

**ASHANTI DEVELOPMENT, UK**

**EKUO, MPEMPE AND TENTEN (EMT)**

**COMMUNITIES**



**Baseline Report**

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**Water and Sanitation Situation EMT in Sekyere  
Central District of Ashanti Region**

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## **INTRODUCTION**

Ashanti Development; a UK based Non Governmental Organisation has been working in collaboration with the Mampong Municipal Assembly and Sekyere Central District Assembly since 2006. The project is aimed at improving the living conditions of the poor through the provision of safe water, improved latrines, hygiene education and livelihood support. The project is continuing this year in the Sekyere Central District of Ashanti region and one of the new communities to benefit from the project are Ekuo, Mpempe and Tenten (EMT).

As a result, the Project team from Ashanti Development has conducted a baseline survey at EMT, the beneficiary communities in the Sekyere Central District of the Ashanti Region. The information gathered through the baseline survey would guide the designing and successful implementation of the water supply, sanitation, hygiene improvement and other social intervention programmes in the communities.

## **OVERALL OBJECTIVE**

The primary objective for the conduct of the survey is to assist the communities to assess their water, sanitation and hygiene situation through participatory processes which involves problem identification, diagnosis, analysis and designing strategies to improve their living conditions.

### ***Specific Objective***

The specific objectives for the conduct of this baseline survey include:

- Assess the water supply and sanitation situation in the community
- Determine strategies that will lead to initiating improved water supply, good hygiene practices, and improved sanitation interventions in the community
- Set indicators to check progress and impact assessment after interventions.

## **METHODOLOGY**

The Project Team adopted a number of participatory techniques to ensure that the community members participate effectively in the survey. Some of the tools employed include the following:

- Focus Group Discussion
- Community Mapping
- Transect Walk
- Key informant interviews

## **BRIEF HISTORY OF PSK**

According to oral history, the people of the three communities originated from Paakoso near Asokore Mampong in Ashanti Region of Ghana. A lady by name Ekuo Kwatemala visited her friend who was then the queen mother of

Nsuta. At Nsuta, Ekuo Kwatema got married to a man from nearby village of Kyebi. The couples then decided to relocate into the forest to start farming. They named their village Ekuo which later attracted many people to come and settle in the village. The villages of Mpempe and Tenten were later developed out of Ekuo.

### **DEMOGRAPHY OF EMT**

On demographic information, the Project team employed head counting through household-to-household method to effectively collect the information. This tool enabled the Project team to ascertain the number of houses and the total population of the communities. At the end of the process it was gathered that there are **12** houses/households in the communities and a population of **88**. The total population exclude citizens or natives who live outside the three communities. The data collected on the population revealed that the female population constitutes 54.5% of the population. The table below show the population breakdown.

<b>Age</b>	<b>Male</b>	<b>Female</b>	<b>Total</b>
Above 18 years	26	28	54
Below 18 years	14	20	34
<b>Total</b>	<b>40</b>	<b>48</b>	<b>88</b>

*Population distribution in EMT*

Following the successful usage of the community mapping tool to determine the population and the number of houses; the following vital information was deduced from the exercise for use by the community and also other stakeholders who would be interested in assisting the community. They include:

1. A reliable data on community members qualified to pay levy and this would enable them make projections and also track defaulters
2. The number of community members who are supposed to attend communal labour in the community
3. The data would also help them to make projections in terms of development projects since they have the breakdown of the various age groups
4. The data would also enable them to ascertain whether the facilities in the community are sufficient or not and this also applies to organizations who are interested in assisting the communities

### **Language**

The people of EMT are predominantly Akans and they speak Twi. There are a couple of other tribes mostly settler farmers from northern Ghana but they all speak Twi. As a result, Twi is the widely spoken language in the communities.

### **ECONOMIC ACTIVITIES**

According to the community members, the people of EMT are predominantly farmers. They indicated that farmers in the community constitute about 99.5%

of the working population. Some of the crops grown include avocado pear, plantain, cassava, corn, yam, cocoyam, vegetable and groundnut. Almost all the farmers in the villages are subsistence farmers but also sell their surplus food stuff in the near by markets in Nsuta and Mampong. According to them money realized from the sale of their surplus farm produce is used for paying their children school fees, levies in the community, taking care of their health needs and other family needs.

Some of the challenges they face as far as farming is concerned include the following:

- Lack of funds to support large scale farming
- Problem of marketing their farm produce, especially during the major crop season.
- Transportation problem due to poor nature of the road which link the villages to the main Nsuta road

## **EXISTING INFRASTRUCTURE**

- **Road**

EMT is about 4km from the district capital Nsuta and it is located off the main road between Nsuta and Nkwabirim. The road from Nkwabirim to EMT is muddy and difficult to drive on during the raining season.

- **Existing Water Sources**

The Project team gathered that there is one Borehole in the communities and this was constructed by government in 2007.

There are two streams by name Dida and Asuosuam which they fetch for drinking as well as household needs.

- **Problems with the Water facilities**

During the visits to the communities it was observed that the only borehole which serves the three communities was not functioning, but at the time of doing this study, Ashanti Development mechanics have repaired the boreholes. According to the community members, they have made several attempts to raise funds towards operation and maintenance of the boreholes but had not worked because the people are not willing to pay.



Existing borehole at Ekuo

- **Quality of water (streams)**

The streams are polluted with dry leaves and human activities such as farming (use of agro chemicals) and walking in the streams. Germs and particles are also visible, making it difficult for most people to drink.

- **Seasonality of water sources (streams)**

During community discussions and visits, it was identified that the streams dry up or their flow reduces drastically during the dry season, leading to water shortages in the communities. During this period, community members, especially women and children, walk to Nkwabirim, the nearby village, to fetch water. This affects the punctuality and attendance of school pupils. It also affects the hours farmers spend in their farms.

## **SANITATION AND HYGIENE SITUATION**

- Existing Sanitation facilities

It was gathered from the community members through discussions and transect walks that the community has the following sanitation facilities:

- Two traditional pit latrines (men and women)
- Two Household latrines

### **Two traditional pit latrines**

During a community meeting and transect walk, it was gathered that the communities have two traditional communal latrines which were constructed by the community members. These traditional pit latrine facilities are well maintained even though they are almost full. According to the community members, the children in the communities are responsible for the cleaning of the latrines and they do so every Sunday. Sometimes, the adults also offer support to the children to tidy up the latrines. Open defecation is

common in Mpempe and Tenten communities which are far from the communal latrine which is located at Ekuo.



Existing traditional pit-latrine (women)



Existing traditional pit-latrine (men)

#### Existing Household Latrine facilities

It was also gathered through a transect walk and also community meeting that there are only two household latrines in the community. These latrines according to the community members were constructed through the initiative of those households' owners and are used by adult members of the households and important visitors.

#### Refuse Dump Site

With regard to the refuse dump site, it was observed that there is no communal refuse dump site and every household dump their refuse at the back of their house or on the side of foot path to their farms.

- **Sanitation and Hygiene Practices**

Through focus group discussion with men and women, risk related sanitation and hygiene practices were identified. There following were the risk hygiene practices identified:

- Poor management of refuse
- Open defecation
- Weedy environment
- Hand washing without soap

- **Analysis of Risky Hygiene Practices**

#### Poor Management of Refuse dump site

A visit to various household revealed that they dump their refuse at the back of the houses and such mini dump sites are poorly managed. According to the community members, no land owner is willing to release land to be used for the purpose of dumping refuse hence the several mini refuse dumping sites.

#### Open defecation

Open defecation is a common practiced at two of the three villages; Mpempe and Tenten. They attributed the situation to the distance from those villages to Ekuo where the communal latrine is located.

#### Weedy Environment

It was observed that some portions of the communities are weedy and the community members during a community meeting also mentioned it as one of the risk hygiene practices in the communities. According to the community members, the portions which are weedy are farm plot to some household but they fail to weed it during the off season thereby creating the bushes around in some portion of the communities.

#### Hand washing without soap

Through discussion and observation, it came to light that hand washing is usually practiced but not with soap in most cases. It was stated that soap is usually used after eating. Awareness of the need and effects of washing hands with soap is quite high in the communities but in most instances, the people are busy or do not care about the consequences.

### **HEALTH ISSUES**

During a community meeting, it was gathered from the community members that malaria, fever and diarrhoea are the prevalent diseases in the communities. They attributed the prevalence of these three diseases to the risky hygiene practices that pertain in the communities. According to them when they fall ill, they visit Nsuta clinic or Mampong hospitals, which are about 4 and 4.5km respectively from EMT.

### **COMMUNITY INSTITUTIONS**

The survey revealed that there are a number of community institutions in EMT and they include the Traditional leaders (chief and elders), Unit committee, and WATSAN committee. It was gathered during the community meetings that these institutions are not functioning properly.

#### Working Relationship among the Institutions

The survey revealed that there is some working relationship between some of the institutions in the communities. This is because some members of the communities serve in more than one committee.

#### Relationship between Community Institutions and other Stakeholders

The survey gathered that the level of relationship between the community institutions at EMT and other stakeholders is not the best. According to them, the Unit committee only occasionally goes to the Assembly to present their challenges to them for support. This is so because the Assembly member for the area who is from Bimma leaves and work in Kumasi the regional capital and do not visit them regularly to discuss development programmes with them.

### **DEVELOPMENT PROJECTS**

As part of the survey, the Project team facilitated the process of ascertaining from the communities their projects needs. The community members during a community meeting came up with the following projects base on priority:

- Construction of improved household latrines
- Construction and fixing of borehole
- Micro Credit for Agriculture and petty trading.
- Road improvement

After coming out with these needs or projects, the Project team assisted them to rank them base on priority. The one with a highest vote come first and continue in that order

## **AVAILABILITY OF LOCAL RESOURCES**

### *Natural Resource*

It was gathered from the community members that there are some natural resource in the community which they normally harnessed to facilitate smooth implementation of their projects. The resources they mentioned include water, clay and wood

### *Human Resource*

The human resource available in the communities includes labour from both unskilled and skilled such as seamstress, weavers and hairdresser.

### *Financial Resource*

According to the community members they have adopted a number of fund raising strategies in the past. They include communal levy and community harvest. However what they are comfortable with is the community levy which they normally pay when ever they embark on any developmental project

## **LESSONS LEARNT**

The following lessons were learnt from the survey carried out at EMT:

- For a community to develop there is the need for the community members to have high community participation spirit
- Effective working relationship among community institution helps to bring about development.
- Effective training help ensure efficiency among community institutions.

## **CHALLENGES**

- High number of aged population in the villages is likely to affect their participation in a communal work.
- The leadership of the communities are to a large extend unable to enforce the bye laws in the communities and this can pose a serious challenge to the smooth implementation of the Water and sanitation programmes

## **RECOMMENDATIONS**

Bases on the findings from the survey, the following recommendations are made.

- The Unit and the WATSAN committee members must be trained especially on community mobilization to ensure efficiency and effectiveness
- Support the communities in the construction of 12 improved household latrines
- Hygiene education should be integral part of water and sanitation projects and programmes in the communities to ensure effective usage and impact realization
- Livelihood support programmes should be provide to the community members especially in the area of farming and petty trading to boost their incomes

## **CONCLUTION**

The survey has revealed that the current sanitation situation in EMT is not the best and the communities urgently need to put in place appropriate strategies to improve the situation. Looking at the enormity of the situation, it is important that external assistance is provided to help solve the problem once for all. It is hope that development partners and friends of EMT will consider the recommendations made in this survey in their planning and decision making process to solve the sanitation problems in the communities.