is for this reason that the scorecard survey posed a couple of questions to the households whose children are attending school to find out which stakeholder does repairs when a classroom is damaged in a school at all levels of education in the Balikumbat municipality.

The data presented on the table below concerns the perception of household in the Balikumbat community about persons responsible for the repair of their school infrastructures when they get bad. According to statistics from the field, the Parent Teachers Association (PTA) stands out as a major stakeholder at all levels of education as it is the major stakeholder that had been in charge

of repair works on damaged classrooms. At least 95% of households interviewed at each level of education (nursery, primary and secondary schools) declared that within the past 12 months, damaged classrooms were repaired by the PTA. These significant results are only closely followed by just one out of every 10 households declaring that the mayor has been in charge of repair works in some secondary schools for the past 1 year.

The body of the state in charge of this sector was not much involved in the repair of school infrastructures at all the levels, more than 90% of households reported that at all the educational cycles.

**Table 3.19:** State of the classroom repair

Educational cycle	Proportion (%) of households declaring that the damaged classrooms were repaired by:					
	The PTA	Mayor	A village organisation	MINEDUB/ MINESEC /MINEFOP	The Elites	Others
Nursery	97.4	22.8	1.9	5.9	0.0	5.9
Primary	96.0	13.7	3.9	2.7	3.9	2.7
Secondary	95.9	23.3	2.3	6.8	3.2	6.8

Source: SCORECARD survey, Balikumbat council November 2017

### 3.4.4 Reasons for the non-satisfaction in the domain of education per cycle

With respect to non-satisfaction with the education services in the municipality, Table 3.19 shows that in one out of ten households, at least one member states that they are not satisfied with the education services offered in primary 12.8% and secondary 11%. For the nursery cycle, this proportion is 4%. The frequencies are consistent to interpret the data on reasons for non-satisfaction.

**Table 3.20:** Level and reasons for non-satisfaction

Educational cycle	Proportion (%) of population not satisfied with educational services	Amongst the population not satisfied. proportion (%) whose reason of dissatisfaction is :								
		Far distance to access educational services	Insufficiency of classrooms	Insufficiency of equipment	Insufficiency of schools /vocational training centers	Insufficiency of teaching staff	The non-distribution of school textbooks	Poor results	High tuition fees	Others

Nursery	4.4	*	*	*	*	*	*	*	*	*
Primary	12.8	(33.3)	(56.2)	(28.8)	(11.3)	(59.0)	(39.0)	(6.5)	(56.4)	(19.2)
Secondary	11.0	(67.8)	(24.6)	(18.4)	(26.4)	(52.5)	(10.5) <sup>2</sup>	(4.8)	(62.9)	(23.6)
Vocational training	0.0	*	*	*	*	*	*	*	*	*

Source: SCORECARD survey, Balikpapan council November 2017

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

After satisfaction with education services in the different educational cycles, the collection of data from the Score card also made it possible to capture information on Household's expectations regarding education services. His analyzes show that, regardless of the cycle, households are more likely to expect recruitment/transfer of more teaching staff (secondary 25.7%, primary 42.6%, and preschool 12.9%). This trend is in perfect agreement with the results from the analysis of reasons for non-satisfaction.

Expect to improve infrastructure supply (adding classrooms 37.9%, and having a school closer (20.2%)) and equipment (16.7%), improve the supply of human resources (adding staff 42.6%) and reduce the cost is more about the primary cycle while creating more schools is more a reality in the primary (7.9%).

**Table 3.21:** Expectations in terms of education in Balikpapan council area

Educational cycle	Proportion (%) of population whose expectations in the domain of education are :								
	To have a school located nearby	Built more classrooms	Add additional equipment	Create more schools /vocational training center	Recruit more teaching staff	Distribute school textbooks	Improve the quality of the results	Reduce the costs	Others
Nursery	5.4	11.8	5.9	1.9	12.9	6.9	2.2	8.1	5.5
Primary	20.2	37.9	16.7	7.4	42.6	23.1	4.1	26.1	11.5
Secondary	18.9	19.1	13.2	7.9	25.7	8.1	2.7	22.9	9.0
Vocational training	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Source: SCORECARD survey, Balikpapan council November 2017

### 3.4.6 Synthesis of the perception of services in the domain of education and suggested areas of improvement

From analysis of information collected on the educational services, secondary school students cover long distances to attend school as reported by 67.8% of households having children in this

cycle. Some of the schools do not have enough classrooms that can conveniently accommodate students of the schools. Approximately 54% of households indicated that schools in Balikumbat have insufficient teaching staff with high tuition fee. There is therefore great need to build more secondary schools in villages while constructing more classrooms in existing schools to accommodate pupil and students.

More teaching staff should be recruited to fill the gap. The tuition fee should be reduced so as to encourage school attendance within the municipality.

### **3.5 COUNCIL SERVICES**

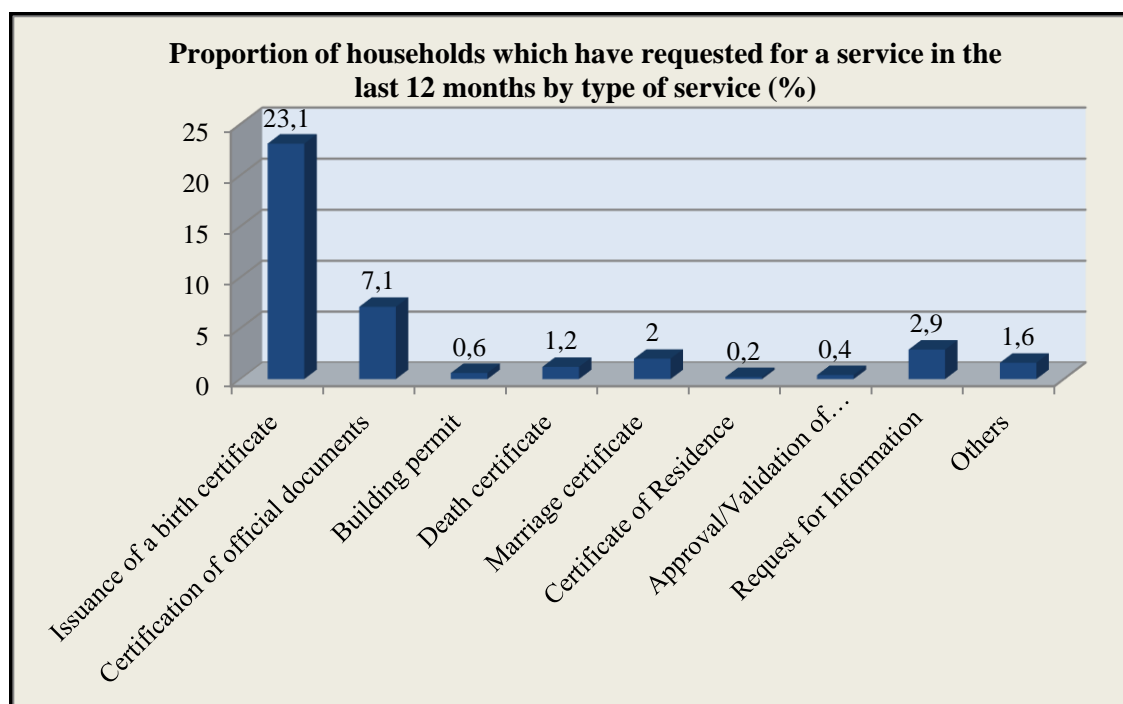
In Cameroon, decentralization constitutes the legal, institutional and financial means through which regional and local authorities operate to foster local development with the active involvement of the population. Through the devolution of powers to local entities, local development could be enhanced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

This section seeks to evaluate Council services rendered to the population by the Balikumbat council. This portrays different council services like birth certificates, building permit etc. It also seeks to assess the perception of those who have been involved with any of such service in the past one year(October 2016), the way they were treated, level of satisfaction and expectations of the Balikumbat Council.

#### **3.5.1 Availability and usage of council services**

In the last 12 months preceding the survey, the most popular services requested by households at the council office in order of importance are the issuance of a birth certificate, the certification of official documents and the establishment of marriage certificate. Respectively, 23%, 7% and 2% of households have requested those services.

**Figure 3.14: Services requested at the council during the past 12 months**



Out of the households which have requested for issuance of birth certificate, 86.7% of them declare that the reception for the said service was good. Concerning the time spent to obtain that service, the majority of household which have requested for that service obtain the certificate within the month period (80.4%) and for 7.1% of households, the certificate is still on process of issuance.

**Table 3.22: Request for a service in the Council**

Services	Proportion of population which are of the opinion that the reception for the said service was good	Time spent to obtain the services					
		Less than a day	Between 1 day and a week	Between a week and a month	Between one month and three months	More than three months	Ongoing
Issuance of a birth certificate	86.7	15.5	34.8	30.1	12.5	0.0	7.1
Certification of official documents	*	*	*	*	*	*	*
Building permit	*	*	*	*	*	*	*

Death certificate	*	*	*	*	*	*	*
Marriage certificate	*	*	*	*	*	*	*
Certificate of Residence	*	*	*	*	*	*	*
Approval/Validation of localisation plans	*	*	*	*	*	*	*
Request for Information	*	*	*	*	*	*	*
Others	*	*	*	*	*	*	*

Source: SCORECARD survey, Balikumbat council November 2017

### 3.5.2 Cost and quality of services within the council institution

In the evaluation of the time taken by the council services to render the requested services, 13.5% of the households which have requested for the issuance of birth certificate, 2.3% of those for the certification of official documents, 0.3% of those for building permits, 0.9% of those for death certificates, 1.4% of those for marriage certificates, 0.5% of those for information and 0.3% of those for other services considered the time taken for them to be served to be too long.

Of those which have requested for issuance of birth certificates, 7.0% paid tips to be served.

**Table 3.23:** Delays in obtaining a service in the Council

Services	Proportion (%) of population who consider that the time taken to be served is long or too long	Cause of time to be lengthy or very lengthy for a service to be rendered				Proportion (%) of households who have paid a tip to obtain the services
		Unavailability of council staff/ absent	The absence of working material	Corruption	Other factors	
Issuance of a birth certificate	13.5	(39.8)	(40.1)	(5.4)	(12.2)	7.0
Certification of official documents	2.3	*	*	*	*	1.9
Building permit	0.3	*	*	*	*	0.3

Services	Proportion (%) of population who consider that the time taken to be served is long or too long	Cause of time to be lengthy or very lengthy for a service to be rendered				Proportion (%) of households who have paid a tip to obtain the services
		Unavailability of council staff/ absent	The absence of working material	Corruption	Other factors	
Death certificate	0.9	*	*	*	*	0.7
Marriage certificate	1.4	*	*	*	*	0.8
Certificate of Residence	0.0	*	*	*	*	0.2
Approval/Validation of localisation plans	0.0	*	*	*	*	0.0
Request for Information	0.5	*	*	*	*	0.0
Others	0.3	*	*	*	*	0.7

Source: SCORECARD survey, Balikpapan council November 2017

### 3.5.3 Appreciation of council services

Concerning the dissemination of information on Council actions and household involvement in the Council's activities for the populations, the responses indicated that 11.6% of them participate in village assemblies aimed at the elaboration of Council Development Plan (CDP), 5.1% said they have received information concerning the council budget, 6.4% said they have been informed of the council income and expenditure, 34.1% of them support the village/ quarter development activities, 21.9% said the village/ quarter are involved in the planning of activities and 61.2% said the village/ quarters are involved in the programming and budgeting sessions of the council

**Table 3.24:** Dissemination of information on Council actions and household involvement in the Council's activities

Proportion of population who declared that they have been involved or were informed on the council activities					
Participation in village assemblies	Communication on the council annual budget	Communication on income and expenditures of the council	Support the village/quarter in development actions	Involving the village/quarter in planning	Involving the village /quarter in programming and budgeting sessions
11.6	5.1	6.4	34.1	21.9	61.2

Source: SCORECARD survey, Balikpapan council November 2017

### 3.5.4 Reasons for the non-satisfaction of the population regarding council services

With respect to the degree of dissatisfaction vis-à-vis the council services, 40.2% of the Households were not satisfied with the council services.

Among the reasons of non-satisfaction advanced by the households with the council services, Poor visibility of the council action on the populations (51.1%) and Non-involvement of the populations in the management of development activities by the council (50.8%) are in order of importance the main reasons, followed directly by Cumbersome procedures with regard to the processing of users' requests (31.5%) and Defaults inherent to the Council staff (absenteeism, corruption, poor reception, etc...) (17.0%). It's good to notice that households are less concerned about the unavailability of the council executive (the Mayors and his/her deputies), only 4.3% of households consider it as reasons of non-satisfaction. (Cf. Table 3.24)

**Table 3.25:** Dissatisfaction vis-à-vis Council services

Proportion (%) of households not satisfied with council's services	Amongst the households not satisfied, proportion (%) whose reason of dissatisfaction is :					
	Cumbersome procedures with regard to the processing of users' requests	Non-involvement of the populations in the management of development activities by the council	Defaults inherent to the Council staff (absenteeism, corruption, poor reception, etc...)	Poor visibility of the council action on the populations	Unavailability of the council executive (the Mayors and his/her deputies)	Others
40.2	31.5	50.8	17.0	51.1	4.3	67.4

Source: SCORECARD survey, Balikpapan council November 2017

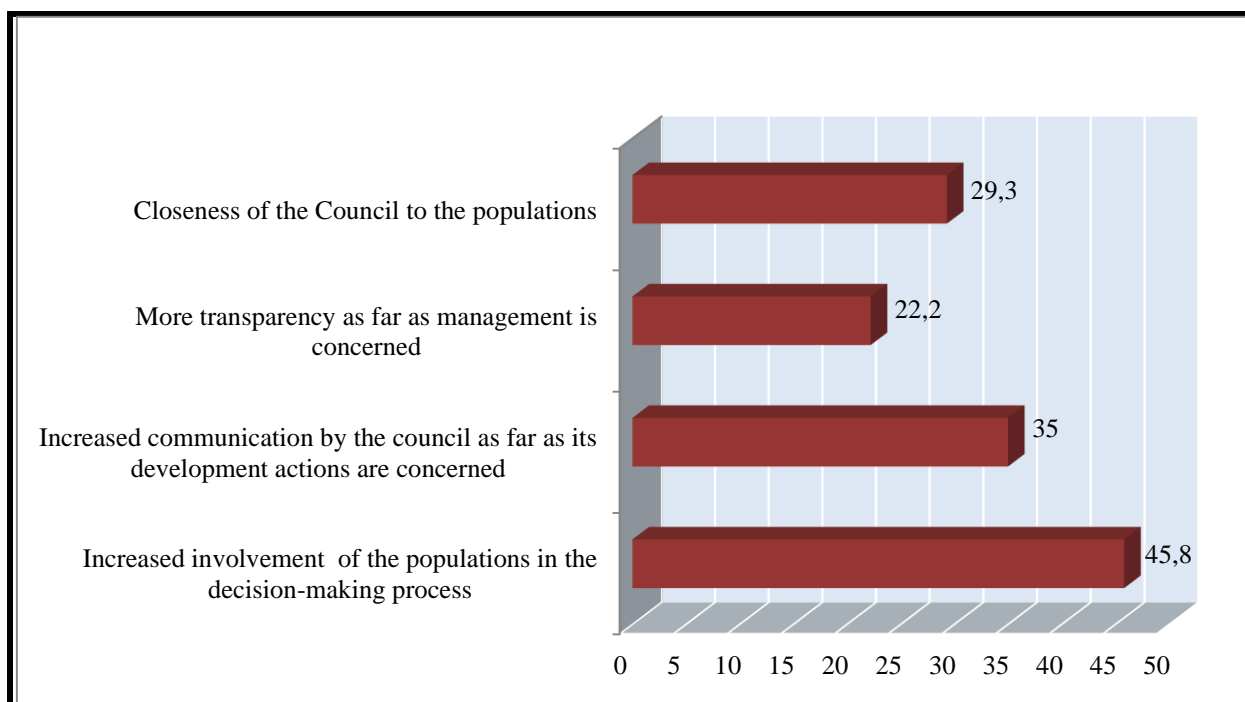
### 3.5.5 Main expectations in the services rendered by the council

After satisfaction with education services in the different educational cycles, the collection of data from the Score card also made it possible to capture information on people's expectations regarding education services.

The analyzes of figure 3.12 show that in relation to the reasons for non-satisfaction, households expect more involvement of the population in the management of development activities of the council 45.8% and improvement of communication by the council as far as its development actions are concerned 35.0%.

Other areas for improvement expected by households are more transparency as far as management is concerned 22.2% and Closeness of the Council to the populations 29.3%.

**Figure 3.15:** Expectations of households in terms of council services in Balikumbat Council



Source: SCORECARD survey, Balikumbat council November 2017

### 3.6 Conclusions and Recommendations

The bottom-top approach in management have proved to be the most successful and inclusive manner to govern. This study has clearly brought out the perception of the households of Balikumbat council area according to the basic services offered to them by the government. Its results if well used will go a long way to enhance the development of the municipality. The people know what they want and if involved more in the decision making organs of the council they would participate actively in the council development program. They would appropriate the

development projects and contribute to their sustainability.

Key Recommendations from the study include:

- Construction of new water schemes and extension of already existing systems to other parts of the community while improving on the quality of water from existing potable sources.
- Construct more health facilities and equip existing ones to improve on accessibility and proximity of health services to the population.
- Construct more schools and classrooms in already existing schools and recruit more teaching staff to improve on access and quality of education.
- Enhance full community participation and involvement in developmental projects and council management.
- Provision of vocational training centres in the municipality

The Citizen Control Mechanism for Public action in Balikumbat is realistic and should be taken as a reference document by the council, government technical services, financial partners and other development stakeholders.

## CHAPTER 4

### PROGRAM FOR THE DISSEMINATION OF RESULTS AND PRESENTATION OF AN ACTION PLAN

#### Synthesis of the problems identified per sector

Table 4.1: Synthesis of problems in the Domain of Water in Balikumbat

Sector	Problem identified	Envisaged solution	Level of implementation	
			Local	Central
Water	Insufficiency of water points	Identification of sites for the construction of catchments/boreholes.	√	
		Construction of new water catchment points	√	√
		Construction of new water points and boreholes in all quarters	√	√
	Poor management of water points	Train water management committee	√	
		Put in place or Revamp water management committees for each water point	√	
		Reduce the time required to repair a broken water point	√	
		Supervision of the management committee by the Council and DD MINEE Ndop	√	√
	Poor quality of water	Improve water quality through treatment	√	
		Sensitization of the population to clean, fence and protect water sources	√	
		Sensitize the community on the qualities of good drinking water	√	
		Technical inspection of sites and purification equipment		√
	Delay in maintenance in case of breakdown	Prompt maintenance be ensured	√	
		Elaboration of a mechanism for prompt repairs of water points.	√	

		The council should provide of technical and financial assistance in case of breakdown	√	
		Sensitize the population on the importance of securing maintenance fund	√	
	Far distance to water points	Extension of water to central locations	√	√
		extension of water to all quarters	√	√
	High cost of water provision	Draft a complain to the service in charge	√	
		Harmonization of rates		√

Table 4.2: **Synthesis of problems in the Domain of Health in Balikumbat**

Sector	Problem identified	Envisaged solution	Level of implementation	
			Local	Central
Health	Insufficiency of existing health care units	Feasibility studies for the creation of new health units by DMO/Council Balikumbat	√	√
		Creation of new health care units		√
		construction of new health care units	√	√
	Far distance to access the health care units	Make use of community health workers/ partner with transporters to care for the sick at lower cost	√	
		make available a weekly visiting Doctor	√	
	Poor quality/ insufficient equipment	Provision of more equipment	√	√
		provision of improved equipment		√
	Insufficiency of drugs/pharmacies	Provision of more drugs	√	√
		Construction of pharmacies		√
		Partner with transporters who can collect drugs from the administrative head quarter to the health unit	√	
		DMO should ensure regular supply of drugs		√
	High cost of access to health care	Creation of mutual health institution and sensitization of the households to join	√	
		Make health policies that will henceforth carter for the poor		√
	Poor management of health care units	Put in place/ revamp a management committee at the health unit	√	
		DMO and Balikumbat Council to step up supervision and monitoring	√	√
	Few beds in Hospitalization rooms	Make available sufficient beds in hospitalization rooms	√	√
		Increase the durability of hospitalisation beds by following up and ensuring that the beds are handled with care	√	
	Default related to health care unit staff	Increase assiduity of staff	√	
		Putting in place of a suggestion box	√	
		Step up monitoring and institute attendance registers	√	
training of staff on customer service		√		

**Table 4.3: Synthesis of problems in the Domain of Education in Balikumbat**

Sector	Problem identified	Envisaged solution	Level of implementation	
			Local	Central
Education	Insufficiency of teaching staff	Recruitment and payment of PTA teachers	√	
		Government to provide more staff		√
	High tuition	Enforce the law on free tuition in nursery and primary public schools		√
		ensure parents are not exploited in secondary schools		√
		Encourage the payment of school fees in instalments	√	√
	Far distance to access educational services	Feasibility studies for the creation of new schools	√	√
		creation of more schools		√
		Construction of more schools	√	√
	And Insufficiency of schools	Provision of a public and affordable means of transport to pupils and students	√	
	Insufficiency of classrooms	Construction and equipping of classroom blocks	√	√
		Use of local building material for the construction of temporary classrooms	√	
	Insufficiency of equipment	Adequate equipment be provided		√
		timely provision of minimum package	√	
		Provision of equipment and increase in the minimum package	√	
	Non distribution of textbooks	Lobby for the provision of books from Book Aid International (NGO)	√	
		Creation and construction of school libraries		√
	Over populated classrooms in secondary schools	Reduce the number of students per classroom to 60	√	
		Construction of more classrooms		√
		Introduction of more streams(A, B, C, D,...)	√	
		Ensure the implementation of policies related to class sizes		√
The complete absence of	Creation of Vocational training Centres		√	

	vocational training schools	construction and equipment of Vocational training Centres		√
		Sensitize parents on the importance of vocational training centres, encourage parents to send children to the created centres	√	
	High cost	Harmonize, reduce costs and burdens		√
		Award of scholarships to students	√	
		Policy review on school fees		√

**Table 4.4: Synthesis of problems in the Domain of Council service in Balikumbat**

Sector	Problem identified	Envisaged solution	Level of implementation	
			Local	Central
Council Services	Non-involvement of the population in the management of development activities	Continuous involvement of the population in the development of Balikumbat municipality	√	
		Representatives of the population should visit the council and invite council executive during development meetings	√	
		Invite representative of various villages during council development planning workshops	√	
	Poor visibility of the Council action on the population	Make the Council action more visible through the realization of concrete projects	√	
		Provide reports of village activities	√	
		Inform the council about village plans	√	
		Support village actions morally, financially and materially.	√	
		Allocate projects to villages proportionately	√	
	Default inherent to Council staff	Continuous follow up and monitoring of the behaviour of council staff to ensure satisfactory performance	√	
		Put in place a suggestion box for the public	√	
		Report to council executive all staff who act unethically	√	
		Provide capacity building opportunities for council staff.	√	
		Sanctions to staff who act unethically. Recruit more staff	√	
	Cumbersome procedures with regards to the processing of user request	Facilitate the procedure regarding the processing of user request	√	
		Reduce bottle necks in processing files	√	
		Make the procedure for obtaining documents clear and simple	√	
	Poor communication on the Council annual budget and activities	Step up communication on the annual budget and activities	√	
Send village executive to attend council budgetary sessions.		√		

		Read notices and communiques on the council notice board frequently.	√	
		Get in contact with councilor of the village to update village on council activities Make available the annual budget on the council notice board.	√	
		Recruit a communication officer	√	
		Create a functional website, email and Facebook page to display council information.	√	

**Table 5.1: STRATEGY OF THE WATER SECTOR:** To make potable water systems available and adapted to the specific environment to all communities throughout the Republic of Cameroon

Sector	Objective	Specific objective	Actions	Verifiable indicators	Means of verification	Assumptions for realisation	Expected results	Period	Responsibility	Partners	Estimated cost
Water	<b>To make potable water available and affordable to all and sundry in Balikumbat council area within 5 years</b>	1. To develop and Improve accessibility to potable water	Provision of additional water points	Number of villages with potable water supply	From council reports and field observation	Increase in number of water sources	Water is available and affordable in the community	5years	The population, technical service of the council, VDC	DD MINEE Ngoketunji a NGOs Member of parliament	100million
		2: To identify and harness water sources in villages	Inventory of water points and identification of new ones	Number of new water catchments	Report from DD MINEE, Ngoketunjia From council reports and field observation	Many undeveloped water sources are found in the communities	Many water sources are found and developed in the communities	5years	The population, technical service of the council, VDC	DD MINEE Ngoketunji a NGOs Member of parliament	From feasibility studies
			Harness water from the Weut-Gwa giant waterfall	Number of catchments constructed	-photos -storage tanks -reports	Community collaborate Available funds	More water is available throughout the subdivision	5yrs	-Council -VDC	MINEE FEICOM	From feasibility studies

Sector	Objective	Specific objective	Actions	Verifiable indicators	Means of verification	Assumptions for realisation	Expected results	Period	Responsibility	Partners	Estimated cost
		3: To repair all damaged water points.	Recruitment of technicians and creation of water committee in quarters	New and bigger pipes are purchased	Report from DD MINEE, Ngoketunjia Council Report Field visits	Adequate financial and material support from the community	All damaged water points are repaired in time	5years	The population, technical service of the council, VDC	DD MINEE Ngoketunjia a NGOs Member of parliament	From feasibility studies
		4. To improve quality of water	Periodic cleaning and treatment of water sources	Number of water management committee members trained per village, mobilization is done in all quarters	Councils report Minutes, Attendance sheets, field visits	Adequate financial and material support from the community	Quality of water is improved, cleaning of water sources and treatment is frequent	5years	The population, technical service of the council, VDC	DD MINEE Ngoketunjia a NGOs Member of parliament	From feasibility studies

Sector	Objective	Specific objective	Actions	Verifiable indicators	Means of verification	Assumptions for realisation	Expected results	Period	Responsibility	Partners	Estimated cost
		5. To improve on management of water points	Revamp the water management committee and designate a caretaker per water point	Number of committee put in place in the council area, periodic meetings	Councils report Minutes, Attendance sheets	High level of commitment, training of members	Management committees exist in all quarters, Periodic meetings are held,	5years	The population, technical service of the council, VDC	DD MINEE Ngoketunji a NGOs Member of parliament	From feasibility studies
		To ensure sustained water availability	Protection of water catchments	Number of catchments protected	Photos Reports Minutes	Funds are available No conflicts between farmers and authorities	Increase in water volume Sustained water supply	2yrs	Council VDCs	MINEE MINFOF	From feasibility studies

**Table 5. 2:** STRATEGY OF THE HEALTH SECTOR: Quality and accessible health care delivery to all persons in Cameroon without discrimination

whatsoever.

Sector	Objective	Specific objective	Actions	Verifiable indicators	Means of verification	Assumptions for realisation	Expected results	Period	Responsibility	Partners	Estimated cost
Health	To ensure quality and affordable health care to all and sundry in Balikumbat council area by 2023	1: To provide more health care units	Lobby for the creation and construction of more health care units (integrated health centers)	Number of health care units created and constructed	Report from DMO Balikumbat Council reports and field observation	Many health care units are available	Many health care units are available and there is an improvement in the quality of health	5years	VDC, the council, The member of parliament	Ministry of public health, DMO Balikumbat	60million
		2: To provide more drugs.	Construction of a pharmacy, Recruitment of pharmacy attendants in the villages, provision of drugs	New pharmacies are constructed and equipped with drugs	Report from DMO Balikumbat Council Report Field visits	Adequate drugs are supplied to the health care unit	Drugs are provided in the health care unit at affordable cost	5years	The population, technical service of the council, Mayor VDC, management committee	Ministry of health, Member of parliament, DMO Balikumbat	60million

Sector	Objective	Specific objective	Actions	Verifiable indicators	Means of verification	Assumptions for realisation	Expected results	Period	Responsibility	Partners	Estimated cost
		3. To provide more equipment	Lobby for the provision of equipment to all health units	Number and quality of equipment provided	Councils report Management committee report, DMOs report	Adequate equipment' s are made available	There is an improvement in the quality of health	5years	The population, Mayor, technical service of the council, VDC, management committee	Ministry of health, Member of parliament, DMO	From feasibility studies
			Lobby for more health care personnel	Number of health personnel recruited	-Field observation -Reports -Lists	Availability of health personnel	Improvement in the patient - doctor ratio	2yrs	DMO Ndop	Council Special fund for health	From feasibility studies

**Table 5.3:** STRATEGY OF THE EDUCATION SECTOR: The promotion protection and provision of basic and secondary educational opportunities and conducive atmosphere; all over the entire national territory of the Republic of Cameroon

Sector	Objective	Specific objective	Actions	Verifiable indicators	Means of verification	Assumptions for realisation	Expected results	Period	Responsibility	Partners	Estimated cost
Education	To ensure greater access to quality and affordable education to all and sundry in	1: To Improve the staffing situation of schools in the council area	Lobby for the recruitment of more staff	Number of staff recruited	From council reports and field observation, Report from DDSE Ngoketunjia/ IBE Balikumbat	Increase in number of staff available, PTA teachers employed	More staff are available and committed to teach in the various schools	5years	The population, technical service of the council, VDC, PTA, Mayor	Ministry of Basic /Secondary education IBE Balikumba t/ DDSE NGOs Member of parliament	1.5million

Sector	Objective	Specific objective	Actions	Verifiable indicators	Means of verification	Assumptions for realisation	Expected results	Period	Responsibility	Partners	Estimated cost
	<b>Balikumbat council area by 2023</b>	2: To create more schools and have a school located closer to the households	Lobby for the creation and construction of more schools	Number of schools created	Report from IBE Balikumbat/DDSE Ngoketunjia From council reports and field observation	Many nursery, primary and secondary schools are available	All school cycles are available and there is a reduction in time taken to reach the nearest school	5years	VDC, the council, The member of parliament, PTA	Ministry of Basic/ Secondary education, IBE Balikumbat, DDSE Ngoketunjia	800,000
		3: To provide more classrooms and maintain existing ones.	Construction of more classrooms and maintenance of existing ones Lobby for funds for the maintenance of school infrastructure	New classrooms are constructed and equipped	Report from DDSE Ngoketunjia/ IBE Balikumbat, Council Report, Field visits	More available classrooms	More available and equipped classrooms with permanent material and children learn in conducive condition	5years	The population, technical service of the council, Mayor VDC, management committee, PTA	Ministry of Basic/ Secondary education, IBE Balikumbat DDSE Ngoketunjia	45million

Sector	Objective	Specific objective	Actions	Verifiable indicators	Means of verification	Assumptions for realisation	Expected results	Period	Responsibility	Partners	Estimated cost
		4. To reduce the cost of access	Reduction in cost of access to education, provision of scholarship	Number of new cases enrolled after reduction,	Enrolment registers, reports of school authorities, minutes of PTA meeting	More pupils and students have access to learning	More awareness and increase in literacy	5years	School authorities, IBE/DDSE pupils/students, NGOs	Ministry of Basic/ Secondary education, IBE Balikumba t, DDSE Ngoketunji a	1million
		To improve quality of education in Balikumbat	Partner with other organisations to supply text books	Number of text books supplied	List of books Reports	Partners are ready to supply books	Education is improved in the subdivision	2yrs	School authorities, IBE/DDSE pupils/students, NGOs	Ministry of Basic/ Secondary education, IBE Balikumba t, DDSE Ngoketunji a	From Feasibility studies

**Table 5.4:** STRATEGY OF THE COUNCIL SERVICE SECTOR: To bring administration closer to the population, ensure peace and order and empower the council to take greater charge of their own development (decentralization) in the Republic of Cameroon

Sector	Objective	Specific objective	Actions	Verifiable indicators	Means of verification	Assumptions for realisation	Expected results	Period	Responsibility	Partners	Estimated cost
Council services	To bring local administration closer to the population and empower the council to take greater charge of their own development in line with decentralization by December 2019	1: To involve the population in decision making	Inform the population about council sessions	Number of stakeholders and socio professional group who attended the council session	From council reports and attendance sheets, invitation letters distributed, council notice board, Dispatch letters	Increase in number of actors invited during council sessions, Increase in the use of council services	More stakeholders participate in decision making, Sustained increase in the use of council services	1 year	The Secretary General	Mayor PNDP	80,000

Sector	Objective	Specific objective	Actions	Verifiable indicators	Means of verification	Assumptions for realisation	Expected results	Period	Responsibility	Partners	Estimated cost
		2: To communicate all development actions	Announcements through various media houses, Social media, Construction and placement of council notice boards at strategic locations of the town, development of a website, email and facebook page	Number of copies of different announcements sent out,  Website developed,  Email address created	From council reports and field observation  Testimony from the population	Increase turnout in all council activities, All communication avenues have been exploited	High involvement of the population in decision making at the council  Updated website  Frequent use of all communication means	1 year	The SG of the council  The population	The Mayor PNDP  DD communication  DD P&T	600,000

Sector	Objective	Specific objective	Actions	Verifiable indicators	Means of verification	Assumptions for realisation	Expected results	Period	Responsibility	Partners	Estimated cost
		3: To ensure transparency in management .	Publish administrative and financial account of the council yearly, Publish the annual investment plan of the council	Number of stakeholders who are aware of the accounts	All accounts and income sources are published on the notice board	Administrative and financial accounts are published	More awareness on the administrative and financial accounts is created	1year	The municipal treasurer Council finance officer Council cashier The SG	Divisional treasury, Other financial services	60,000

Sector	Objective	Specific objective	Actions	Verifiable indicators	Means of verification	Assumptions for realisation	Expected results	Period	Responsibility	Partners	Estimated cost
		4: To increase population's access to decentralised services	Opening of special civil status centres, Employment of registrars, Creation of mobile registration centres	Number of special civil status centres created, Number of registrars employed, Number	Area view of the special centres, field visits, list of newly recruited employees	Communities are willing to host the centres,	Increase access of the population to decentralised services, Increase number of households benefiting from decentralised (from decentralised what?)	1year	technical service of the council, Mayor	PNDP MINADT	4million

# ANNEXES

## ANNEXE 1: Questionnaire

MINISTERE DE L'ECONOMIE, DE LA  
OF ECONOMY, PLANNING AND  
ET DE L'AMENAGEMENT DU TERRITOIRE



PLANIFICATION MINISTRY  
REGIONAL  
DEVELOPMENT

SECRETARIAT GENERAL

GENERAL SECRETARY

PROGRAMME NATIONAL DE DEVELOPPEMENT

NATIONAL COMMUNITY DRIVEN  
DEVELOPMENT PROGRAM

PARTICIPATIF

CELLULE NATIONALE DE COORDINATION

NATIONAL COORDINATION UNIT

### *Citizen Report Card*

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

<b><u>Section I. BACKGROUND INFORMATION</u></b>	
<b>A01</b> Region _____	_ _
<b>A02</b> Division _____	_ _
<b>A03</b> Council _____	_ _ _
<b>A04</b> Batch number _____	_ _
<b>A05</b> Enumeration Area Sequential number	_ _
<b>A06</b> Residence stratum :                    1=Urban    2=Semi-urban    3=Rural	_
<b>A07</b> Name of the locality _____	
<b>A08</b> Structure number _____	_ _ _
<b>A08a</b> Household number in the sample	_ _
<b>A09</b> Name                    of                    the                    household                    head _____	
<b>A10</b> Age of the household head (in years)	_ _
<b>A11</b> Sex of the household head : 1=Male    2=Female	_



	other system?	D. Boreholes equipped with a manually operated pump  E. Spring/ river  F. Access to tap water (pipe borne water)	__    __    __
<b>Section II. POTABLE WATER</b>			
<b>H01a</b>	Is your main water supply source run by a public or owned by a private entity? 1=Public 2=Private If 2 → H14		__
<b>H02</b>	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		__
<b>H03</b>	What is the quality of the said water? 1=Good 2=Poor 3=Indifferent		__
<b>H04</b>	Does this water have an odour? 1=Yes 2=No 8= Does not know.		__
<b>H05</b>	Does this water have a taste? 1=Yes 2=No 8= Does not know.		__
<b>H06</b>	Does this water have a colour? 1=Yes 2=No 8= Does not know.		__
<b>H07</b>	Do you pay something to get this water? 1=Yes 2=No If no → H08		__
<b>H07a</b>	If yes, how much do you spend on average per month? (give an amount in FCFA)		__   __   __   __
<b>H07b</b>	How do you appraise the said amount? 1=High 2=Affordable 3=Insignificant		__
<b>H08</b>	Is this water available throughout the year? 1=Yes 2=No		__
<b>H09</b>	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		__
<b>H10</b>	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.		__
<b>H10a</b>	If your water point had a breakdown at a given point in time during the last six months, notably since ....., how long did it take for it to be repaired? 1=Less than one week 2=Between one week and one month 3=Between one month and three months 4=Over three months 5=Not yet, if 5, → H11		__

<b>H10b</b>	Who repair it?  Who else?	1=Yes 2=No A=Mayor (Council) B=State C=An elite D=The Water Management Committee E=the village/quarter head F=CAMWATER/SNEC/CDE X=Other partners/stakeholders : _____	_   _   _   _   _   _   _   _
<b>H11</b>	Do you have access to that water point at any moment of the day? 1=Yes 2=No If yes → H13		_
<b>H12</b>	If no, what is the daily frequency in terms of potable water supply in your household? 1=Once ; 2=Twice; 3=Thrice		_
<b>H13</b>	Does the said frequency correspond to your current need in terms of potable water consumption-? 1=Yes 2=No		_
<b>H14</b>	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		_
<b>H15</b>	To whom did you submit your request/needs? (several answers are possible)  Other?	1=Yes 2=No A. Mayor (Council) B. State C. An elite D. The Water Management Committee E. The village/quarter head F. the Administrative authorities G . CAMWATER/SNEC/CDE X . Other stakeholders : _____	_   _   _   _   _   _   _   _   _
<b>H16</b>	Has your need been met? 1=Yes 2=No If no → H18		_
<b>H17</b>	In the event of a satisfactory answer, how much times did it take for your need to be satisfied? 1=Less than one month 3=Over three months 2=Between one and three months		_

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

<b>Section III. HEALTH</b>		
<b>S01</b>	Which is the nearest health care unit to your household? 1= Public integrated health Centre 2= Hospital/CMA 3= Private health Centre	__
<b>S02</b>	How much time do you need, on average, to reach the nearest health care unit from your household? 1=Less than 15 minutes 2=Between 15 and 30 minutes 3=Between 30 minutes and 1	__

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

<b>S14</b>	How did the household member appraise the welcome attitude of the medical staff of the said health care unit? 1=Caring      2=Fair      3=Poor	__
<b>S15</b>	Is this health care unit provided with a pharmacy/pro-pharmacy? 1=Yes      2=No <del>If no</del> S17	__
<b>S16</b>	Are drugs always available? 1=Yes      2=No      8=Do not know	__
<b>S17</b>	Is this nearest health care unit capable of providing appropriate solutions to most of the health problems faced by your household? 1=Yes      2=No	__
<b>S18</b>	Broadly speaking, what is the level of satisfaction as concerns health care services provided by the nearest health care unit to your household? (Only circle a single answer) 1=Satisfied      2=Indifferent      3=Not satisfied      If S18=1 or 2 → S20	__

<b>S19</b>	State the reasons of your dissatisfaction with regard to health services provided within the health care unit you attend? (several answers are possible)	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	__   __   __   __   __   __   __
	Any other reason?	X. To be specified) : _____	__
<b>S20</b>	What are your expectations with respect to health care services?	1=Yes    2=No A. Additional health care units B. Supply of drugs C. Transfer of a staff member D. Equipped health care units	__   __   __   __
	Any other expectations?	X. Other to be specified _____	__

**Section IV. EDUCATION**

	<b>Education cycle</b> →	<b>Nursery</b>	<b>Primary</b>	<b>Secondary</b>	<b>Vocational training</b>
<b>E01</b>	Is your village/quarter provided with an education cycle « Name of the said cycle »? 1=Yes 2=No	_	_	_	_
<b>E02</b>	How many children from your household attend the nearest school? (name of the cycle) (write down the number in front of each cycle)	_ _	_ _	_ _	_ _
<b>E03</b>	How many Kilometers do children from your household cover, on average, to go to school? (name of the cycle)? 1=Less than 1 Km 2=Between 1 and 5 Kms 3=Over 5 Kms	_	_	_	_
<b>E04</b>	What is, on average, the time spent covered by children from your household to reach the nearest school on foot? (name of the cycle) (estimated in minutes)	_ _	_ _	_ _	_ _
<b>E05</b>	Is the school (name of the cycle) attended by children from your household provided with a complete cycle? 1=Yes 2=No		_	1st cycle  _	2 <sup>nd</sup> cycle  _
<b>E06</b>	Is the vocational training center attended by children from your household provided with a complete workshop deemed suitable to their various trades? 1=Yes 2=No 3=Does not know				_
<b>E07</b>	Is the school (name of the cycle) attended by children from your household provided with a class-room per class level? 1=Yes 2=No	_	_	_	_
<b>E08</b>	Are all the children seated on a bench in the school (name of the cycle) attended by children from your household? 1=Yes 2=No	_	_	_	_

<b>E09</b>	Are school textbooks distributed to pupils in the school (name of the cycle) attended by children from your household? 1=Yes 2=No	_	_		
<b>E10</b>	How many student does a classroom attended by children from your household contain (name of the cycle)? 1=Less than 30 2=Between 30 and 60 3=Over 60 4=Does not know	_ _	_ _	_ _	_ _
<b>E11</b>	How do you assess the frequency of the attendance of teachers in the class-room(s) (name of cycle) in which the children from your household are enrolled? 1=Regular 2=Averagely regular 3=Irregular	_	_	_	_
<b>E12</b>	How much do you pay per child from your household on average (registration, tuition fees, Parent-teacher associations' fees (PTA) (name of the cycle) throughout a school year? (write down the average amount)	----- - (estimated in FCFA)	----- - (estimated in FCFA)	----- - (estimated in FCFA)	----- - (estimated in FCFA)
<b>E13</b>	How do you appraise such amount? 1=High 2=Affordable 3=Insignificant	_	_	_	_
<b>E14</b>	In addition to the fees, has your household paid additional fees to the personnel of the school (name of the cycle) prior to the enrolment of children from your household in school? 1=Yes 2=No If no E16	_	_	_	_
<b>E15</b>	Were you obliged to pay such additional fees to the school (name of the cycle) 1=Yes 2=No	_	_	_	_
<b>E16</b>	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)	_   _   _	_   _   _	_   _   _	_   _   _

	<p>C. A village organisation</p> <p>D. MINEDUB/MINESEC/MINEFOP</p> <p>E. Elites</p> <p>X. Other partners/stakeholders (to be specified)</p> <p>_____ Any other?</p>	<p> _  </p> <p> _  </p> <p> _  </p>	<p> _  </p> <p> _  </p> <p> _  </p>	<p> _  </p> <p> _  </p> <p> _  </p>	<p> _  </p> <p> _  </p> <p> _  </p>
<b>E17</b>	<p>In general, what is your level of satisfaction with regard to education services provided in the (name of the cycle) your village? (Only a <u>single answer</u> is possible)</p> <p>1=Satisfied      2=Indifferent      3=Not satisfied.</p> <p>If 1 or 2      E19.</p>	<p> _  </p>	<p> _  </p>	<p> _  </p>	<p> _  </p>
<b>E18</b>	<p>State the reasons of your non-satisfaction in connection with the basic education services provided in (name of the cycle) in your village?</p> <p>(Several answers are possible)</p> <p>Any other reason? 1=Yes      2=No</p> <p>A. Far distance to access the education service</p> <p>B. Insufficiency of class-rooms</p> <p>C. Insufficiency of equipments</p> <p>D. Insufficiency of schools</p> <p>E. Insufficiency of teaching Staff</p> <p>F. No distribution of text books</p> <p>G. Poor results</p> <p>H. High tuition fees</p> <p>X. Any other reason to be specified</p>	<p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p>	<p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p>	<p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p>	<p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p> <p> _  </p>

<b>E19</b>	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**

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

Building permit	_	_	_	_	_	_	_
Death certificate	_	_	_	_	_	_	_
Marriage certificate	_	_	_	_	_	_	_
Certificate of residence	_	_	_	_	_	_	_
Approval of localisation plans	_	_	_	_	_	_	_
Information	_	_	_	_	_	_	_
Other (to be specified) _____	_	_	_	_	_	_	_
<b>C07</b>	Has any member of your household taken part in the village assemblies aimed at drawing up the Council Development Plan (CDP, AIP, and MTEF)? 1=Yes 2=No						_
<b>C08</b>	Is any member of your household informed about the amount of the annual budget of your council? 1=Yes 2=No						_
<b>C09</b>	Is any member of your household informed about the expenditures and incomes of your council during the previous fiscal year? 1=Yes 2=No						_
<b>C10</b>	Does the council support the development actions of your village/quarter ( such as community activities, follow-up of village development committees, follow-up of management committees, setting up of village development and monitoring committees, carrying out of micro projects in your village/quarter, etc.)? 1=Yes 2=No 8=Does not know						_
<b>C11</b>	Does the council involve your village/quarter when planning development actions? 1=Yes 2=No 8=Does not know						_
<b>C12</b>	Does the council involve your village/quarter when programming and budgeting development actions? 1=Yes 2=No 8=Does not know						_
<b>C13</b>	Broadly speaking, what is your level of satisfaction as concerns services provided by the council? (choose only a single answer) 1=Satisfied 2=Indifferent 3=Not satisfied If 1 or 2 C15						_

<p><b>C14</b></p>	<p>State the reasons of your dissatisfaction with regard to services provided by the council (Several answers are possible). Any other reason ?</p>	<p>1=Yes 2=No</p> <p>A. Cumbersome procedures with regard to the processing of users' requests B. Non-involvement of the populations in the management of development activities by the council 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) _____</p>	<p> __   __   __   __   __   __ </p>
<p><b>C15</b></p>	<p>What do you expect from the council team? (Several answers are possible). Any other expectation?</p>	<p>1=Yes 2=No</p> <p>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) : _____</p>	<p> __   __   __   __   __ </p>