



REPUBLIC OF GHANA

LOCAL GOVERNMENT SERVICE

ASUTIFI SOUTH DISTRICT ASSEMBLY

ANNUAL PROGRESS REPORT, 2016

DATE OF SUBMISSION: *16TH FEBRUARY, 2016*

Client: ASUTIFI SOUTH DISTRICT ASSEMBLY

(FEBRUARY, 2016)

Table of Contents

INTRODUCTION	1
CHAPTER ONE.....	2
HUMAN DEVELOPMENT, PRODUCTIVITY AND EMPLOYMENT	2
1.1 Introduction	2
1.2 Health Indicators.....	2
1.2.1 Facilities and Staffing Level	2
1.2.2 Health Facilities in the District	2
1.2.3 Health Staffing Level in the District	3
1.2.4 Top Ten (10) diseases (2015/2016).....	4
1.2.5 HIV and AIDS Situation.....	5
1.2.6 National Health Insurance Scheme	6
1.2.7 Implementation of Adolescent Reproductive Health Programme	8
1.3 Water and Sanitation.....	10
1.4 Educational Indicators.....	12
1.4.1 Number of Schools.....	12
1.4.2 Enrolment Level.....	12
1.4.3 Staffing Level in Schools.....	13
1.4.4 Pupil/Teacher ratio (PTR).....	13
1.4.6 School Feeding Programme.....	14
1.4.7 Employment Situation in the District	15
CHAPTER TWO.....	17
INFRASTRUCTURE, ENERGY AND HUMAN SETTLEMENT DEVELOPMENT.....	17
2.1 Introduction	17
2.2 Road	17
2.3 Access to Energy.....	18
CHAPTER THREE	19
ACCELERATED AGRICULTURAL MODERNIZATION AND SUSTAINABLE NATURAL RESOURCE MANAGEMENT	19
3.1 Agriculture.....	19
3.1.1 Major Crop and Output Level.....	19
CHAPTER FOUR	23
TRANSPARENT AND ACCOUNTABLE GOVERNANCE	23
4.1 Introduction	23
4.2 Financing and Budgeting.....	23

4.3 Empowering Women	26
4.4 Area Councils:	26
4.5 Police citizen ratio.....	26
CHAPTER FIVE	27
ANALYSIS OF DEVELOPMENT PROJECTS	27
CHAPTER SIX	31
LINKING BUDGET TO THE ANNUAL PLAN.....	31
6.1 Introduction	31
6.2 Analysis	32
6.3 Conclusion.....	32
APPENDIX I: DEVELOPMENT PROECTS IMPLEMENTED AS AT 31 ST DECEMBER, 2016	Error! Bookmark not defined.
APPENDIX II: APPENDIX II: PROGRAMMES IMPLEMENTED BY UNITS/DEPARTMENTS AT THE END OF 31 ST DECEMBER, 2016	38

LIST OF TABLES

TABLE	PAGE
Table 1: Health Facilities in the District.....	2
Table 2: Summary of Staff Nominal Role	4
Table 3: Top Ten Cases of OPD attendance 2015/2016.....	5
Table 4: HIV and AIDS Situation 2106	5
Table 5: Number of people registered on National Health Insurance.....	7
Table 6: Result Matrix	10
Table 7: Toilet Facilities in the District	11
Table 8: School Enrolment in the District 2015/2016	12
Table 9: Total Enrolment by levels of Education	12
Table 10: Staffing Level in Schools (2016)	13
Table 11: Pupils/Teacher Ratio (PTR)	14
Table 12: Gender Parity Index	14
Table 13: Coverage of School Feeding Program& the Amount Disbursed	15
Table 14: Employment Situation in the District	15
Table 15: Nature and Length of Roads in the District 2016	17
Table 16: Technologies Demonstrated	19
Table 17: Major Crops and their output level in metric tons Per/Ha, 2016.....	20
Table 18: Number of Farmers Sensitized on HIV and AIDS	20
Table 19: Youth in Agric	21
Table 20: Percentage of crops Consumed and Sold 2016	21
Table 21: Revenue Sources: Internally Generated Fund	23
Table 22: External Revenue Sources	24
Table 23: Expenditure Pattern as at December, 2016	25
Table 24: Actual Spending in Relation to the Thematic Area, 2016	31
Table 25: Budget for the implementation of the 2016, Annual Action Plan.....	31

INTRODUCTION

Asutifi South District is one of the newly created Administrative Districts in the Brong Ahafo Region. It was carved out of the then Asutifi District in July 2012, with Hwidiem as its District Capital. Agriculture is basically the backbone of the District's economy and is operationalized by peasant farmers.

The District's location is between latitude 6^o40 and 7^o15, North and longitudes 2^o15, and 2^o45, west. It shares boundaries with Asutifi North District in the North, Ahafo Ano North District in the East, Asunafo North Municipality in the West, Atwima Mponua District in the South East and Asunafo South District in the South West. With an inter-censal growth rate of 2.3% the District projected population stands at 62,256. The male population constitutes 32,996 whereas the female population composes of 29,260.

The Annual Progress Report for the District is a review of the status of actions taken on the implementation of programmes and projects outlined in the Medium Term Development Plan of the Ghana Shared Growth and Development Agenda (GSGDA II) prepared by the Asutifi South District. The compilation of this report is based on the results of the assessment of a set of indicators which have been adopted for monitoring and evaluation, the success of Key programmes and project interventions implemented in 2016.

The objectives of this report are to:

- Provide information on the growth of the District through the implementation of the 2014-2017 Medium Term Development Plan.
- Identify the challenges and constraints that hinder the achievement of the set goals and objectives of the District's policy document (MTDP 2014-2017 and the GSGDA.)
- Establish plans and strategies to address the issues in order to achieve the set targets.

The goal of the Asutifi South District is to reduce the level of economic, social and political deprivation through effective and efficient utilization of the limited resources to harness the existing potentials and opportunities to improve the living standards of its people. By this, the District is striving to mobilize human, physical and financial resources as well as creating an enabling environment for wealth creation.

CHAPTER ONE
HUMAN DEVELOPMENT, PRODUCTIVITY AND EMPLOYMENT

1.1 Introduction

This chapter of the report assesses progress made towards achieving the set objectives under Human Resource Development, using selected key indicators relevant to the broad thematic area.

The main objective of this thematic area of the District Medium Term Development Plan (DMTDP) is to improve upon the standard of education and ensure quality health care delivery in the District.

1.2 Health Indicators

1.2.1 Facilities and Staffing Level

A productive human resource depends largely on the availability of healthcare facilities and personnel. To this extent, the District has embarked on a number of measures to ensure that its population has access to quality healthcare. The private sector has also done well in this direction as the Roman Catholic Church has even established the only hospital that serves not only the District but other neighbouring Districts as well.

1.2.2 Health Facilities in the District

The District has one private hospital established by the Roman Catholic Church. Aside the hospital, there are two (3) Health centers, three (2) Community Health Planning Service (CHPS), One (1) Rural Clinic and one (1) private maternity home.

Table 1:0 Health Facilities in the District

Type of facility	Location	No.	Ownership	Total
Hospital	Hwidiem	1	Private	1
Health centre	Acherensua	1	Public	3
	Dadiesoaba	1	Public	
	Nkaseim	1		
CHPS Compound	Apenemadi	1	Public	2
	Akotosu	1	Public	
Rural Clinic	Siencheim	1	Public	1
Maternity Home	Twabidi	1	Private	1
Total		8		8

Source: Asutifi South Health Directorate, 2016

The statistics show that, there are 8 health facilities overall in the District. 6 of these are public whilst 2 are private. The facilities are evenly distributed across the four Area councils to ensure

equity in health care delivery. Some of these facilities are being expanded while new ones are being constructed to cater for the growing population.

1.2.3 Health Staffing Level in the District

There is about Two Hundred and thirteen (213) staff working in the various health facilities in the District. The St. Elizabeth Hospital, a private facility established by the Catholic Church in the District alone employs about two Hundred and thirteen (213) health personnel. The remaining one hundred and four (124) are under the District Health Directorate.

Table 2: Summary of Staff Nominal Role

Job Description	Total No. of Employees	
	St Elizabeth Hospital	District Health Directorate
Medical Officer	7	0
General Nurses	34	0
Dental Clinic	3	0
Midwives	15	9
Enrolled Nurses	10	24
Health Assistants	27	13
Community Health Nurses	15	36
Anesthetists	3	-
Sterilize Mach. Operators	1	-
Laboratory/Biostatics	10	2
Dispensary Assistant	5	2
Administration	7	11
Accounts/Claims	7	1
Medical/Records	19	6
Eye Clinic	2	-
Physician Assistant	4	3
Pharmacy	8	0
Psychiatric Nurse	0	2
Diagnostics	4	0
Medical Stores	3	1
Laundry	3	0
Labourers	16	7
Security	7	4
Tailor	2	0
Field Technicians	1	3
TOTAL	213	124

Source: Asutifi South District Health Directorate

1.2.4 Top Ten (10) diseases (2015/2016)

The District is fortunate to have a hospital in the capital and other health facilities with personnel spread across the four Area Councils. Most people therefore have easy access to these health facilities. Records show that Malaria, Upper Respiratory Tract Infections and Skin Diseases top the OPD Cases in 2015, on the same hand Malaria, Upper Respiratory Tract Infections and Skin Disease top the chart for 2016 of the 97729 and 76522 outpatient attendances respectively.

Malaria alone accounts for 31.7% in 2015 reducing to 30.73% in 2016. The drop from 31.7percent to 30.73 percent is significant but not good enough to celebrate. More pragmatic measures in the area of sanitation must be put in place to address the situation. Free distribution of mosquito nets can also help reduce the incidence of malarial further in the District. The table below shows the top ten diseases reported in the various health facilities in 2016 in comparison with that of 2015.

Table 3: Top ten cases of OPD attendances 2015/2016

S/NO.	2015			2016		
	CASES	ABSOLUTE	%	CASES	ABSOLUTE	%
1.	Malaria	30993	31.7	Malaria	23513	30.73
2.	Upper Respiratory Tract Infections	16533	16.9	Upper Respiratory Tract Infection	15790	30.63
3.	Skin Disease	9879	10.1	Skin Disease	6657	8.70
4.	Diarrhoea Disease	8874	9.1	Diarrhoea Disease	7894	10.32
5.	Pregnancy related complications	4484	4.6	Pregnancy related complication	1443	1.89
6.	Intestinal worms	5918	6.1	Intestinal Worms	4527	5.92
7.	Rheumatism & other joint pains	6123	6.3	Rheumatism and other joint pains	4121	5.39
8.	Gynaecological conditions	4858	4.9	Gyneacological Condition	3685	4.82
9.	Acute eye infection	4649	4.8	Acute eye infection	3686	4.82
10.	Anaemia	5418	5.5	Anaemia	5206	6.80

Source: Asutifi South Health Directorate

1.2.5 HIV and AIDS Situation

The Ghana Shared Growth and Development Agenda (GSGDA) recognise the serious threat posed by HIV/AIDS to the socio-economic development of the country through its potential impact on human capital development, productivity, and social service delivery. There is progress towards the policy objective of curbing and controlling the spread of HIV and AIDS infection, and achieving the Millennium Development Goal of combating HIV and AIDS, Malaria prevalence by 2016.

Prevention and Behavioural Change Communication; Treatment Care and Support are the key strategies for controlling and curbing the HIV and AIDS epidemic in the District. Preventing new HIV infection, particularly among the youth is critical for managing the menace and knowing your status also helps manage the situation. The table below shows the District's situation.

Table 4: HIV and AIDS Situation 2016

INDICATOR	2014		2015		2016	
	TESTING AND COUNSELLING	%REACTIVE	TESTING AND COUNSELLING	%REACTIVE	TESTING AND COUNSELLING	%REACTIVE
PMTCT	3146	1.6	3223	1.8	3925	1.8
HTC	606	23.3	1396	20.0	1985	16.8
TB-HIV	27	14.8	45	15.0	44	16.0

Source: Asutifi South district Health Directorate

A look at the table the HIV and AIDS situation in the District needs more to be desired. HIV/ AIDS continue to increase in the District, from 2015 the Disease rate rose from 1.6 to 1.8 in 2016.

With the upsurge of illegal mining in the District and an influx of foreigners, more efforts are needed to combat the menace. Notwithstanding, the District put up a number of measures including free counseling and testing and the implementation of the Ghana Adolescent Reproductive Health Project to help control the situation. The government directive to clamp down on illegal mining has also made the activity unattractive in the District, pushing out a number of the foreigners who flooded the District. These measures among others will contribute to a reduction in the menace. The Stakeholders including the Assembly, the District Health Directorate and Civil Society Organizations can do more to reduce stigmatization and new infections. More Anti-Retroviral Drugs should be provided to persons living with HIV and AIDS in the District. This is because lack of the drugs and stigmatization will be inimical towards the fight of the disease.

1.2.6 National Health Insurance Scheme

The main focus of the National Health Insurance Scheme is to remove financial barriers and make health care and nutritional services accessible to all particularly the poor and vulnerable sections of the population.

The District National Health Insurance has been able to register a lot of people on the scheme since its inception in the District. However, the number continues to decrease from 91,348 in 2013 to 49,731 in 2016 which represent 29.5%. In terms of sex segregation more females are registered on the scheme than males, this shows that women health care is the prime objective of the District Health Insurance Scheme and also wants to eliminate maternal death in the District.

The Scheme as institution whose main objective is to provide access and affordable health care to all in its social responsibility programme registered 3,113 indigents which includes both persons with disability and financially handicaps.

The table below shows the number of persons registered on the scheme, sex segregation of persons registered on the scheme and number of indigents (the poor) registered on the scheme.

Table 5: Number people Registered on the National Health Insurance Scheme

S/N	Category of Registrants	2013	2014	2015	2016
1	Number of persons registered on the scheme	91,348	89,087	69,303	49,731
2	Sex segregation of persons registered on the scheme	M= 37,131 F= 44,217	M=36,144 F=52,943	M=28,305 F=40,998	M=21,024 F=28,707
3	Number of Indigents(the poor) registered on the scheme	16,367	16,366	10,518	3,113

Source: National Health Insurance Report 2016.

Achievements of the Scheme

The office has fulfilled all claims submitted so far by the fourteen (14) credentialed Health Facilities for the period under review.

Bills that were submitted have been casted and are undergoing manual vetting. Verification of patients' folders and regular facility visitation to ensure proper vetting has been done.

The District office in conjunction with the two District Social Welfare Departments is able to register and continue to register indigents, disability and LEAP Beneficiaries in the two Districts.

Challenges Facing the Scheme

- Delay in the submission of claims by some health providers
- Rampant prescription of drugs to clients by various Health Providers which ends up discouraging clients from registering with NHIS
- Challenge of high utility bills.
- Ineffective running of BMS mobile kits at most communities due to lack of network.
- Inadequate administrative funds as a result of remittance to NHIA and non-availability of administrative funds.
- Frequent breakdown of machines and staff's discomfort at work as a result of non-utilization (due to inability to buy enough electricity power to run the office) of air conditions that result in machines producing so much heat hence hot atmospheric conditions in the offices.
- Inadequacy of staff which obstructs the office from achieving its targets.
- Inability of the major provider (St. Elizabeth Hospital) in the district to render full service under the NHIS (practice of public private partnership).

- Delay in claims payment by NHIA. This is rendering Health Facilities in the District non-fully functional hence discouraging Clients from registering with the office and as a result the office could not meet its target.

1.2.7 Implementation of Adolescent Reproductive Health Programme

The Adolescent Reproductive Health Programme was implemented in 2014 in the District, which seeks to educate adolescent on their sexual reproductive health. since the inception of the programme a lot of activities has been enrol which has helped to reduce the teenage pregnancy cases in the District. The following are some of the programmes implemented in the year 2016.

School Health Clubs

The SHEEP Coordinator inaugurated school-based Adolescent Clubs in the district. A total of 20 school health clubs have been inaugurated following an earlier meeting held to draw the modalities for the clubs' formation. Opinion leaders, various stakeholders and media were invited for the inauguration of the school health clubs. The participants included:

- Head teachers
- School based health coordinators of school clubs
- Students (5 from each school)
- 4 dignitaries (1 Queen Mother, 1 assemblyman, 2 religious leaders)

Speakers at the inauguration included the district directors of education and health services, traditional and religious leaders.

Orientation for health workers on the use of mobile application

For better dissemination of information and also to bring information concerning adolescent sexual health to the door steps of the Health workers, the Adolescent Sexual Reproductive Health group has organized training to its associate health workers on the new application developed to post all information concerning adolescent sexual health. As a result of that, 20 health workers were trained on the use of mobile application to enable them access information on adolescent health project. Out of the 20 health workers trained 16 were females and 4 were male.

Organizing Zonal Debate On Adolescent Sexual Reproductive Health

The SHEP Coordinator in collaboration with the District Assembly organized Zonal Debate on adolescent sexual reproductive health for the schools in the District. 164 students participated in the debate. This was organized to help students abreast with adolescent issues. 87 boys and 77 girls participated in the debate.

Organized School- based quizzes on ASRH

The SHEEP Coordinator organized school based quizzes on adolescent sexual reproductive health in schools. This programme gave opportunity for all the students to witness and learn adolescent reproductive health issues. 121 students participated in the quizzed, out of this 121 students 54 were males and 67 are females.

Identified, Counselling and Re-integrated 24 Teenage mothers back into school.

The Adolescent Sexual Reproductive Health program as part of its core objective is to help teenage mothers who have been out of school as a result of teenage pregnancy. This is to help re-integrate them back into school. 24 teenage mothers were identified in the District, they were counselled by SHEEP Coordinator and her team and later re-integrated them back in to school. These teenage mothers were supported with school bag and other resources.

Mobilized and organized fan games (football gala).

Fan games are very important in every society. The programme brought youth from 6 communities together. The platform was used to provide Adolescent Sexual Reproductive Health outreach services to adolescent. Services rendered during the programme included education, HIV/STI's Testing and Counselling, Pregnancy Test, Anti natal Care, Post-natal Care. 264 people were tested, out of which 4 were detected with HIV/AIDS Positive. 487 people attended the programme out which 273 were Males and 214 were Females.

Orientation of Adolescent with Disability on ASRH.

Adolescent disabilities were oriented about Adolescent Sexual Reproductive Health and they were linked to Adolescent Health Corners to receive services.

Radio talk show on adolescent sexual reproductive health were organized to educate the public.

Results Matrix

The activities undertaken during the year yielded some results as in figures showing various categories of participants. This achievement has been grouped under the Service Delivery Areas and for each activity; the results are tabulated as shown below:

Table 6: Results Matrix

Activity	Indicator	Output		Cumulative Results	Comments/Remarks
		Target	Results		
Radio discussion to create awareness and provide information on ASRH	Stakeholders sensitized to support ASRH activities	2	2	2	100% achieved
Orientation for Health Workers on the use of mobile application.	20 health workers oriented on mobile application	20	20	20	<u>100% achieved</u>
Organization of and participation in Zonal Debate on ASRH	164 School girls and boys participation.	164	164	164	<u>Successful</u>
Organized School-Based quizzes on ASRH	121 School children participated	121	121	121	Successful
Identified, Counseled and re-integrated 24 Teenage Mothers back into School.	24 Teenage Mothers were re-integrated back into school.	24	24	24	<u>Successful</u>
Mobilized and organized fan games	487 people from 6 communities participated	487	487	487	100% achieved
Orientation of adolescent with disabilities on ASRH	30 Adolescent disabilities were oriented	30	30	30	100% achieved

1.3 Water and Sanitation

Inadequate access to safe water and sanitation is a perennial problem in rural and urban areas of the country. Poor access to safe water and lack of adequate environmental sanitation lead to poor health and low productivity, which in turn deepens poverty. Ghana Shared Growth and Development Agenda (GSGDA I and II) have therefore prioritised access to safe water and environmental sanitation as strategic policy areas to be tackled in its efforts to develop the human resources of the country.

The main sources of drinking water in the District include stand pipe, boreholes, dam, streams, rivers, ponds and wells. Some of these sources of water are very often polluted and they are used untreated.

There are four (4) Small Town Water Supply systems serving the four Area Councils capitals including Hwidiem, Acherensua, Nkaseim and Dadiesoaba. Mehame is the current community with Small Town Water Supply system. Aside these, there are boreholes with hand pumps and 7 without hand pumps totalling 95. Communities without boreholes especially the smaller ones' result in the use of unhygienic water sources such as unprotected well, streams, rivers, among others in the district. The diarrhoeal and intestinal worms' diseases mentioned as part of the top OPD cases in the District attest to this fact. This calls for the provision of more potable water drinking water sources in the district.

Sanitation situation is generally not the best across the District. Available toilet facilities though woefully inadequate include those of private households, public and institutional latrines. The types of facilities are W/C, KVIP, VIP, AQ Privy, STL, BIO GAS and Pit. The table below is a compilation of toilet facilities in the District.

Table 7: Toilet Facilities in the District

Household Latrines					Public Latrines					Institutional latrines				
W/C	KVIP	VIP	STL	Pit	W/C	KVIP	AQ Privy	BIO GAS	Pit	W/C	KVIP	VIP	STL	Pit
312	418	729	42	103	1	20	23	3	17	118	106	91	49	7

Source: District Environment Health Unit, 2016

The available toilet facilities in the district serve about 52,400 persons leaving a deficit of about 9,856 yet to be served. The rest of the population resort to defecating in either the bush or other open spaces, and this is not the ideal situation.

In the area of solid waste disposal and management, only Hwidiem, the District capital has one final disposal site. There are however 77 crude dumping sites spread across the District. With the current estimated population of 62,256 and an average waste production of 0.8 kg per capita per day, the District generates an estimated total solid waste of about 26.7 metric tons per day. Empirically 86.7 metric tons constituting 39.6% of the refuse are collected every week by Zoom lion in collaboration with the Assembly for final disposal. The rest find their way into unauthorised sites such as bushes, public drains and others combusted. During the year under review, all Area councils organized quarterly clean-up exercises and were supervised by representatives of the Assembly. With the inception of the National Sanitation Day, the Assembly hopes to use the medium improve upon the sanitation situation of in the District.

1.4 Educational Indicators

1.4.1 Number of Schools

There are 58 public Kindergarten, 19 private Kindergarten, 57 public Primary schools, and 17 private primary schools, 39 Junior High Schools (JHS), 6 private Junior High Schools (JHS) and 2 public Senior High Schools (SHS) in the district. Table 1 shows the number of schools by level.

Table 8: School Enrolment in the District (2015/2016)

S/N	LEVEL	PUBLIC NO.	PRIVATE NO.	TOTAL
1	KINDERGARTEN	58	19	77
2	PRIMARY	57	17	74
3	JHS	39	6	45
4	SHS	2	0	2
TOTAL				198

Source: Asutifi South District Education Directorate, 2016

The table indicates that, there is the need for more Junior High Schools to be built to ease the pressure on the existing ones. The 2016 projected Population indicates that out of the 63,325 population of the District, 24,311 constituting about 38.4% fall between 0-14 years. The implication is that fertility rate in the District is high and for which more Schools must be built to contain the numbers.

1.4.2 Enrolment Level

The table below shows the schools' enrolment at the various levels for the 2015/2016 academic by levels.

Table 9: Total Enrolment by Levels of education (2015/2016)

LEVEL	MALE		FEMALE		TOTAL
	Enrolment	%	Enrolment	%	
Pre-School	2171	49.5	2216	50.5	4387
Primary	5567	50.3	5503	49.7	11070
Junior High	2162	52.8	1933	47.2	4095
Senior High	1539	53.4	1344	46.6	2883
Total	11439		10996		22,435

Source: Asutifi South District Education Directorate, 2016

Enrolment at the Primary Level recorded the highest as compared to the other levels with that of Senior High recording the lowest. It can also be deduced that, the 11070 enrolment at the Primary Level may not be able to be accommodated by the current Junior High School structures available.

This calls for an expansion in infrastructure. It is also obvious that more boys stay in school than girls as they progress through the various levels of education. The percentage of girls at the pre-school and primary levels from the table recorded 50.5% reducing to 49.7% respectively. This further dropped to 47.2% at the JHS Level. Meanwhile the percentages for boys' enrolment keeps increasing from 49.5% to 50.3% and again to 52.8% at the pre-school, primary and JHS Levels respectively. It can be realised that girls' enrolment in the District is decreasing in an increasing rate. Parents do not put much priority on girl child education as compared to that of the boy child. Most of these girls also drop out as a result of teenage pregnancies and poverty on the part of parents. This means that there is a lot of work to be done by all stakeholders so as to keep the girl child in school

1.4.3 Staffing Level in Schools

The quality of teaching and learning depends among other things on the availability of trained and resourced teachers. Government policies aimed at achieving the Free Compulsory Universal Basic Education (FCUBE) such as the capitation grant, School Feeding and Free School Uniforms no doubt has increased enrolment at the basic school level. This calls for the training of more teachers. The District has its fair share of trained teachers. There are however greater numbers of untrained teachers at the primary and pre-school levels but majority of these teachers are pursuing the Distance Learning Diploma programme. The table below indicates the staffing by level:

Table 10: Staffing Level in Schools (2016)

LEVEL	TEACHERS		
	TRAINED	UNTRAINED	TOTAL
Pre-school	93	75	168
Primary	209	81	290
Junior High	203	41	244
Senior High	125	5	130
TOTAL	630	202	832
Percentage	75.72%	24.28%	100%

Source: Asutifi South District Education Directorate, 2016

1.4.4 Pupil/Teacher ratio (PTR)

The PTR is a key input indicator used as proxy for assessing the quality of education. The associated policy objective is to achieve a national PTR of 1:35 at the primary level and 1:25 at the J.H.S level, as these levels are expected to be optimal for ensuring quality education.

The Table below shows that on the average, the District's PTR is relatively below the National Baseline.

Table 11: Teacher/Pupil Ratio in the District

Levels	NATIONAL BASELINE	DISTRICT ACHIEVEMENT (/2015/2016)
Pre-School	1:40	1:22
Primary	1:35	1:28
Junior High	1:25	1:14
Senior High	1:30	1:21

Source: Asutifi South District Education Directorate, 2016

1.4.5 Gender parity index

The goal of ensuring parity in basic education has a targeted Gender Parity Index of 1:1 for all levels of basic education. This target is in conformation with the third (3rd) goal of the Millennium Development Goal. The Gender Parity Index measures the ratio of boys' and girls' enrolment rates, the balance of parity being 1.

Government policies such as the introduction of the Capitation Grant Scheme, School Feeding Programme and Free School Uniforms are all measures that promote Gender Parity in school enrolment. The table below shows the situation in the District. More efforts however need to be put in place to arrest the downward movement of the indicator as the pupils' progress from pre-school to Junior High.

Table 12: Gender parity index

SCHOOL LEVEL	% OF GIRLS ENROLMENT	GENDER PARITY INDEX	COMPLETION RATE OF GIRLS
KG	50.50%	102%	-
Primary	49.40%	0.98%	-
JHS	46.70%	0.87%	-
SHS	40.80%	0.69%	-

Source: Asutifi South District Education Directorate, 2016

1.4.6 School Feeding Programme

Only six (6) schools in the District are hooked up to the school feeding programme. These schools include: Acherensua Islamic Primary, Subriso D/A primary, Cocoa Station D/A primary, Nkrankrom D/A primary/KG, Nkrankrom, Methodist Primary/KG, Manhyia D/A primary/KG. More children are deserting other schools for these six schools where they expect to be fed. Enrolment in these schools therefore has increased significantly putting more pressure on their facilities and also having a toll on quality teaching and learning. There is the need for an extension

of the programme to other schools to ease the pressure on the present schools and to also encourage more enrolment; the data was captured during cocoa harvest season where parents take their wards to farms to give them helping hand which as a result decrease enrolment in 2015. The table below shows the School Feeding Situation in the District in 2013, 2014, 2015 and 2016. The three years are brought on board for comparative analysis to be made in order to know the extent of school feeding in the district. In 2016 payment for school feeding programme are made directly to the Cooks on E-Zwich, therefore the assembly do not have data on the amount disbursed in 2016.

Table 13: Coverage of the School Feeding Program and the amount disbursed

Year	Amount Disbursed GHC	No. of Schools	Enrolment
2013	67,390.00	6	1544
2014	78,905.00	6	1925
2015	72,247.00	6	1712
2016	-	6	1758

1.4. 7 EMPLOYMENT SITUATION IN THE DISTRICT

The Asutifi South Youth Employment Agency operates within the objective of the National Youth Employment Agency. The core mandate of the Asutifi South Youth Employment Agency is recruit sound minded and energetic youth in the District and gives them the necessary skills as well as technique to be able to work in the various modules of the agency.

This Annual report looks at recruitment made by Youth Employment Agency of the Asutifi South District. The department has recruited Two hundred sixty-One (261) persons in the District which is made up of One hundred and Twenty-seven (127) males representing 48.70percent and One hundred and Thirty-four (134) females representing 51.30 percent. These Two Hundred Sixty-One persons recruited have all under gone the necessary training required for them to work with institutions assign to them.

The 26 youth in community policing assistance were trained at Kumasi police training centre, the 10 fire service assistance recruited were trained at Accra fire service training centre, 10 prison assistance are yet to go for training at Accra Prison service training centre, 2 people recruited for youth in Electronic Health were trained at Kintampo school of Allied health, the 97 persons recruited for community health assistant received their training at Hwidiem Senior High School, 95 people recruited for youth in Community Education Teaching Assistant were trained at Hwidiem Presbyterian Church Premises,10 people recruited in youth in Environmental Protection Officers

were Trained at Kumasi Police Training Centre and 8 Arabic teachers recruited and trained at the District Assembly Hall.

Below is table that gives much detail on female and males recruited for the various modules.

Table: 14 Employment Situation in the District

S/N	MODULES	NO. OF MALES RECRUITED	NO. OF FEMALES RECRUITED	TOTAL NO. RECRUITED PERSONNELS
1.	YOUTH IN COMMUNITY POLICE ASSISTANTS	14	12	26
2.	YOUTH IN FIRE SERVICE ASSISTANTS	5	5	10
3.	YOUTH IN PRISON SERVICE ASSISTANTS	6	4	10
4.	YOUTH IN HEALTH ASSISTANTS	34	66	100
5.	YOUTH IN E-HEALTH	2	0	2
6	YOUTH IN COMMUNITY EDUCATION TEACHING ASSISTANT	50	45	95
7	YOUTH IN ENVIRONMENTAL PROTECTION OFFICERS	8	2	10
8	YOUTH IN ARABIC COMMUNITY TEACHING	8		8
TOTAL				261

Source: Youth Employment Agency Annual Report, 201

CHAPTER TWO INFRASTRUCTURE, ENERGY AND HUMAN SETTLEMENT DEVELOPMENT

2.1 Introduction

Infrastructure, Energy and Human Settlement Development is one of the key thematic areas of the Ghana Shed Growth and Development Agenda & II and being the engine of growth as indicated in the policy document, it is also a priority of the Asutifi South District Assembly. The focus of the District in this sector is to collaborate with Civil Society Organizations, promote an enabling environment for private sector development, develop transportation and enhance technology in the agricultural sector to facilitate the increase in productivity and agro-processing.

The District Medium Term Development Plan showed more programmes and projects to accelerate development in the sector. In order to measure these programmes and projects, there are key indicators to monitor progress towards the achievement of the stated objectives. The following are some of the indicators to monitor progress of work in the sector.

- Number of communities with access to electricity
- Length of road rehabilitated/upgraded to link farming communities to marketing centres
- Percentage increase in crop yields
- Number of farmers using improved technologies

2.2 Road

In order for the roads in the District to be more accessible especially in the rainy season and also facilitate the productivity in agriculture and agro-industry, there is the need to improve and maintain road transport infrastructure, and rehabilitate farm-to-market roads in the District. Due to this, the District Assembly has engineered 12.7 km out of the 35.60 length of unengineered feeder roads. The District has 18.60 km of surfacing (tarred) road network. Below is the road network situation in the District.

Table 15: Nature and Length of Roads in the District (2016)

Nature of Road	Length of Road	Achievement	% Change
Surfacing (Tarred) Road Network	18.60km		
Engineered Road Network	88.10km	12.7km	14.42%
Partial Engineered Road Network	44.45km	-	
Unengineered Road Network	35.60km	-	
Total	181,75km		

Source: Department of Feeder Roads (Asutifi South District)

2.3 Access to Energy

Out of the 106 communities in the District, 70 have been connected to the national electricity grid. 36 communities are yet to be connected to the national grid. 260 galvanized steel and 75 galvanized steel street lights have been installed in Mehame and Hwidiem respectively. The comprehensive plan to achieve the energy target will take into consideration the long term objective of ensuring that energy is constantly available to support the activities of the industrial, commercial and service sectors. During the period under review, the Assembly has successfully Rehabilitated 400 and 600 street lights in the District. Electricity was extended to 2 basic schools in the District, this is to improve academics in the District. This is to improve the lighting and security systems in the District.

CHAPTER THREE
ACCELERATED AGRICULTURAL MODERNIZATION AND SUSTAINABLE
NATURAL RESOURCE MANAGEMENT

3.1 Agriculture

Agriculture is the main occupation in the District with about 80% of the economically active population engaged in the sector. In view of this, the District Assembly has prioritized the Agricultural sector to enhance the standard of living of the people. Again, efforts are being made to create a strong linkage between roads and agricultural modernisation. The agricultural sector has the potential to lead the district and the economy at large to achieve the Millennium Development Goal.

Available estimates on crop production shows higher achievement during the year under review. The District is one of the major food suppliers in the region and beyond. Trucks cart foodstuffs out of the District to other destinations on market days. In the period under review, new technologies were demonstrated to farmers. This is to help improve yield and to increase production in the agricultural sector.

Table 16: Technologies Demonstrated

CROP	MALES	FEMALES	TOTAL	% FEMALE
Rabbit and glasscutter production and processing	15	36	51	71.0%
Row planting for optimum production	570	116	686	16.9%
Post-Harvest of food grains/legumes and storage	246	132	378	35.0%
Vegetable Production	749	373	1122	33.0%
Pest/Disease recognition, prevention and control	768	277	1045	26.5%
Vegetable production	45	27	72	37.5%
Animal nutrition/feeding	380	415	795	52.2%
Improved housing for animals	414	222	636	34.9%
Pasture Development	304	143	447	3.8%
Soil fertility improvement techniques/management	406	192	598	32.1%%
TOTAL	4099	1979	6078	32.6%

Source: MOFA, Asutifi South District 2016

3.1.1 Major Crop and Output Level

As espoused earlier, Agriculture is the mainstay of the District. To this extent, a number of food crops, tree and crops are cultivated e in large quantities both for consumption and for sale. The statistics for 2016 are shown in the table below.

Table 17: Major Crops and their Output Level in Metric Tons Per/ha, 2016

Crop	Cultivated Land (ha)	Yield /ha (Metric Tons)	District Production Fig (Metric Tons)	Achievable Yield (Metric Tons)
Maize	800	1.5	1200	4800
Cassava	4000	16.0	64000	194800
Cocoyam	1542	6.12	9437.04	12336
Plantain	6142	15.91	97719.22	122840
Yam	154	11.52	1774.08	7546
Rice	188	3.0	285.8	1222
TOTAL	12,826	52.57	172356.26	343544

Source: MOFA Asutifi South District

The District Agric Department continue to help screen and advice farmers in the District on their HIV and AIDS status. The objective of the Agric Department is to increase food production in the District, and this can be attained when all farmers in the District live healthy. Therefore, the Department has taken upon itself to ensure that all farmers in the District are screen free every year. In the year 2015, 820 farmers were screen as against 967 in 2016, which shows increment of participants.

Table 18: Number of Farmers Sensitized on HIV and AIDS

	Annual – 2015					Annual – 2016				
	Number of sensitization sessions	Number of Participants				Number of sensitization sessions	Number of Participants			
		Male	Female	TOTAL	% Female		Male	Female	TOTAL	% Female
Asutifi South	12	350	470	820	57%	23	614	353	967	37%

Source: DADU and RADU 2016

Youth in Agriculture

The Asutifi South District has greater population of youth than the aged, therefore there is the need for the youth to engage in farming in other to ensure food security in the District.

More youth have shown strong interest in agriculture. This is due to willingness of the youth going into ginger and rice production because of the ready market for the produce. This call for support from the government in other encourage more youth in the Agriculture Sector.

Table 19: Youth in Agric

District	Youth involved in farm activities with MOFA special initiative for youth			
	Male	Female	TOTAL	% Female
Asutifi South	614	353	967	37%

Table 20: Percentage of Crops Consumed and Sold (2016)

Food crops	Percentage consumed (%)	Percentage sold (%)
Cassava	15.0	85.0
Plantain	20.0	80.0
Cocoyam	40.0	60.0
Maize	30.0	70.0
Rice	30	70
TOTAL	24.5	75.5
VEGETABLES		
Okro	30.0	70.0
Tomatoes	40.0	60.0
Garden eggs	40.0	60.0
Cabbage	25.0	75.0
Pepper	5.0	95.0
TOTAL	28.0	72.0

Source: MOFA, Asutifi South District

The tables suggest that the District has the potential of providing the food and nutritional needs both for the internal and external markets. Maize and cassava are the major food crops cultivated. The District is also a major producer of cocoa and timber resources. There is an abundance of

fertile land for agricultural development if the necessary steps are put in place. MOFA in the District is providing extension services to the farmers and also introducing them to new farming technologies to increase productivity. There is yet a lot to be done by the Assembly in collaboration with MOFA to encourage especially the youth who are mostly engaged in illegal mining (galamsey) to go into agriculture.

CHAPTER FOUR TRANSPARENT AND ACCOUNTABLE GOVERNANCE

4.1 Introduction

The broad objective of good governance and civic responsibility is to empower state and non-state entities to participate in the development process and to collaborate in promoting peace and stability in the body politic. The strategy to achieve this objective is to promote effective, responsible and accountable state machinery with improved capacity to engage the productive private sector and civil society in formulating policies and strategies for accelerated growth and poverty reduction and in the implementation of monitoring and evaluation. The District is contributing its quota towards the attainment of this broad national objective in diverse ways

4.2 Financing and Budgeting

There are two (2) main sources of revenue for the District. One of the sources is Internally Generated Fund (IGF) by the District Assembly. The other source is external, which is the main revenue for financing developmental programmes and projects at the local level. These include the Common Fund from the central government and the District Development Facility (DDF). There are other support funds from development partners such as Donor Support Funds for the Ghana School Feeding Programme, Funds for the Implementation of the Ghana Adolescent Reproductive Health Project by DFID of UK and funds from the Ghana AIDS Commission for the control of HIV and AIDS. Below are tables showing the revenue sources and budgets.

Table 21: Revenue Sources: Internally Generated Fund

No.	Revenue Head	Budget (2015)	Actual (2015)	Budget (2016)	Actual (2016)
1.	Rates	41,000.00	44,815.40	51,000.00	18,735.00
2.	Lands / Royalties	87,480.00	70,000.00	644,680.00	600,073.18
3.	Fees and Fines	31,250.00	27,453.00	39,000.00	36,681.50
4.	Licenses	39450.00	23,039.00	44,500.00	23,231.20
5.	Rent	28,000.00	10,974.50	68,000.00	58,295.00
7.	Miscellaneous	13,596.00	145,935.45	13,796.00	9,542.52
	Totals	240,776.00	322,217.35	860,976.00	746,558.40

Source: ASDA Finance Office, 2016

Table 22: External Revenue Sources

No.	Revenue Head	Budget Line (2015)	Actual (2015)	Budget Line (2016)	Actual (2016)
1	DACF	2,601,850.00	2,332,766.07	2,878,571.29	2,714,734.98
2	DACF-M.P	150,000.00	236,238.45	500,000.00	449,554.32
3	DDF	519,825.00	293,450.00	531,511.00	477,964.00
4	Other Donor Support /GSFP	238,730.00	424,125.09	50,000.00	6,772.95
5	G&S Decentralised Dep	39,023.00	16,668.50	23,741.71	7,778.00
6	HIPC (SIF)	-----	25,000.00		
7	DFID (Futures Group)	-----	180,899.00	94,000.00	70,000.00
8	Personnel Emolument	780,630.00	747,561.13	800,000.00	794,535.90
	Totals	4,330,058.00	4,256,708.24	4,877,824.00	4,521,340.15

Source: ASDA Finance Office, 2016

The table indicates the distribution for the external sources of funds to the District for development. The DACF and the DDF are the major sources of funding for the implementation of District Development Programmes and Projects. The Ghana Adolescent Reproductive Health Project which started in the District during the last quarter of 2014 also saw the District receiving an amount of Seven-Three Thousand, Four hundred Eighty-Three Ghana Cedis and Six Pesewas (GHC 73,483.06) in 2016.

Expenditure Pattern

Table 23: Expenditure Pattern as at December, 2016

No	Expenditure Head	Budget (2015)	Actual (2015)	Budget (2016)	Actual (2016)
1.	Materials and Offices Consumables	155,000.00	91,030.34	7,000.00	2,356.50
2	Utilities	25,800.00	23,919.00	11,600.00	8,242.86
3	General Cleaning	300.00	-----	300.00	-
4	Rentals	99,000.00	92,862.12	51,000.00	49,055.75
5	T&T	135,100.00	128,373.82	271,000.00	265,578.10
6	Repairs & Maintenance	296,285.00	272,987.76	108,100.00	98,990.00
7	Training, Seminars & conf.	238,510.00	231,282.77	214,200.00	203,371.00
8	Special Services	25,400.00	39,800.00	86,400.00	77,288.50
9	Other Charges & Fees	9,500.00	9,219.94	9,500.00	8,878.61
10	Emergency services	5,000.00	4,100.00	5,000.00	1,940.00
11	General Expenses	466,000.00	425,080.87	1,065,000.00	1,046,071.18
12	Non-financial Asset Dwell	399,243.00	334,960.95	50,000.00	47,462.10
13	Non-Residential Buildings	1,379,000.00	1,329,755.41	1,830,000.00	1,817,239.70
14	Other Structures	190,000.00	159,264.76	959,000.00	953,498.72
15	Other Machinery & Equipment	60,000.00	27,249.97	35,000.00	27,690.95
16	Infrastructure assets	193,625.00	163,057.38	110,000.00	107,590.30
17	Materials, Supplies & DW	---	----		
18.	Personal Emolument	866,680.00	804,197.05	880,800.00	868,291.15
19	Consultancy Expenses	25,400.00	-----	400.00	-
20	Employer Social Benefit in Cash	1,000.00	----	500.00	
21	Capital Expenditure	----	----		
	Total	4,570,834.00	4,137,142.14	5,694,800.00	5,583,545.42

Source: ASDA Finance Office, 2016

4.3 Empowering Women

From the National to the local level all over Ghana, there are conscious efforts made by government and civil society organizations to improve women participation in the economic, social, political and cultural spheres of the country. Although much progress has been made, there is still much room for improvement in women and politics. Out of the thirty-three (33) Assembly members who constitute the Asutifi South District General Assembly, only three (3) are female representing about 9.09%. This calls for more affirmative action to get more women into the decision making process. Action Aid Ghana, a Non-Governmental Organization operating in the District is implementing policies and programmes geared towards empowering women in the District.

4.4 Area Councils:

The District, though new has its fair share of the governance structures. The District has one (1) constituency and for that matter one (1) Member of Parliament. It has 23 Electoral Areas and 10 Government Appointees. There are four (4) Area Councils namely; Acherensua, Hwidiem, Nkaseim and Dadiesoaba. As an infant District, these Area Councils are actively operational though there is still need to provide them with more logistics.

4.5 Police citizen ratio

The District has Police posts stationed in the four Area Councils. These are Hwidiem, Acherensua, Nkaseim and Dadiesoaba. The District police has established police tent post at Ata-Ne-Ata and police barrier between hwidiem and Acherensua. The police post and barrier are to boost personal security and property in the District. The District Police is boosted with the introduction of community policing Assistance by Youth Employment Agency. The current police strength in the District is 73 and supported by 18 Community Policing Assistance. This gives a Citizen-Police Ratio of 1:805 which is above the national Ratio of 1:747. This implies that the district needs more police personnel to strengthen security.

CHAPTER FIVE ANALYSIS OF DEVELOPMENT PROJECTS

5.0 Introduction

There are 41 projects/supplies under execution by the close of the year 2016. At the end of the year under review. This progress report covers 41 projects/supplies which are both on-going as well as completed ones yet to have expiration of their defect liability periods. The report looks at the distribution of development projects, sectors of concentration, sources of funding, payments made and the current status of the projects.

5.1 OBJECTIVES

The broad objective is to provide social and economic infrastructure in order to reduce poverty in the District. The specific objectives of the report include the following:

- i. To monitor physical projects in the District
- ii. To monitor the finances of projects
- iii. To identify challenges and constraints in the implementation of programmes and projects
- iv. Assess impact of development projects on the citizenry

5.2 LOCATION OF PROJECTS

Generally, development projects were geographically distributed to cover more communities in the District. All the four Area Councils benefited from these projects with priority areas given more attention. Dadiesoaba has 36.60percent followed by Hwidiem Area Council with about 31.70percent. Nkaseim Area Council records 22.00percent. Acherensua area council has9.70percent. The distribution implies that all the Area Councils have their fair share of the national cake.

5.3 TYPES /SECTORAL DISTRIBUTION OF PROJECT

The distribution of the 41 projects/supplies revealed that 18 of the projects and the supplies were 100% completed by the end of the year while 2 are above 90% complete. The sector distributions of the projects are shown below:

<u>SECTOR</u>	<u>NO. OF PROJECT</u>	<u>PERCENTAGE (%)</u>
Education	9	22.0
Water and Sanitation	11	26.8
Health	14	34.2
Local Governance	6	14.6
Feeder roads	1	2.4
TOTAL	41	100.00

In terms of sector distribution of projects, Health recorded the highest with 34.20percent followed by Water and Sanitation sector with 26.80percent followed Education sector with 22.00percent and followed by Local Governance sector with 14.6% as well as Feeder Roads had 2.40percent respectively. The Health sector is the backbone to development of the economy hence more projects are being undertaking in this respect. The projects are also expected to improve the poor access to quality Health care and for that matter ensuring healthy population in the district. This will also help achieve the national Health policy of increasing access to quality Health care by providing adequate health centres for all.

5.4 SOURCE OF FUNDING

Projects under execution were funded by the following sources:

i.	IDA	2.40%
ii.	GoG/GETFund	9.80%
iii.	DDF	26.80%
iv.	DACF	36.60%
v.	MP's CF	2.40%
vi.	MLGRD	12.20%
vii.	IGF	7.30%
viii.	SIF	2.40%

Out of the 41 projects, 15 representing 36.60percent were funded with the District Assembly Common Fund (DACF). This was followed by the District Development Facility (DDF) with 11 and 26.80percent while MLGRD had 12.20% and GoG/GETFund had 9.80percent. IGF also recorded 7.30% and, IDA, MP's Common Fund and SIF all recorded 2.40percent each of the total projects.

5.5 CONTRACT SUMS/SCALE

The range of contract sums and scales of projects under execution were as follows:

- i. Below GH¢50,000 - Small Scale (7.30%)
- ii. GH¢50,001 – 200,000 - Medium Scale (65.90%)
- iii. GH¢200,001+ - Large Scale (26.80%)

5.6 PAYMENTS

The total contract sum for the 41 projects that are being implemented amounts to a total cost of **Ten Million, Three Hundred and Seventy Thousand, Four Hundred and Twenty-Four Ghana Cedis, Fifty-Nine Ghana Pesewas (GH¢10,370,424.59)**. Out of this amount, **Five Million, Seven Hundred and Fifty-Four Thousand, Two Hundred and Twenty-Six Ghana Cedis, Nine Pesewas (GH¢5,754,226.9)** representing 55.50percent of the total contract sum have been paid to contractors. This indicates that there is an outstanding amount of **Four Million, Six Hundred and Sixteen Thousand, Nine Hundred and Ninety-Seven Ghana Cedis, Sixty-Nine Pesewas (GH¢4,616,197.69)** representing 44.50percent of the total contract sum to be paid to contractors for the completion of projects in the district in the year under review.

5.7 STAGE OF COMPLETION

The stages of completion of works on the projects in the district by the end of the year stand as follows:

Completed	18	43.90%
On-going	23	56.10%

5.8 PACE OF WORK

From the 41 projects under execution in the district, 18 representing 43.90percent have been completed. Out of the 23 on-going projects, 2 presenting 8.70percent are above 90% completion level. The remaining 21 projects representing 91.30percent are still on-going. The delay in the completion of projects on their expected dates is attributable to the late releases of funds from the central government and other development partners for the execution of these projects.

5.9 REMARKS

In conclusion, there will be continuous monitoring of all the projects both physically and financially to ensure successful completion. Again, the monitoring will ensure that projects are delivered to their specifications so as to achieve the set goals.

CHAPTER SIX
LINKING BUDGET TO THE ANNUAL PLAN

6.1 Introduction

This section analyses the extent to which the 2016 budget is linked to the annual action plan in the four thematic areas of the GSGDA II. Financing the plan from the budgetary resources requires a close alignment of allocation of resources with the thematic areas of the GSGDA II so as to ensure consistencies in the distribution of total budgetary allocations and actual spending on thematic areas of the GSGDA II. The tables below show the actual spending in relation to the thematic areas as against the budget for the implementation of the 2016 annual action plan.

Table 24: Actual Spending in relation to the Thematic Areas, 2016

THEMATIC AREA	AMOUNT (GH¢)
Human Development, productivity and Employment	2,120,101.00
Infrastructure, Energy and Human Settlement Development	807,856.00
Transparent and Accountable Governance	842,991.00
Accelerated agricultural modernisation and natural resource management	45,892.00
GRAND TOTAL	3,816,840.00

Table 25: Budget for the Implementation of the 2016 Annual Action Plan

THEMATIC AREA	AMOUNT (GH¢)		TOTAL
	INTERNAL (DAFC)	EXTERNAL (DONORS, etc.)	
Human Development, Productivity and Employment	284,747.00	3,335,733.00	3,620,480.00
Infrastructure, Energy and Human Settlement	15,000.00	1,095,057.00	1,110,057.00
Transparent and Accountable Governance	231,400.00	762,878.00	994,278.00
Accelerated agricultural modernisation and natural resource management	2,000.00	62,730.00	64,730.00
GRAND TOTAL	533,147.00	5,256,398.00	5,789,545.00

6.2 Analysis

It can be seen from the above tables that, the actual spending according to the thematic areas in 2016 is far below what was budgeted for during the beginning of the year. From the figures the actual spending and the budget allocation show that only about 65.93% spending has been achieved. This implies that, various programmes and projects that were earmarked to be carried out in the year 2016 were not.

The Assembly's inability to stay on course as far as expenditure in the thematic areas is concerned has a huge implication for quality education, access to safe drinking water, and healthcare, infrastructure development among others.

Indeed, the reason for that fall was as a result of delay and irregular release of the District Assembly Common Fund and other funds in 2016, only 60.0% of DACF and 6.0% DDF Funds were received respectively.

6.3 Conclusion

The 2016 annual progress report of the Asutifi South District was guided by the thematic areas of Ghana Shared Growth and Development Agenda II (GSGDA II). The report captured all on-going projects and completed in 2016. About 43.90% of the on-going projects have been completed by the end of the year under review. Reports from other decentralised departments have been harnessed into this report to have a District wide situation analysis.

Notwithstanding the challenges in the releases of the DACF and DDF, the District has been able to chalk the successes captured in this report. Given more funds in the year 2016, a lot more will be done to improve the standard of living of our people.

EMMANUEL BOATENG
(DISTRICT PLANNING OFFICER)

APPENDIX I: DEVELOPMENT PROJECTS IN THE ASUTIFI SOUTH DISTRICT FROM JANUARY 1ST TO 31ST DECEMBER, 2016

N O.	PROJECT TITLE	LOCATION	SECTOR	CONTRACTOR	CONTRACT SUM	DATE AWARDED	PAYMENT TO DATE	% OF WORK DONE	SOURCE OF FUNDING	IMPLEMENTATION STATUS
1	Construction of 1No. 2 Bedroom Semi-Detached Staff Quarters	Hwidiem	Local Governance	M/S Lethnass Limited	148,647.46	January 2014	140,000.00	75%	DACF	External works
2	Construction of Small Town Water System	Mehame	Water and Sanitation	Caksunity Services Limited	1,431,323.29	23 rd June 2016	1,359,930.58	100%	IDA (CWSA)	Completed
3	Construction of single story District Assembly Office	Hwidiem	Local Governance	M/S Aliya Construction & Trading Ent.	1,487,405.30	25 th April 2014	966,535.94	100%	GoG/GETFund	Completed
4	Construction of 1No. 4-Unit Bedroom Court House Teachers' Quarters at Acherensua	Acherensua	Education	M/S Acheamfour and Sons Const. Ltd	172,191.47	25 th April 2014	115,828.72	100%	DDF	Completed
5	Construction of 1No. CHPS Compound at Mehame	Mehame	Health	M/S Lethnas Const. Ltd	190,878.44	24 th June, 2015	84,947.56	75%	DACF	Roofing Stage
6	Construction of 1No. 5-Bedroom Residential Bungalow with 2-Bedroom Boys Quarters and Sandcrete Wall Fencing at Hwidiem	Hwidiem	Local Governance	M/S F.J Nada Const. Ltd	530,513.06	26 th June 2015	70,741.00	40%	DACF	Lintel Stage
7	Construction of 2 storey, 12 unit classroom Block at Dadiesoaba Community Senior High School	Dadiesoaba	Education	M/S Alhaji Sale and Sons Company Limited	874,452.00			65%	GETFund	Roofing Level
8	Construction of 1 No. 6-Unit Classroom Block, Office, Store, Computer laboratory And Staff Common Room with 1No. 4-Seater KVIP Toilet at Hwidiem	Hwidiem	Education	M/S Tonsuma Const. Ltd	282,315.33	3 rd November 2015	199,682.26	100%	DACF	Completed

9	Construction of 1No. 6-Unit Classroom Block, Office, Store, Computer laboratory And Staff Common Room with 1No. 4-Seater KVIP Toilet at Mankasiem	Mankasiem	Education	M/S Stephen Afranie CO.Ltd	288,382.38	3 rd November 2015	185,270.25	85%	DACF	Painting Stage
10	Construction of Community Health Planning Service (CHPS) Compound at Aportoyiwa	Aportoyiwa	Health	M/S 3M Enterprise	159,170.66	22 nd April, 2016	55,609.42	40%	DACF	Lintel Level
11	Construction of 1No. 2-Unit Lecture Hall at Dadiesoaba Nursing Training School	Dadiesoaba	Health	M/S Nana Yaw BanaheneEnt.	342,472.68	27 th April, 2016	121,578.95	95%	DACF	Finishing
12	Construction of 1 No. Dormitory Block at Dadiesoaba Nursing Training School	Dadiesoaba	Health	M/S Yawo High Standared	391,299.04	27 th April 2016	179,638.93	90%	DACF	Painting Level
13	Construction of 1No. 8-Seater KVIP Toilet Facility at Kokofu	Kokofu	Water and Sanitation	M/S Galtons Co. Ltd	50,000.00	July 2016	34,072.00	80%	MPCF	Roofing Level
14	Construction of 1No. 16-Seater Acqua Privy Toilet Facility at Nkasiem	Nkaseim	Water and Sanitation	M/S Stephen Afranie Co. Ltd	129,199.51	July 2016	116,028.81	85%	MLGRD	Finishing
15	Construction of 1No. 16-Seater Acqua Privy Toilet Facility at Nkrankrom	Nkrankrom	Water and Sanitation	M/S Stephen Afranie Co. Ltd	129,725.31	July 2016	115,301.51	75%	MLGRD	Roofing Level
16	Construction of No. 16-SeaterAcqua Privy Toilet Facility at Woramumuso	Woramumuso	Water and Sanitation	M/S Galtons Co. Ltd	129,878.36	July 2016	111,324.37	35%	MLGRD	Super Structure
17	Construction of 1No. 16-SeaterAcqua Privy Toilet Facility at Konkontreso	Konkontreso	Water and Sanitation	M/S Oasis CO. Ltd	129,389.15	July 2016	110,904.93	100%	MLGRD	Completed

18	Construction of 1No. 6-Unit Classroom Block, Office, Store, Computer laboratory And Staff Common Room with 1No. 4-Seater KVIP Toilet at Hwidiem	Hwideiem Presby Primary	Education	M/S S.A Miracle Ltd	43,8898.90	24 th August, 2016	-	55%	GETFund	Gable Level
19	Construction of 1No. 6-Unit Classroom Block, Office, Store, Computer laboratory And Staff Common Room with 1No. 4-Seater KVIP Toilet at Nkasiem	Nkasiem R/C Primary	Education	M/S R-Kostab Ltd	43,7107.00	25 th July, 2016	-	70%	GETFund	Roofing Level
20	Construction of 1 No. 4-Unit Boys Dormitory Block with Toilet and Bath Facilities	Dadiesoaba Nursing Training School	Health	M/S Silla Star Ghana Ltd	179,472.81	12 th May, 2016	178,852.64	100%	IGF	Completed
21	Construction 1No. 1 Rural Clinic with mechanized borehole at Woramumuso	Woramumuso	Health	M/S Oasis Co. Ltd	92,594.12	14 th July, 2016	5000.00	5%	DACF	Foundation Level
22	Construction of maternity ward with Mechanized bore hole at Mehame	Mehame	Health	M/S Okogyata Boat Ltd	92,594.12	4 th July, 2016	5000.00	5%	SIF	Foundation Level
23	Construction of 16-Seater at Acherensua	Acherensua	Water and Sanitation	M/S DNT Ltd	129,618.62	4 th October, 2016	78,667.47	40%	MLGRD	Lintel Level
24	Construction of 3-Unit Classroom Block with office store, computer laboratory and 2- Seater toilet at Mehame	Mehame	Education	M/S Stephen Afrane Co. Ltd	188,324.95	4 th October, 2016	67,456.35	15%	DACF	Sub-Structure
25	Construction of 3-Unit Classroom Block with office store, computer laboratory and 2- Seater toilet at Kwaku Nyumah	Kwaku-Nyumah	Education	M/S Misbenbetty Ent	189,451.90	4 th October, 2016	92,868.90	15%	DACF	Sub-Structure

26	Construction of Pavilion with Records and Vital sample room at Nkasiem	Nkasiem	Health	M/S Stephen Afrane Co. Ltd	130,000.00	4 th October, 2016	86,615.30	65%	DDF	Lintel Level
27	Construction of 1No. 16-seater Aqua Privy toilet facility at Mehame	Mehame	Water and Sanitation	M/S Queens Log Ltd	150,000.00	4 th July, 2016	22,500.03	15%	DACF	Sub-Structure
28	Rehabilitation of CHPS Compound at Akotosu and Rehabilitation of 1 No. 4-Bedroom Teachers Quarters at Manhyia	Akotosu, Manhyia	Health and Education	M/S Silla Star Ghana Ltd	162,176.09	17 th August 2016	136,607.77	100%	DDF	Completed
29	Construction of 1 No. 16-seater Aqua Privy toilet facility at Hwidiem	Hwidiem	Water and Sanitation	M/S Glatons Co. Ltd	129,499.5	4 th July, 2016	19,379.34	15%	MLGRD	Sub-Structure
30	Construction of 1No. OPD structure	Nkaseim	Health	M/S Sab BoakEnt.	82,203.30	November 2013	79,005.92	100%	DDF	Completed
31	Construction of 1No. 3 Bedroom Bungalow	Hwidiem	Local Governance	M/S Halfmoon Enterprise	129,939.54	Nov. 2013	108,261.19	100%	DACF	Completed
32	Extension of Office Accommodation	Hwidiem	Local Governance	M/S Stephen Afrane Co. Ltd	223,874.20	October 2013	216,145.95	100%	DACF	Completed
33	Facilitation of Training Programmes to build the capacity of District Assembly Staff and Assembly Members	Hwidiem	Local Governance	M/S Inspired Technology Consult	60,677.00	12 th May, 2016	60,677.00	100%	DDF	Completed
34	Rehabilitation of 2No. 3-Unit Classroom Block with 1 No. 4-Seater KVIP at Sienchiem and 1 No. Health center at Nkasiem	Sienchiem and Nkasiem	Education and Health	M/S Silla Star Ghana Ltd	151,189.08	14 th March, 2016	142,986.97	100%	IGF	Completed
35	Routine/recurrent maintenance of 12.7km length of feeder roads (Acherensua- Asuhyiaye (5.4km), Kwanteng Junction-	Acherensua, Kwanteng, Dormaa	Feeder Roads	M/S MbaKawuti Enterprise	108,032.00	12 th May, 2016	106,032.00	100%	IGF	Completed

	Kwanteng(6.2km),Dormaa Junction-Dormaa(1.1km)									
36	Construction of 1No. 5-seater Institutional Latrine at Sienchem	Sienshiem	Health	M/S Lethnas Const. Ltd	44,931.15	8th April, 2016	40,361.88	100%	DDF	Completed
37	Construction of 1No. 3 Unit Classroom Block with Office, Store, and Computer Library	Dadiesoaba	Education	M/S Work Force Eng. Ltd.	109,558.54	November 2013	105,201.20	100%	DDF	Completed
38	Construction of 1No. CHPS Compound	Nkrankrom	Health	M/S Aliya Const. Ent. Ltd.	70,518.25	November 2013	64,825.67	100%	DDF	Completed
39	Construction of 1No. OPD structure	Nkaseim	Health	M/S Sab BoakEnt.	82,203.30	November 2013	79,005.92	100%	DDF	Completed
40	Construction of 1No. 8 Seater Institutional Latrines at Ata ne Ata Basic Schools	Ata-ne-Ata	Water and Sanitation	M/S K. AduseiPokuEnt.	46,093.52	November 2013	43,293.04	100%	DDF	Completed
41	Drilling, Construction and Mechanization of 1No. Borehole at Bronikrom	Bronikrom	Water and Sanitation	M/S Rosatu Const. Works	58,785.38	25th April 2014	48,097.13	100%	DDF	Completed

**APPENDIX II: APPENDIX II: PROGRAMMES IMPLEMENTED BY
UNITS/DEPARTMENTS AT THE END OF 31ST DECEMBER, 2016**

ENVIRONMENTAL HEALTH

- Conducted Three (3) Clean-up exercise throughout the District
- Visited 65 small to big communities and food vendors were educated
- 8 development plans vetted and approved
- Meeting were held for all animals' keeper
- Hygiene education were conducted for 80 market women
- Fumigation was carried out at Nkasiem and Acherensua Communities
- Organized quarterly meetings with Area Council Members on sanitation issues.

CENTRAL ADMINISTRATION

- ✓ Organized Sub-Committee, Executive Committee and Assembly meetings
- ✓ DPCU quarterly meetings were carried out 3 times within the year under reviewed.
- ✓ Management quarterly meetings were organized.
- ✓ Budget committee meetings were organized.
- ✓ Monitoring of development projects and programmes
- ✓ Organized Public Hearing
- ✓ Sensitized revenue collectors on revenue mobilization and management
- ✓ Public education on tax payment
- ✓ Organized sensitization of staff on the local government service protocols such as code of conduct, scheme of service and condition of service

SOCIAL WELFARE

- Registration of 8 indigents under NHIS
- Payment of LEAP
- Registered 5 disabilities
- Social Education was carried out
- Carried out 8-day care centres monitoring
- Organized two social education programme on the role of social welfare at 2 communities
- Registered 6 LEAP beneficiary under NHIS
- Registered and monitored the activities of NGO's and CBOs
- Assisted 50 PWDs financially
- Assisted in the resolve of all reported cases relating to family welfare, rent and child Maintenance
- 537 LEAP beneficiaries received their grants and also were assisted to renew their NHIS

AGRIC

- ✓ Maintained 22 cassava multiplication fields
- ✓ Established 2 cassava demonstration fields at Nkasiem and Hwidiem
- ✓ Assisted 7 AEAs who performed 57 farm and home visits
- ✓ Established one rice demonstration field at Acherensua
- ✓ Organized 3 technical review meetings within the quarter
- ✓ Celebrated 32nd National Farmers Day
- ✓ Educate 300 farmers in the district on HIV/AIDS
- ✓ Established 40 acres of maize production field
- ✓ Established 32.5 acres of tertiary cassava field
- ✓ Established and Maintain rice field
- ✓ 300 farmers were train on livestock management practices

COMMUNITY DEVELOPMENT

- ❖ Monitored of water facilities in the District
- ❖ Conduct sensitization citizens right and responsibilities for 7 communities
- ❖ Monitored of water facilities in the District
- ❖ Inspection of sustainable livelihood projects at 3 communities
- ❖ Sensitization and education of community members on water and sanitation
- ❖ Conducted education for 2 Community based group.

EDUCATION SERVICES

- Visited the thirty-one (31) UTDBE- Teacher Trainees
- End of term examination was conducted successfully
- Organized Inspection on scheme of work and lesson notes
- Organized school/circuit quiz on Ghana adolescent reproductive health
- Organized first term examination through-out the District Successfully
- Created 12 Kg and Primary 1 at 12 Communities

HEALTH SERVICE

- Organized training for Health Staff on Home Based Care on Malaria
- Training of Community Based Volunteers on Buruli Ulcer and yaws
- Radio discussion on Adolescent Sexual Reproductive Health (ASRH)
- Organized public education on HIV/AIDS at Nkasiem and its environs

- Organized Buruli Ulcer workshop for health officers
- Embarked on counseling and testing of HIV/AIDS
- Organized Training for Volunteers on Mass drug administration on Onchocerciasis
- Organized training for Health Staff on Mass Drug Administration of Onchocerciasis
- Organized one-day workshop for Health workers on EPI and Data management
- Organized DHMT weekly meeting