Well-being and Focus Group Discussions Assessment: Baseline Study

DFID

EXTERNAL IMPACT EVALUATION OF THE MILLENNIUM VILLAGES PROJECT, NORTHERN GHANA

Date: February 2014

Submitted by Itad
In association with:
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## Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>AFCON</td>
<td>African Cup of Nations</td>
</tr>
<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome</td>
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<tr>
<td>CBPP</td>
<td>Contagious Bovine Pleuropneumonia</td>
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<tr>
<td>CHPS</td>
<td>Community-based Health and Planning Services</td>
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<tr>
<td>CSM</td>
<td>Cerebrospinal Meningitis</td>
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<tr>
<td>CWC</td>
<td>Community Welfare Clinic</td>
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<tr>
<td>CWSA</td>
<td>Community Water and Sanitation Agency</td>
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<tr>
<td>DCE</td>
<td>District Chief Executive</td>
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<tr>
<td>DFID</td>
<td>Department for International Development (UK)</td>
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<tr>
<td>FBO</td>
<td>Farmer-Based Organisation</td>
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<tr>
<td>FGM</td>
<td>Female Genital Mutilation</td>
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<tr>
<td>GES</td>
<td>Ghana Education Service</td>
</tr>
<tr>
<td>GH₵</td>
<td>Ghana Cedi</td>
</tr>
<tr>
<td>GHS</td>
<td>Ghana Health Service</td>
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<tr>
<td>IE</td>
<td>Independent Evaluation</td>
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<tr>
<td>JHS</td>
<td>Junior High School</td>
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<tr>
<td>MiDA</td>
<td>Millennium Development Authority</td>
</tr>
<tr>
<td>MOFA</td>
<td>Ministry of Food and Agriculture</td>
</tr>
<tr>
<td>MP</td>
<td>Member of Parliament</td>
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<tr>
<td>MV</td>
<td>Millennium Village</td>
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<td>MVP</td>
<td>Millennium Villages Project</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-Governmental Organisation</td>
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<tr>
<td>PAS</td>
<td>Presbyterian Agricultural Station</td>
</tr>
<tr>
<td>PASA</td>
<td>Participatory Development Associates Ltd</td>
</tr>
<tr>
<td>PRG</td>
<td>Peer Review Group</td>
</tr>
<tr>
<td>P/VP</td>
<td>Poor/Very Poor</td>
</tr>
<tr>
<td>Abbreviation</td>
<td>Full Form</td>
</tr>
<tr>
<td>--------------</td>
<td>-----------</td>
</tr>
<tr>
<td>R/AR</td>
<td>Rich/Averagely Rich</td>
</tr>
<tr>
<td>SADA</td>
<td>Savannah Accelerated Development Authority</td>
</tr>
<tr>
<td>SHS</td>
<td>Senior High School</td>
</tr>
<tr>
<td>TBA</td>
<td>Traditional Birth Attendant</td>
</tr>
<tr>
<td>TENI</td>
<td>Tackling Education Needs Inclusively</td>
</tr>
<tr>
<td>VSO</td>
<td>Voluntary Service Overseas</td>
</tr>
<tr>
<td>WVG</td>
<td>World Vision Ghana</td>
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</table>
1. Introduction

Purpose
This report presents a synthesis of a qualitative focus group based baseline study undertaken as part of an independent impact evaluation of the Millennium Villages Project (MVP). The independent evaluation (IE) was commissioned by the UK Department for International Development (DFID) and the baseline phase was undertaken by Participatory Development Associates (PDA) Ltd with a team of one lead writer, one research coordinator, four researchers, and 15 research assistants under a consortium led by Itad Ltd. The report is intended to augment (not substitute for) the more detailed site-specific reports from 21 field sites sampled for the baseline. Ultimately, this component of the IE seeks to assess and understand the extent to which the package of ‘big push’ interventions, championed by the Millennium Promise and delivered through the MVP in Ghana’s Savannah Accelerated Development Authority (SADA) region, do indeed result in improved and sustainable development outcomes for the poor.

The qualitative component of the evaluation will primarily qualify and interpret the quantified changes expected in mid- and end-term rounds of the evaluation. Qualifying the quantitative findings will assist in explaining how and why change has or has not occurred as well as what change means to the individuals, households, and communities it affects, particularly in their governance and decision-making processes. At the baseline, the qualitive component focuses on profiling existing livelihood characteristics, identifying the underlying shocks and stresses that consign citizens in the Millennium Villages (MVs) to poverty, understanding the value that citizens place on their institutions, and explaining their perceptions of local decision-making dynamics. The baseline further attempts to explore, from the unique perspective of poor citizens, the varied and complex responses (including cultural processes and migration), which they deploy in order to counter the diverse vulnerabilities they are exposed to.

Overtime, one would expect to see a decline in the incidence of adverse coping strategies, a rise in the sustainability of livelihoods, and an increase in resilience to vulnerability as the MVP’s ‘big push’ theory takes root. The research also explores citizens’ perceptions of who the primary targets of the interventions have been thus far.

Fieldwork process
A preliminary research protocol outlining proposed areas of conversation was developed by PDA. Following extensive review by Itad and a Peer Review Group (PRG) constituted by DFID, the protocol was expanded to include more direct information on social services such as health, education, and agriculture.

The draft version of the research protocol was pre-tested at BNCN1 prior to its finalisation. The field test also served as a hands-on training experience for the researchers, enabling them to engage with the tools in order to more accurately estimate the duration of interviews, identify and reflect on the likely challenges, and hone their facilitation skills. Throughout the process, the field teams sought to be sensitive to the needs of participants. As a result, meeting times frequently had to be adjusted to suit participants’ schedules. The field teams were supported by two senior researchers, whose main inputs were ensuring quality in the data collection process, analysing field findings, and writing up the synthesis.

Within each of the field teams, routine reflection and analysis enabled them to explore common threads and interrogate conflicting information. The reflection sessions also provided opportunities for team members to learn from each other’s experiences, identify gaps in the dataset, and strategise about addressing emerging challenges. Based on the in-team reflections, the research team leader then aggregated the daily reports into a single site report per community. These site reports were shared with the lead writer and research manager who sought clarifications and additional detail. Two major review workshops were also built into the research programme, one after the field test and another after the draft site reports had been compiled, to share and interrogate the findings from each field team. These synthesis workshops were attended by two representatives.
from each of the four site teams. For each significant finding, each of the research teams took turns to recap and explain their findings. This allowed the common threads as well as the key differences to be captured in the consolidated PRA report and subsequently compared with the RCA and quantitative findings.

The baseline took place in seven MVP communities that were selected in consultation with the SADA MVP team in Bolgatanga as well as with the four participating districts: Builsa North and Builsa South, Mamprugu Moaduri, and Mamprusi West. Key staff consulted at the district level included Planning Officers, Coordinating Directors, and Budget Officers. Among the main criteria prioritised in the sampling process were levels of deprivation, population size, migration patterns, and the presence of minority ethnic groups. For each of the seven MVP communities selected, another two quasi-identical control communities were included in the sample. The purpose of using control groups is to enhance the robustness of the evaluation, especially in future rounds. Seven of these control communities were designated as ‘near’ the selected MVP communities and the other seven as ‘far’ from the MVP communities. In practise, the differentiation between the notionally near and distant communities was not always clear to the field research team.

Table 1. Distribution of sampled sites

<table>
<thead>
<tr>
<th>MVP Community</th>
<th>Non-MVP/Control Community I (“Near”)</th>
<th>Non-MVP/Control Community II (“Far”)</th>
<th>Research Team’s Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Buili Sites</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BSMV1</td>
<td>BNCN1</td>
<td>BCNC1</td>
<td>BSMV1 is a section of Uwasi; BNCN1 is a community; BCNC1 is a section of Sandema</td>
</tr>
<tr>
<td>BSMV2</td>
<td>BSCN1</td>
<td>BCNC2</td>
<td>BSMV2 is a section of Wiaga; BSCN1 is a section of Chamsa; BCNC2 is a section of BNCN1</td>
</tr>
<tr>
<td>BSMV3</td>
<td>BSCN2</td>
<td>BCFC1</td>
<td>BSMV3 is a community; BCFC1 is a section of Wiaga; BSCN2 is a section of Kaadema</td>
</tr>
<tr>
<td>BSCF1</td>
<td>BSCN3</td>
<td>BSCF2</td>
<td>BSCF1 is a community; BSCN3 is a section of Gbedema; BSCF2 is a section of BNCN1</td>
</tr>
<tr>
<td>BSMV5</td>
<td>BSCN4</td>
<td>BCNF3</td>
<td>BSMV5 is a community; BSCN4 is a section of Chansa; BCNF3 is a section of Chuchuliga</td>
</tr>
<tr>
<td>Mampruli Sites</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MWMV1</td>
<td>MWCN1</td>
<td>MMCF1</td>
<td>MWMV1 is a community; MMCF1 is a community; MWCN1 is a section of Kunamoari</td>
</tr>
<tr>
<td>MMMV1</td>
<td>MMCN2</td>
<td>MMCF2</td>
<td>MMMV1 is a Buili community in a Mampruli district (Mamprugu Moaduri District); MMCN2 is a community; MMCF2 is a community</td>
</tr>
</tbody>
</table>

Duration of fieldwork

The work on well-being categorisation took place from 12-30 November 2012, with the focus group fieldwork during January to February 2013. In hindsight, time allocated for the fieldwork ought to have been more liberal. It would have allowed for more time to be spent at each site, building the trust that is essential to quality participatory research, and to better accommodate participants’ need to attend to their multiple social and livelihood agendas. It would also have enhanced opportunities for further triangulation of information obtained from the interviews.

1 At the time of commissioning the impact evaluation, these would have been two districts – Mamprusi West (now reconfigured as Mamprusi West and Mamprugu Moaduri) and Builsa (now subdivided into Builsa North and Builsa South).
2 See also Definitional Issues, below.
3 Also spelled Naandima.
Analysis and synthesis of data
Several purposive steps were taken to systematically capture, manage, analyse, and synthesise the information from the focus group interviews. The sequencing of research activities, proactive involvement of the focus groups in analysing their responses in situ, and feeding back our interpretations for their validation/review all contributed to ensuring that participants’ realities were correctly interpreted. Further, the research teams prepared detailed daily reports and held regular evening/weekend meetings to compare and reflect on their findings, and to identify gaps and areas lacking further clarification. These were then factored into the revised planning of the following days’ schedules.

Based on the internal team reflections, the research team leader then aggregated the daily reports into a single site report per community. These site reports were shared with the lead writer and research manager who sought clarifications and additional detail. Finally, the site reports were systematically interrogated during a dedicated three-day synthesis workshop attended by two representatives from each of the four site teams. For each significant finding, each of the research teams took turns to recap and explain their findings. This allowed the common threads as well as the key differences to be captured in the consolidated PRA report and subsequently compared with the RCA and quantitative findings.
2. Well-being

In order to properly identify the poor, the engagement with the participating communities commenced with an exercise to characterise well-being/wealth and differentiate individuals and households by wealth/well-being status. Participants were encouraged to share their own categorisations of poverty and well-being and to identify households matching the respective categories. The recurring metrics by which participants distinguished poverty from wealth (if subjectively) were:

- **Annual harvest volumes;** the well-off are those perceived to have year-round food security
- **Range and quantum of physical assets;** the well-to-do have a wider array of capital assets and in more substantial amounts
- **Various norms and cultural practices;** e.g. widows are largely considered to be poor mainly because they tend to lack control over their deceased husbands assets and because women lack decision-making power
- **Health and educational status**
- **Participation in community life**

Four broad levels of well-being were generated through the exercise. These are, in descending order of well-being:

- Those perceived to be clearly rich/well-to-do
- The moderately rich/moderately well-to-do
- The poor
- The very poor

The categorisation often takes the form of a simple bifurcation: well-to-do and poor. These are sometimes identified in the site reports as rich/averagely rich (R/AR) and poor/very poor (P/VP), respectively.

Particularly in the Builsa communities and MMCF1, the field teams observed that the poor groups often lacked self-confidence and had difficulty understanding the issues being discussed. In contrast, the well-to-do were confident, could appreciate the issues more easily, and were more articulate. This may be in part a reflection of differing levels of exposure and interaction with urban people. The local names for each of the four categories are indicated in Table 2.
Livelihoods

In all of the 21 communities, farming is the major livelihood. Poor women and men are mainly involved in subsistence farming of food crops and, to a lesser extent, livestock. Farm sizes were cited as being between one and three acres. Poor women’s farms tend to be the smallest and are dominated by vegetables, legumes, and groundnuts requiring relatively less labour and/or other inputs. In contrast, men cultivate mainly carbohydrates (maize, millet, and guinea corn), with legumes and pulses as supplementary crops. In many cases, women do not have full control over the plots they farm as they are considered to be visitors (if married) in their adopted households or as temporary members of the household (if unmarried). In a focus group discussion in BSMV5, a poor woman noted how “members of the household are the main source of agricultural labour, [with] everybody, including children, playing a very important role.” She further observed that, “if you have a large family, it means you can sow and harvest more.”

Richer men tend to have the largest farms (supposedly over six ‘acres,’ see preceding footnote) and keep the larger ruminants. They generally do not use their own labour and employ members of other households. They have greater access to inputs such as land, seeds, fertiliser, labour, tractors, ploughs, and other equipment. Though they generally farm the same crops, their farms tend to be of commercial scale and are more diverse.

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4 In several of the interviews, individuals reversed the terms wahaladana and faradana, as is reflected in some of the site reports.

5 However, it is known that farm sizes tend to be hugely inflated (not uncommonly, by two to three times) by illiterate participants during qualitative studies.
and dispersed. Richer women’s farms are somewhat smaller than those of the rich men and are dominated by legumes, beans, pulses, groundnuts, and bambara beans.

**Other livelihoods**

Rich men may also participate in trading, often as middlemen, in cereals (maize, millet, and guinea corn), livestock, and some agrochemicals such as fertilisers and weedicides. In the Buala communities of BSMV2, BSCN4, and BSCF1, rich men also finance artisanal mining activities though these are mostly illegal.

Poor young men provide labour particularly in the form of digging in the mining pits. In BNCF1, young men also participate in sand mining and stone quarrying (e.g. in BNCF3, BSMV2, and BSCF1) (Figure 1).

![Figure 1. A household by their quarried stones, BSCF1](image)

The poor also hunt game and harvest roofing thatch, which the rich purchase from them. Both the poor and the rich are involved in charcoal production, but the rich have larger operations. Poor men engage in by-day labour,⁷ and weave ropes from kenaf fibre and produce baskets/zaana⁸ mats from guinea corn stalks. Poor young men are also involved in loading luggage and providing services as head porters in the markets.

Some poor women are involved in retailing cereals, typically in meal-size portions. They also produce charcoal and gather *tama* (shea nuts) for sale to the richer women. They sell their labour for farming, quarrying stones, plastering mud walls, and providing household chores for the rich. In a few communities such as BSCF1 and BSCF1, they also make and sell clay water storage jars and cooking pots. Other women rear fowls and the occasional small ruminant, only to be liquidated in an emergency.⁹ Indeed, in spite of nutritional challenges which many households face, domestic fowls are not routinely used in the cuisine of poor households. While

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⁶ So-called “single-axle” truckload (4-6 m³) is sold for GH¢ 75-80, with GH¢ 30 going to the chief and another GH¢ 30 to the immediate landholder.

⁷ Wage labour with payment typically made on the same day.

⁸ Straw.

⁹ Only a few decades ago, women were largely prohibited from keeping any livestock form that was more substantial than a fowl. Though women’s involvement in raising small ruminants (mainly goats, but also sheep) is increasing, a married woman must still seek her husband’s consent before she can dispose of it. In the words of one woman during an interview, “they [the men] own us and everything of ours.”
the well-to-do may slaughter them on festive occasions, the poor generally hold onto their livestock almost exclusively as security rather than for their nutritional value.

In contrast, rich women may cultivate wholesale grains, shea nuts, and pulses. They are also more likely to process and trade in shea butter. Others are involved in trading provisions, alcoholic beverages, and smoked meats. Male and female salaried workers in the formal sector tend to be considered the rich.

**Sustainability of livelihoods**

In BSCF1, hunting is banned between January and February to protect wildlife stocks from becoming extinct. Similarly, in order to sustain their shea harvesting and processing livelihoods, some Buili communities such as BSMV2, BSCF2, BSCF1, BNCF1, BSMV3, and BSMV1 have formed watchdog committees to police the fields to prevent shea trees from being chopped down for fuel wood, charcoal, and fodder. The fluctuating yields present a challenge to the sustainability of the shea processing industry. The availability of alternative cooking fats and skin creams creates competition to shea butter locally. However, those able to access export markets through non-governmental organisation (NGO)-supported processing and marketing interventions are generally able to make adequate incomes.

The rich tend to use agrochemicals whereas the poor depend on animal droppings. Because the poor have fewer animals, they have less access to these opportunities despite the increasing depletion of their soils. At several sites, poor farmers also complain that they are unable to access government subsidised fertilisers. Even when subsidised fertiliser and traction services are available, they tend to arrive too late in the farming cycle. Access to veterinary services is perceived as important to livestock survival, but is difficult to access, especially by the poor. This undermines the sustainability of the local livestock industry with knock-on effects on access to animal traction services.

Poor households sometimes employ rotating pooled labour arrangements for maintaining their farms and harvesting crops. In the agricultural slack season, the practise is extended to include house construction. Somewhat comparable to the pooled labour arrangement for men, women are used in some communities by the Builsa Community Bank or from their own initiative to mobilise thrift savings in groups. These savings assist women in financing their micro-enterprises.

Constrained access to productive water resources in the form of dugouts/dams undermines the sustainability of agricultural production, particularly in the dry season. This is because the northern savannah has a single rainy season. Those who farm the fertile areas around the existing dams often lose their crops to livestock because the areas are not fenced.

Owing to the increasingly volatile climate and the overexploitation of the same lands without any form of crop rotation, many yields are declining. In the Mampruli sites, groundnut yields have been badly affected, compelling many farmers to shift attention to cultivating beans. Buili communities also report that millet yields are dropping. However, their staple foods are so dependent on millet that they are unable to make an equivalent shift to other crops. Decreasing yields and rising food insecurity are also making dry season gardening a greater priority.

The increasing demand for cash to finance needs such as the National Health Insurance Scheme (NHIS), school supplies, migration, and petty supplies such as dry-cell batteries and lighting fuel is forcing farming households to sell a larger proportion of their harvests. The commoditisation of marriage and funeral rites, festivities, and sacrifices are other contributing factors. The monetisation of the local economy was also reported to account as a preference to do ‘by-day’ work among young men.

**Assets and opportunities**

In most communities, land availability is not an issue. The lack of access to other relevant farming inputs such as labour, water, equipment, and agrochemicals prevents the poor from farming larger lots.
Dawadawa and shea nut trees are perceived as important communal assets. However, processing and marketing remain challenges that undermine the ability to extract optimal value from these microenterprises. For now, poor women are obliged to sell their shea nuts for very little income.

Some communities have building sand or construction-quality stone. Whilst labour is abundant, the constraints in accessing the other factors of production result in communities being unable to use them. High rents further undermine the poor in their bid to use these resources.

Some communities identified their shrines and inanimate deities or hippos as potential revenue-mobilising assets. They believe that the communities could benefit more if the spiritual consultation and tourist services were better organised. Currently, patronage is poor because of the influence of Christianity and Islam, which abhor idols.

Functional dams appear to make a difference in the well-being of those who can access the service. SADA is seen as constituting an opportunity both for developing water resources as well as for exploring and developing market centres that serve whole clusters of communities by lowering transport costs.

**Cultural practices that facilitate exit from poverty**

Men use labour cooperatives in some communities as a way of mobilising labour to perform critical farm tasks and to save on labour costs. The collective spirit motivates the group to work harder. Further, different households plant at slightly different times, thus staggering the community’s labour resources. Women use such arrangements for plastering floors and walls during home construction and renovation.

The extended family system provides support to the poorest members of the lineage and helps reduce the incidence of destitution. This can also be a drain on relatively well-to-do members.

Traditionally, funeral rites and ceremonies (kuunakumsa in Buili) are suspended during the farming season. In the savannah where there is a single rainy season, this allows communities to focus energy on farming and to conserve food and other assets that would have been spent on funerals.

**Cultural practices that hinder exit from poverty**

The section below on vulnerability provides a description of traditions that keep poor people trapped in poverty. Additionally, female genital mutilation (FGM) is still common in some communities and can result in infections, long-term morbidity, or even mortality. The persistence of unorthodox and dishonest scales\(^\text{10}\) in wholesaling businesses exploits poor traders and keeps them in poverty.

\(^{10}\) The standard bowl used in measuring cereals is called *kaaroa ka beruk* in Buili, meaning “the farmer is a fool.”
3. Vulnerability

Shocks

In almost all of the focus groups interviewed, chronic illnesses such as blindness, AIDS, tuberculosis, and stroke/paralysis were cited as major causes of poverty. Participants often described these as ‘mysterious illnesses’ because they tend to defy treatment. Chronic diseases render those affected unable to work effectively and also deplete household savings, leaving the entire household poor. When a member of a household is afflicted by a chronic illness, it may also require some able-bodied members to devote their energies to caring for that person, further depleting the labour force available.

At every site visited by the research team, death, especially of the male breadwinner/head of household, was a serious source of vulnerability. Death of any household member can be detrimental because of the high costs associated with funerals. Funerals have financial implications (e.g. paying undertakers/gravediggers) as well as cultural implications such as the practise of feeding large numbers of mourners over several weeks. When the main breadwinner dies, the impact can be particularly devastating. The breadwinner could be either a husband or a member of the household who has migrated out of the community but regularly sends remittances.

Box 1: Funerals in BNCF2

Observing a funeral (kuunakumsa) can be a costly affair in BNCF2. In this community, funeral rites tend to be performed during the ‘lean’ or ‘hungry’ season, when household food stocks are at their lowest. This means that bereaved households often have to buy the food needed to serve their guests. Lamenting this cultural practise, one rich man observed, “you don’t have, yet you are compelled to waste the little food or resources you have on funerals.”

Women suffer disproportionately in comparison with men as widowhood rites add to the cost. In order to give her husband a ‘fitting’ funeral, a widow must provide the utensils such as gourds and pots as well as foodstuffs (typically yam, bonbota fish, millet, rice, and bambara beans) and drinks (pito\textsuperscript{11} and akpeteshie\textsuperscript{12}) with which to prepare the funeral meals. Additionally, a widow may also be compelled to finance the cost of transporting guests from her husband’s side of the family to the funeral.

Mortality among livestock such as goats, guinea fowls, and working donkeys can be devastating for the poor. Livestock deaths tend to result from livestock diseases (e.g. CBPP\textsuperscript{13}) but also from the collapse of animal housing during rainstorms or floods. Access to veterinarians and wider agricultural extension services is not reliable and even when they are vets will generally not go to vaccinate animals unless there are large numbers. This is because once a vial is opened to inject an animal it cannot be resealed and used again. According to a vet officer interviewed, vaccination and treatment of livestock diseases can be expensive for the poor and cost as much as GH₵ 4 per animal.

Livestock theft is another vulnerability mentioned by poorer men. The majority of theft tends to be attributed to rustling by nomadic Fulani herdsmen. Livestock loss increased in the dry season when animals travel long distances from the farmstead to graze and find water. The risk of losing livestock to thieves also arises when entire households leave the village to attend night-time funerals outside their community.

In BSCN3 and BNCF2, poverty created tension and conflict arising from suspicions and accusations. These perceptions are fuelled by NGOs and state agencies that identify project beneficiaries without using transparent approaches, giving the impression of favouritism and unequal access to goods and services.

\textsuperscript{11} Pito is an indigenous savannah beer of varying strength brewed from millet or, less frequently, sorghum [http://en.wikipedia.org/wiki/Pito] and is typically served without chilling.

\textsuperscript{12} Akpeteshie is a local spirit with an alcohol content of between 40% and 50% by volume [http://en.wikipedia.org/wiki/Akpeteshie]. It is also known in the savannah by the corrupted name apataasi (or, in some cases, petesi).

\textsuperscript{13} Contagious bovine pleuropneumonia.
Communities also perceived spiritual factors as another cause of poverty. Spiritual forces were felt to cause chronic illness or prevent hardworking people from prospering. Less directly, sacrifices to the local deities (*bogta kaabka*) were also cited as having impoverishing consequences. It was observed in BSCN4 that “a lot of animals are [slaughtered] and plenty of food prepared,” with much of it uneaten. Sacrifices are routinely prescribed by soothsayers when consulted by the sick. The BNCF2 field team noted that, “when ... the soothsayer ... says a sheep or goat must be offered to the gods in order to be well, one must do it even if that is his last animal.” This comment was echoed in interviews in BSCN4, BSCF1, BSCF2, BNCF1, and many of the other communities. In BSCN4, chronic sickness is interpreted to mean that “your ancestors are not happy with you [and] that is why such a sickness has befallen you; therefore you need to appease the gods.” In BSMV2, a household “may not eat [meat] for a whole year unless [an animal] dies ... and sometimes, only undertakers are allowed to eat the meat [sacrifices].”

Some festivals and sacrifices were reported to be obligatory. These include the *feok bogta*, an annual animal and food crop sacrifice to thank the deities for a successful harvest. The BNCF2 field team was told, “whether you had a good harvest or not, you still need to [sacrifice to] the gods and ask [them] for long life.” Households also make costly sacrifices to thank the gods for the successful return of a migrant member of the household or other blessings. Other spiritual sacrifices include ancestral tributes and death rites.

In households lacking labour, the situation is worsened by out-migration of able-bodied males in search of work. This affects households’ capacity for crop production and to tend to their livestock. Poor households frequently complained of losing their animals due to youth migrating away from the communities.

Sudden, lump sum educational expenditures, especially at the secondary level, also contribute to poverty. Other factors perceived as contributing to poverty include divorce and the expectation of alcoholic refreshments during funerals. In light of declining soil fertility, polygamy and adultery create additional stresses on the household budget and make it harder to finance household needs. In MMCN2, insensitive grazing practises where cattle drift onto cropped lands was identified as a cause of poverty.

**Cyclical factors and trends**

Dry season wildfires were identified as drivers of poverty. The November and December fires have the most devastating effects as they destroy entire harvests. Often, fires are caused by poor people hunting for bush rodents, the Fulani clearing pathways for cattle, recklessness, and even envy. Rice, which tends to be harvested late, is disproportionately affected. Maize, millet, and groundnuts are also lost when grown far from the homesteads. The rich often own large farms in distant, forested locations and thus are disproportionately affected by wildfires. Shea trees are also affected and tend to suffer poor fruit yields after repeated fires.

Floods are a cyclic phenomenon that affects the poor. Floods occur mostly around August to September when rivers overflow in BNCF1, MWCN1, and BSMV5, or when excess water is deliberately split from the Bagri Dam upstream in Burkina Faso. The poor tend to be disproportionately affected because the walls of their homes are built less robustly with unreinforced earth and their small farms are in low-lying, flood-prone areas. The poor often farm along the flood-prone riverbanks because the lands are more fertile and require less fertiliser. The crops most affected in these low-lying areas are maize, groundnuts, and fish.

Participants complained about more droughts and capricious weather patterns. Rains are starting later and stopping earlier, shortening the fertile season. Lamenting the challenge, a man observed in BSCF1 that, “you may sow your crops early this year based on the experience of the previous year and [then] the pattern changes. Two years ago, at some time it was drought [but] there were floods the next year at that same time. Sowing ... is a hit-and miss affair in this community.” Though widespread, poor/very poor men tend to be most

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14 Literally “sacrifice to the gods.”
15 “Feast [to the] gods.”
affected by the changing climate. Crops most affected by droughts include rice, groundnuts, millet, and bambara beans. The effects include low yields and difficulty harvesting ground pulses when the ground is too dry. Droughts also affect access to harvested rainwater for domestic use.

Among the Buili-speaking communities, alcohol abuse tends to peak in the post-harvest festive period when freshly harvested farm produce is sold. Profits are sometimes used to buy alcohol and thus contribute to impoverishment. Followers of Islam and Pentecostalism reported lower levels of alcohol abuse in the Mampruli-speaking communities, as both religions abhor alcohol intake.

The growing commoditisation and cost of marriage rites were cited as contributing to poverty in some Buili-speaking communities. Grooms have to sell prized assets to finance the high bride wealth of goats, guinea fowls, and dogs. The BSMV1 field team found that “the [groom] and his family ... sell almost all of their assets to pay the [bride price], and return with their wives in hunger.” Before, only a gallon of local gin, a small quantity of tobacco, and some salt as a gift to the bride’s father was required.

**Impacts of vulnerabilities**

**Impacts at the community level.** Fires and droughts do not just destroy farms but also leave many people idle, fuelling potential conflicts. On top of destroying the environment, particularly fodder, windbreaks, and loss of soil nutrients and fertility, fires also force livestock to travel longer distances to graze, increasing their risk of getting lost through theft or hunting by predatory animals. In addition, fires lead to reduced yields and higher production costs with a heavier reliance on fertilisers. The accompanying loss of fuel wood and building timbers means that households have to travel longer distances to get these.

Similarly, floods wipe away assets and slow down the implementation of community action plans. When adversity strikes, the community has less ability to perform ceremonies and are less able to support ill or disabled community members, feeding disunity, and increasing tensions.

In close-knit communities, the death of a rich person often affects other households who would ordinarily benefit from his/her largesse. A rich person’s death also imposes additional burdens on ‘average’ households to fill the void.

In MWCN1, violent crimes are often attributed to Fulani and were said to force people to relocate away from the community out of fear. It appears that it is the nomadic Fulani (as opposed to Fulani settlers) who may be responsible for destroying farmers’ crops when they graze their cattle. The members of the MWCN1 community live in fear of these nomadic Fulani, who they accuse of raping their women and stealing animals and motorbikes.

**Impacts at the household level.** The onset of poverty was said to weaken marriage bonds. When men are unable to fulfil their traditional roles of providing for the home, women sometimes respond by making excuses to deny them sex out of fear of getting pregnant. Petty quarrelling can quickly degenerate, leading women to divorce their husbands and remarry men they perceive to be more capable of financially supporting them. In a focus group discussion with poor men in BSCF1, a participant shared that, “when we face drought and our harvest is poor, our wives divorce us because we don’t have enough food to take care of them and the children.”

Crime is a further consequence of destitution. In some communities, young members leave to find work elsewhere. For example, the youth in BSCN4 may go to Kaadema to participate in galamsey (illegal gold mining), leaving their households short of farm labour. Less commonly reported is the practise of child trafficking. In

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16 The total cost is easily in the region of GH¢ 500. As part of the bride-wealth package, dogs are intended as meat, not as pets.
BSCF1, itinerant women traders who visit from the south to buy foodstuffs in bulk were said to lure young girls away with them.

Another adverse outcome at the household level is that children sometimes become disrespectful towards their parents, perceiving them to be irresponsible when they are unable to provide for the family. In BSCF1, such reports were associated with children who have alternative ways of getting money. For example, a boy may get a share of the proceeds from a stolen goat (Figure 2), a girl may receive monetary gifts from her boyfriend(s), and either may earn small amounts from piecework. It is not uncommon for such children to venture on migrant journeys without informing their parents.

In some communities (e.g. BSCF1), children participate in stone quarrying and in crushing rocks for use as coarse aggregates in the construction industry. Boys may help herd cattle. Children may also hawk foods/ice water or carry head loads for a small tip.
relatives. However, such children are often abused and not allowed to continue their schooling as they have to care for the children of the nuclear family and/or help with the household’s economic activities. This practise is reportedly declining in MWMV1, BSCF2, and MMCF2, where parents now attach greater priority to children’s schooling. This practise is more common in large households.

In Buili communities, some citizens turn to alcohol and hard drugs when they lose their livelihoods or suffer major adversities. Alcohol abuse was reported for both men and women. Desperation also increases the risk of children becoming exposed to vices as they lose faith in their parents and turn elsewhere for advice and solace. In one community suicide was cited as a response to destitution.

Coping strategies
Between the end of October and the end of March, after households have harvested their own crops, men and women participate in savannah-based migration to more fertile ‘overseas’ areas or to the river valleys where they participate in production processes.

All year round, older and younger poor men and women produce charcoal and harvest fuel wood, which women sell to middlemen. This strategy is more lucrative during the rainy season though it is harder work.

Poor households, especially women and children, may also feed on the pulp of various fruits and berries such as shea from May to August, dawadawa from mid-March to May, or passion fruit, blackberries, ebony, sunsuma, vuungsa, koglogsa, and swalinpiak, often scavenged from the wild. The baobab fruit may also be used for porridge and in the rainy season baobab leaves (kooka) are used for preparing soups. Between April and August, kampuork and gora are other wild leaves that households use as vegetables to accompany their carbohydrate dishes.

Poor households also rely on local herbs and traditional knowledge to treat livestock diseases during the lean months. They prefer this to relying on formal veterinary services in February to March for fowls and June to August for ruminants. Many households reduce their nutritional intake both in terms of quantity (energy) and quality (especially protein) during the hungry season. When this happens, children are less likely to have breakfast before school.

Hunting for both domestic consumption and to sell on the market increases during this period. Wildlife hunted ranges from partridges and wild fowls to reptiles (alligators, crocodiles, snakes, and monitor lizards) to rodents (rats and greater cane rats) to guinea fowl eggs and fish. Deer, antelopes, hares, warthogs, monkeys, and rabbits are also hunted.

The poor ‘beg’ for foodstuffs and planting seeds from the rich. Out of desperation, some move between compounds where funerals are taking place with the hope of getting a free meal as compensation for commiserating with the bereaved family. When all else fails, some poor people are compelled to steal foodstuffs from their neighbours to survive.

Child poverty
In MMCN2, children from poor homes were described as “look[ing] dirty; they wear dirty clothes and look thin and sickly. Some wear slippers to school or go barefoot.” Poor children were described in MMCF2 as looking “dirty ... wretched” and malnourished, causing some to resort to stealing. They were portrayed as having a “sorrowful” countenance. A respondent in BNCF2 observed that poor children “cry a lot due to lack of food” whilst informants in MMCF1 noted that children from poor homes do not merely “look sick” but that the experience of hunger actually “results in sickness.” In that community, children themselves felt that “those from

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18 The research team encountered numerous cases of drunken men in the fieldwork. This was attributed, in part, to a bad harvest in late 2012.

19 Begging in this context includes borrowing.
rich homes easily pass their exams” and walk with a firm gait unlike their counterparts from poor homes. In several communities, orphans and children with disabilities were seen as being particularly disadvantaged.

Overall, the most recurrent manifestations of child poverty are hunger/malnutrition and schooling deficits, which the groups interviewed made links between the two. Hunger prevents children from the poorest households from attending school regularly or participating effectively in class. Children who have not been fed in the morning are reluctant to go to school. In the ‘hungry season,’ some loiter or scavenge in the fields for food whilst others migrate to find work. It is revealing that in BSCN1, every child interviewed had experienced such labour migration. They explained how they were compelled, by lack of choice, to sleep on shop fronts at the destination localities, exposed to the cold and rain. Girls are prone to rape during such missions.

In farming households that experience labour deficits, parents may force their children to join them in the fields as a condition of being fed. A girl in BSCF1 explained about girls who leave the community to find menial work in the southern markets: “We go to look for money to buy school items such as books, school uniforms, school bags, and pens. Some of us travel on our own while others are sent by their parents to wash dishes in chop bars [or to work as] head porters. Some get pregnant while others get married and stop school. We have [some] married pupils [in the] school here. Their parents were not able to look after them so they got married but they still see the need for an education.”

In the rainy season, there may also be opportunities for poor children to work locally on farms. Others support themselves by helping to herd cattle, hawking foods/ice water or offering themselves as head porters in the larger markets. Some children engage in more hazardous work such as quarrying and crushing stones for use on construction sites.

Figure 3. Empty desks vacated by girls who have gone to sell at the market, BSMV5
Poor children find it difficult to concentrate at school if they are hungry. Such children tend to return home more frequently during the daily breaks in search of food. This, in turn, contributes to losses in learning time. In the worst cases when children frequently miss classes or are routinely late, they end up dropping out because they cannot keep pace with the lessons. Another contributing factor to the dropout rate is that teachers often flog schoolchildren when they are late to school. Large numbers of children routinely face this risk because they have to look for food or money or because they have to finish chores at home before setting off for school. Children may also be subject to verbal abuse or corporal punishment if they come to school in tattered uniforms or without proper footwear. This practice instils fear in the children and leads to them to leave their education early.\(^\text{20}\)

\(^{20}\)As shown above, poor children are the ones who tend to have problems with school uniforms and to be routinely late to school.
Among the specific expenditures that keep poor children out of school are the cost of school uniforms, sandals, books, and a range of school-based levies. Echoing the link between household poverty and children’s schooling, a poor woman in MMCF2 noted, “my daughter was selected [to attend] SHS...but was unable to...due to lack of money.” In communities where few children ever make the grades needed to move beyond JHS, parents begin to feel that it is not worth the sacrifice it takes to keep their children in school. Long distances to school can also be a disincentive to regular attendance.
Box 2: Baba, an 11 year old drop out in MMCF1

Baba\textsuperscript{21} stopped attending school several months ago when his only pair of the state prescribed school shorts were torn. His peers ridiculed him any time he wore those shorts. Because he knew his father was facing financial challenges at the time, he did not bother mentioning to him that he was dropping out of school. Prior to that, his father had struggled to pay the school-based levies that were sometimes imposed by the school. Baba also skipped school when there was no breakfast at home. Teachers at Baba’s school typically attended only four days a week, with no explanation for the lost day. His teacher has not followed up to find out why Baba no longer attends classes.

According to Baba, he is not pleased to be out of school because he knows that he is missing out on acquiring an education. He also misses the football games that school would have provided the opportunity for him to play. Since dropping out, he has continued to read and his father has promised to get him a new pair of shorts once he can afford the cost.

Baba cited faintness as a common result of hunger. He also observes that, “when you don’t eat...you easily become angry and...want to fight...at the least [provocation]. [And] when the master teaches, you get some and you don’t get some.” He also confirmed that children are more prone to being pulled out of school during the farming season to help out on the family fields.

Baba has mixed feelings about the impact of migration. On the one hand, “when our parents migrate we are not able to get money to pay contributions in school.” On the other hand, his mother’s migrant remittances have bought him a range of needs such as “pens, footwear, books, shorts, food, and water.”

Girls from poor homes tend to be prone to dropping out of school. The causes are varied but largely rooted in poverty. Whilst some migrate to find work, others are thrust prematurely into unequal marriages. Others fall into the teenage pregnancy trap through similarly unbalanced experiences with transactional sex. In an interview in BNCF2, the men observed how poor girls “sell their bodies to men in return for money or favours, as a way of coping with the situation.” Child fostering is when parents are unable to provide for their children and give them away to better off urban households as unpaid house helps. This is another common consequence of child poverty, especially among girls.

Children from poor households migrate more readily than their counterparts from well-to-do households. Poor children also miss school in order to help on the household farms and fields. According to the head teacher in MMCF1, “children absent themselves for...three days [at a stretch]...during the farming season,” sometimes to harvest beans or to do other farm work. In BSMV1, the field research team noted that it is common “in hard times, [for] female pupils [to be] compelled to marry early [i.e. under age] just to bring some money or favours from their husbands’ homes [to their parents’ homes].” Girls may also be compelled to stay at home to look after their younger siblings to allow their mothers to pursue their livelihoods in the markets or elsewhere.

\textsuperscript{21} The names of informants have been changed in this report to protect their identity.
4. Migration

Poor men and women appear to migrate more than their wealthier counterparts. It is quite possible, however, that this appears so because there are many more poor people in the communities. The wealthier are also more likely to have well-to-do relatives or friends in the destination cities and towns, thus their experiences when they migrate are not as challenging.

In most of the communities sampled, there is a sense that more people are migrating, including children migrating independently. Much of the migration is seasonal. Many of those who migrate long-term do not actually set out to be away for long, but get trapped by the relatively better conditions or by constraints in accumulating the resources they set out to acquire.

The children and women from poorer homes often end up in southern cities and big towns such as Tamale, Kumasi, and Accra to provide head portage services, assist in the local culinary industry, sell traditional snacks, or draw pushcarts.

The young men tend to migrate seasonally to more fertile farming areas to hire out their labour. Those who go specifically to find farm work stay away for three to six months, often returning in time to prepare the land ahead of the savannah’s rainy season. There is greater variability in the durations that others stay away.

Schoolchildren from poor households migrate seasonally for short periods to find work. This generally occurs during their transition from JHS to SHS or vacation periods so that they can buy schooling supplies such as books, mattresses, and chop boxes.

Many people use dry season migration as a way of escaping idleness and the associated temptations such as drinking alcohol. Some also use the migration experience to gain exposure to other places. Except when women are pregnant, men in Siniesi-BNCF2 will not permit their wives or partners to engage in short-term migration for fear that they will engage in extramarital sex.

Benefits of migration

Poor households and nuclear family members benefit more from migrant remittances than rich households and extended families. Remittances do not only come from adult migrants but also from children compelled to leave home in search of a more secure life. This helps households meet their needs during the lean season or to finance important expenditures relating to healthcare, children’s education, agriculture, and renovating their compounds. The poorest members who are unable to migrate may also benefit from the farmlands and rooms vacated by those who migrate for long periods. When the able-bodied leave to farm elsewhere after the harvest, it eases pressure on the remaining food stocks as there are fewer mouths to feed.

It was sometimes observed that migrants return with new or different varieties of seeds and crops, diversifying their households’ crop portfolios.

Costs of migration

Schoolchildren reported suffering emotionally when their parents leave home. Some may drop out of school or their nutritional needs may be compromised if their parents fail to remit money. Girls appear to be affected more adversely and sometimes have unintended pregnancies. Often children who join their parents on short migration stints end up suspending their education until they return.

When youth migrate for long periods, households may suffer from the unavailability of prime farm labour and labour to address other vital household needs such as housing maintenance. Livestock become harder to care for and result in losses due to theft and death. Furthermore, older and chronically ill members can be severely disadvantaged when they have to access healthcare services alone if the stronger youth have left the community.
Older men and women interviewed reported that migrants sometimes return with unsociable habits such as stealing livestock. Respondents perceived that most community members with so-called ‘strange diseases’ such as AIDS and TB acquired them whilst on migration stints. Informants also noted that households often have to incur financial costs to bring back sick or deceased migrant members or to care for them when they contract ‘strange diseases.’

**In-migration**
The main in-migrants are teachers and nurses who provide services in schools and health centres. Fulanis come to tend livestock and wealthier farmers commute from nearby towns and districts to undertake commercial farming. Some not-so-well-off households stay for four to five months to farm for themselves. Wealthy women from the south spend up to two weeks at a time several times each year to do bulk shopping for farm produce.

In-migration enables community members with financial resources to access farming labour on large rice and bean farms for commercial purposes. In other communities such as MWMV1, community members can hire out their labour to richer in-migrant farmers. Some communities also benefit from Fulani settlers who take care of their livestock and supply milk. Where relationships with the settler Fulanis are cordial, settler Fulanis help keep nomadic Fulanis away from the community. In-migrants also benefit from access to fertile lands.

There are disadvantages of in-migration as well. Under-age schoolgirls sometimes get lured into sex by migrant teachers and artisans. Livestock get stolen by nomadic Fulanis feigning an interest in settling to look after cattle for local households. These Fulanis were also accused of being responsible for rapes and other violent crimes.

**Enablers of migration**
Migration is facilitated by access to long-distance transport services. The mobile phone has also made it easier to communicate with kith and kin in the south.

Having a reasonable education and relatives in the destination town also provides better prospects for a decent migration experience. Those without a good education can migrate if they can communicate in the languages used at the destination, however they may find it more difficult to find non-exploitative work and decent accommodation.

**Constraints to migration**
Those afflicted by chronic poor health, disability, and old age face greater hindrances if they wish to migrate. People are also constrained if they have social and community responsibilities that are difficult to delegate. In particular, not having someone reliable to take care of one’s dependants or land assets is a real hindrance. The inability to speak the southern languages also makes migration more difficult.

Married women and older girls may be prevented by their husbands/fathers or lineage heads from migrating if it is believed that they may not return. The increasing awareness of thwarting child trafficking is, in some cases, causing the security agencies to prevent children from travelling unaccompanied.

**Seasonality of remittances**
Migrants often send remittances at the start of the farming season in April, either to support their families to procure relevant inputs or to assist with routine household provisioning. Other peak periods are the feu festival just before Christmas as well as New Year, Easter, and funerals when long-term migrants visit home.

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22 In the Mampruli areas, this tends to be March.
How migration decisions are taken
Men may seek the opinion of the local soothsayer after which they will ask permission from the head of the lineage. If married, a woman will generally seek permission from her husband after which she also needs to get the consent of the lineage head. Traditionally, children between the ages of 10 and 17 are expected to seek their parents’ consent. However most do not ask if they believe they will be denied. In most communities, older dependents are still required to abide by this requirement so long as they continue to live under the roof of their parents. Depending on how desperate one is to migrate, these traditional arrangements may be circumvented. For example, when girls face a forced marriage, they may flee without asking for permission.
5. Institutions of governance and service provision

Indigenous community institutions
Below are the important/influential traditional institutions:

Soothsayers. They provide spiritual divination services that enable people to identify solutions to problems. They offer spiritual counselling and therapy and mediate with the local deities when citizens offend them. While they do not charge fees, they do demand a range of sacrifices to be made to the gods and ancestors that can be quite expensive (described in Section 3, under the discussion of shocks).

Chiefs/sub-chiefs. They tend to be exclusively male. They settle disputes and have a major role in maintaining peace in their areas of authority. Together with councils, chiefs lead communities in decision-making. In Buili areas, the chief oversees the feok festival and the sub-chief of a section of a community/chiefdom is the link between the section and the chief. This institution often came up as the most trusted of all institutions.

Chiefs are the first port of call for visitors, including development missions and state delegations, and deliver information to their communities. Some provide food aid to families hit by drought or food deficits. In some communities sub-chiefs conduct independent school monitoring.

Tindana \(^{23}\) (in Mampruli areas) or the sub-chief (in Buili areas) is responsible for declaring the start of the farming season, instructing the community to tether their animals, and announcing when to suspend funeral celebrations. The *tindana* superintends processes involving the allocation of communal lands and also performs thanksgiving rites to deities on behalf of citizens.

Teng nyona. \(^{24}\) For land held by families/lineages, the *teng nyona* performs some of the functions that the *tindana* would perform in Mampruli areas. In Buili chiefdoms, each section has a spiritual *teng nyona* who collaborates with the sub-chief in performing rites associated with the farming season. Lineage heads also resolve intra-lineage disputes by providing advice and permissions.

Magazia. \(^{25}\) They settle disputes among women and organise women for development purposes. In Mampruli areas, she represents the womenfolk on the sub-chief’s council. In both areas, *magazias* also represent their sections’ women and sub-chief. Through the influence of NGOs, the institution is being exported to areas that did not previously have *magazias* and the functions are being enlarged to include more developmental and representational roles.

\(^{23}\) Literally meaning “owner of the land.”

\(^{24}\) Again, literally, “owner of the land.” However, the context determines whether the term refers to the lineage head or a spiritual head.

\(^{25}\) Women’s leader.
Box 3: Fati, a *magazia* in MMCF2

Fati is a widow and uncertain of her age. She was born in MMCF2 and had nine children; five died and now four are living with her.

As a farmer, Fati cultivates maize and groundnuts, which she describes as “now very lucrative.” She also rears goats and fowls for savings.

Fati was chosen by her community to lead its women as a *magazia* due to her community-spiritedness, high attendance at communal functions, and the support she gives to the needy. The community’s women bring domestic issues to Fati for counselling and resolution, a task which she says she performs “with God’s help.”

She receives no direct pecuniary reward for the “many responsibilities” of *magazia*, but feels fulfilled when she sees improvements in the lives of the community’s women. Having served as *magazia* for eight years, Fati now looks forward to someone younger taking over so that she can get some rest.

**Youth leaders.** They are common in several sites, particularly in the Mampruli area. Their roles are similar to those played by the *magazia*.

**Herbalists.** They provide services for various diseases (usually medical, but also metaphysical), particularly those perceived by citizens to be beyond the capability of formal health centres. Some herbalists have specialisations such as bone-setting whilst others consult on a variety of ailments. In some localities, the roles of herbalist and soothsayer are combined whereas the roles are separated in other areas. A community may have multiple herbalists and/or soothsayers. Generally herbalists do not require payment, but it is normal for the treated patient to offer a tribute in-kind.
Box 4: Musa, herbalist in MMCF2

Musa is a 53-year-old male herbalist in MMCF2 whose services are sought for a wide range of ailments. Alongside the local *magazia*, Musa has received training from World Vision Ghana (WVG). Topics covered in the training included HIV/AIDS and epilepsy.

Musa routinely attends to health problems such as stomach aches, snake bites, dumbness, and wounds that appear to defy conventional treatment. At the time of the interview (February 2013), Musa had a patient who had been nursing a wound for 10 years. Musa says that he also tries to cure serious mental illnesses through prayer.

His clients come from nearby settlements such as Jangna as well as from farther afield in Tamale. He used to visit patients personally but does not do so anymore after having an accident that affected his mobility.

He does not charge for his services but accepts whatever ‘gift’ a patient is able to offer. Musa says he sometimes collaborates with ‘doctors’ (presumably meaning healthcare workers) by referring some cases to the formal healthcare facilities for further assessment or by sharing his diagnosis with the medical team at the hospital. According to Musa, there are also times when “you see [a] sick person and spiritually, [their] life is already ended…so you give [them] medicine and ask the relatives…to send the patient [back] home.”

Historically, traditional birth attendants (TBAs) provide prenatal, delivery, and postpartum services and are still valued by women for their accessibility, proximity, familiarity, low cost, and approachability. Like herbalists, some TBAs offer multiple services. For example, a TBA in BNCF2 said he “treats…miscarriages, breast milk [insufficiency], whitlow [and] boils,” and stitches wounds as well. In some places, TBAs also serve as links between their communities’ pregnant women and the formal health facilities. In BNCN1, for example, a health officer confirmed that TBAs are “sometimes asked to assist the nurse in deliveries when there are no midwives at the health centre.”

There is a high level of trust in this institution. Even city dwellers were reported to use their services. Among the West Mamprusi sites, only MWCN1 (a dispersed control community of seasonal migrant farmers) did not have one and interpreted this as evidence of their deprivation. In BSCF1, the TBA’s services are highly patronised due to the long distance to the nearest clinic in Wiaga. Even though a particular TBA in the BSCF1 community has been banned from practising by the Wiaga health facility, local women still prefer her services due to the reasons above.

In several other communities, TBAs are more highly regarded than local formal health facilities. TBAs are one of the most valued institutions, often second to the sub-chief. They are widely perceived as having a better record than the formal health facilities and losing fewer children during the delivery process. They were said to demonstrate greater willingness to visit households where they are needed, in spite of the time of day and even if it inconveniences them. Nurses at formal institutions were perceived to be less friendly and services at the facilities are characterised by delays and long queues. In some cases, nurses at the Uwasi CHPS compound were said to excuse themselves for hours to run private errands. Often health workers are not at their post when expectant mothers visit the health facility and women also complained of being shouted at.

During the rainy season, formal healthcare centres can become even more difficult to reach. For example, citizens of MMCF2 and MWCN1 have to travel over 12 kilometres to the nearest health facility across seasonal streams. In BSCN4, where reliance on TBAs has declined because of the NHIS, women still rely on TBAs during emergencies and when access to the facility is disrupted by seasonal water crossings.

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26 The word “doctor” is commonly used among the illiterate and semi-literate to mean health worker.
27 Community-based Health and Planning Services.
Box 5: Issaka, a 42-year-old male TBA in MMCF1

Until the day of the interview, Issaka was one of two traditional birth attendants in the MMCF1 community. Being the junior of the two, he often referred difficult cases to the other TBA. The most challenging cases are referred to the hospital and even when deliveries are assisted by the TBA, the mother and baby are referred to the hospital one month after delivery for routine checks.

According to Issaka, “when a woman is pregnant, it is sickness.” For that reason, Issaka routinely advises his ‘patients’ to desist from carrying heavy loads. He also prescribes a course of 20 eggs with a daily dosage of one egg. His ‘patients’ are further advised to have bangui soup made with a range of leafy vegetables such as nkontomire,28 alefu, and bean leaves. Issaka added that, “after the woman has given birth and...passed all the water and blood, we repeat the meal of eggs, alefu, bean leaves, and nkontomire to replenish the blood and water lost.”

Previously, the hospital had an ambulance that was used to pick pregnant women up whenever they needed to get to the hospital. But now it has broken down.

Issaka acquired his skills from his paternal and maternal grandmothers as well as from his mother, all of whom were TBAs. He honed those skills after their death based on a prophecy instructing him to become a practitioner.

Along with other TBAs, Issaka received supplementary training from WVG three years ago. Among his lessons, Issaka recalls the importance of not delaying referring complicated cases and that a TBA could be arrested and prosecuted in the event of a death.

Upon successful delivery, a woman’s family presents a tribute in the form of one fowl, some soap, and GH₵ 4 to Issaka. The soap he would use to wash the clothing he wore to deliver the baby but the fowl and money he would pass on to the senior TBA. In reciprocation, the senior TBA would give him some herbs to wash his face with as protection from blindness, a situation that Issaka attributes to the ‘bad’ fluid that is spilled when a woman’s water breaks during labour. Now that the senior TBA has passed, Issaka will use the fowl and money to acquire the herbs he needs to wash his face.

Issaka acknowledges the need for further training “to increase my capacity because I am still learning.”

Communities will typically first consult the soothsayer to determine whether the problem has spiritual or corporeal origins. Often, no further intervention is sought if the soothsayer or traditional healer declares a case to be beyond cure and the patient would simply be left to die (Box 4).

An array of home remedies was mentioned in the communities such as daubing the forehead with dung from cows or donkeys as treatment for headaches or coating other body parts with similar preparations as a cure for pains.

Self-help institutions. Farmer groups exist in the majority of communities, some through the encouragement of MOFA,29 SADA, and NGOs. Others have a long history, having evolved from the traditional cooperative arrangements and established with the purpose of accessing public/formal services. Whilst most of the farmer-based organisations (FBOs) are mixed-sex groups, men and women have separate groups in a few communities.

28 Nkontomire is the broad leaf of the cocoyam plant.
29 Ministry of Food and Agriculture.
It appears that the very poor have difficulty being accepted in the collateral groups, as nobody wants them. Even where the poor are involved in the FBOs, the core benefits tend to be captured by the rich.

Widows groups exist in a few communities supported by the Friends of Widows Foundation. Youth groups are also common with a mix of developmental and socialising agendas.

**Religious institutions.** The main religious institutions are soothsayers, shrines (a relative minority, which also offer sacrifices to the deities on behalf of clients who specifically request their services for economic and other favours), and imams (in Islamic communities). Imams provide spiritual services at naming, marriage, and funeral services. Churches (particularly the Catholic Church and the Church of Pentecost) are common in the Buili sites. The churches were said to offer a diverse portfolio of spiritual, financial, nutritional, and other forms of support. Their services are also targeted in a more focused way at needy members of their congregations. Several of the groups interviewed are unhappy with what they described as ‘noise-making’ by some churches and with the church’s undermining effect on traditional beliefs.

**Faith-based NGOs.** The Presbyterian Agricultural Station at Sandema (PAS-S) and the Friends of Widows Foundation are well regarded in several of the Buili sites visited. PAS-S provides extension services to large-scale farmers as well as small ruminants and fowls to disabled persons and poor households. WVG also provides support in the areas of health, agriculture, education, infrastructure, and also education finance and supplies to poor children.

**Other projects.** In MWMV1 and MMCN2, the Millennium Development Authority (MiDA) project supported poor men and women with agricultural credit and training in improved farming techniques. VSO’s TENI project has also provided some education support to underprivileged schools in MMCF2. SADA was mentioned mainly in the MVP communities as having provided agricultural support in the form of motorised rural transport (a.k.a. ‘motorking’), tractor services, insecticide-treated bed nets, fertiliser, teak seedlings, maize, rice seeds, and some primary healthcare training together with first-aid kits and monthly allowances of GHC 150 to community health volunteers. SADA also supported poor households to register or renew their NHIS subscriptions.

Inputs distributed by SADA such as subsidised seeds and fertiliser and ploughing services were said to have been late. As a result, some farmers rejected the support for fear that it would not be beneficial. Another outcome of the late delivery of SADA’s fertiliser credits is that it did not achieve the desired impact on productivity. In spite of this, farmers said they are still expected to pay back the credits in-kind to SADA, leaving them with very little after harvesting. Those unable to repay in-kind said they are being asked to pay cash of GHC 122. Those with the smallest farms also complained that they are denied access to ploughing services. In BSCF2, it was the influential members of the community who received the subsidised tractor services. Poor women in BSMV1 said the ‘motorking’ has made it easier to transport seriously ill people to the referral facilities in Wiaga and Fumbisi. SADA’s support to agricultural development was commended in BSMV1.

**State service provision institutions.** The key state institutions providing services to the communities visited are Ghana Health Service (GHS), Ghana Education Service (GES), MOFA, and the District Assemblies. Conspicuously absent is the Community Water and Sanitation Agency (CWSA).

MOFA provides extension services in pest control, fertiliser application, new varieties of seeds, plant spacing, compost preparation, advice on livestock management, and the development of farmer organisations. The extension workers were described as largely invisible to most community members. Women’s farms appear to

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30 Islam is the majority religion in the Mampruli areas whereas traditional religion dominates in the Buili sites.
31 Volunteer Services Overseas.
32 Tackling Education Needs Inclusively.
33 By contrast, volunteers in non-MVP communities are not paid (except for incentives during training sessions). This is creating some tensions in the ranks of the larger community health volunteer cohort.
receive the least visits. Generally, state support to agricultural development seems negligible by comparison with education and healthcare.

Several dugouts are not being used in BSMV2. Apart from drying up during the dry season, the adjoining land is reported to be rocky. The dams in BSCF1 and BNCF1 too are not very effective. The latter is unable to hold water and is now filled with weeds. In BSCF2, lands close to the dam are rocky and infested with insects making farming ineffective. Unaware of the challenges associated with the dam, nearby communities brand the people of BSCF2 as lazy because they are not using the dam. The research team’s investigations suggest two worrying details. First, most of the dams were built by road contractors who were awarded the contracts to develop the dugouts, and second, the communities were typically not consulted in the selection of the sites for the dugouts.

Figure 8. State of a community dugout in the dry season, Kaadema

Ghana Education Service (GES) services are felt mainly by teachers in local public schools. An exception is in BSMV1, where children have to commute long distances, sometimes across a seasonal stream, to school in Uwasi. Children receive free exercise books and school uniforms. In the process, the neediest children often do not have sufficient quantities. Quality is a concern in several communities where teachers prefer to live in distant locations better served with social amenities such as Fumbisi, Walewale, and Sandema/Fumbisi. Where there is no JHS, children sometimes have to walk very long distances, contributing to an increased dropout rate at the transitional point from primary school to JHS.

Deficits in teacher supply and commitment also contribute to children’s lack of fulfilment at school and influence schooling attrition in communities such as MMCF1. The temptation to drop out of school is exacerbated by tardiness among many school authorities. Poor women reported that teachers frequently do not show up during the rainy season and during major football festivals such as AFCON. Well-to-do parents in BSMV5 take their children to school in Fumbisi because of what they perceive to be the poor quality of education in the local school. Describing the situation in BSCF1, a man reported in one focus group discussion that, “they (i.e. teachers) sit and chat, leaving the children on their own.”
The poor state of education resourcing in the rural savannah is reflected in Box 6.

**Box 6: Schooling in MMCN2**

The public school in MMCN2 was built by the community with their womenfolk providing water for the task. The community had observed that the distribution of public support for education tended to be restricted to children from the neighbouring community, Jaadema, where children of MMCN2 enrolled for school. The school’s construction was thus a communal strategy to compel the state to reverse this perceived injustice. Many girls from the community still attend school in the larger towns of Walewale and Fumbisi where they have to rent rooms.

The school only has one teacher. Water is also a challenge on the premises and children have to make the long journey back home when they are thirsty. Not all of the school’s population have uniforms as the government’s ostensibly universal ‘free school uniform programme’ has not been extended to the community school.

Children refuse to go to school when households are unable to provide them with breakfast. Previously, young women in MMCN2 settled for a stint in *kaya yoo* work as a way of raising petty finance, but education is now perceived as offering greater prospects. The head of a Fulani settler household explained, “there was no school in the community and so my children don’t go to school. But now they have established [one] in the community and so I would send the young ones to school.” In another interview, the importance attached to schooling was noted as preventing some mothers from migrating on *kaya yoo* voyages, owing to the adverse effect it has on the education of the children they would have to leave behind.
The services of the GHS are provided in the areas of immunisation at the child welfare clinics (CWCs), school health promotion (including de-worming), and community-wide vaccination (yellow fever and CSM). The service also has trained community health volunteers to administer deworming and first-aid, facilitate bed net usage, assist outreach nurses, and keep records in a range of fields such as births, deaths, diseases, and exclusive breastfeeding. GHS also provides health education. Both poor and non-poor groups interviewed, and in particular participants who are enrolled on the NHIS, spoke highly of the accessibility of GHS services. However, the poor complained about abuses they endure at the larger/district/referral health facilities.

In the Buili area, there appears to be a move by the state to encourage institutional deliveries and TBAs are being motivated by the district health directorates to redirect pregnant women to the facilities. To facilitate this, they are being motivated with small incentives such as soap and dry food rations. Some health facilities in the Builsa South District are also offering TBAs between GH¢ 5 and GH¢ 15 for each referral they make. It appears that both the state and NGO sectors now encourage TBAs to see the formal facilities as the preferred option and to intervene under only certain circumstances such as when formal health services are not immediately accessible due to challenges with transportation. Some TBAs complained about being dissuaded from performing deliveries after having been trained by formal healthcare providers. In some Mampruli communities, training provided by WVG included guidance on which cases to refer upwards to the formal sector.

The District Assemblies are felt most in the areas of school infrastructure, boreholes, construction, rehabilitation of dams, and the rehabilitation of roads and culverts. In a minority of sites, the District Assembly was cited for providing solar panels, school feeding, and relief items during disasters such as floods. Participants routinely complained about being made to make numerous journeys to the Assembly whenever they have a need. Others in the newly created Mamprugu Moaduri District Assembly said they were completely neglected by the previous Assembly in the West Mamprusi District. Residents of MMMV1 similarly feel completely neglected owing to the language barriers.

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34 Cerebrospinal meningitis.
State institutions of governance
Overall, communities feel neglected by the District Assemblies in terms of services, feedback, and visits. In MMCN2, the poor men felt that, “we don’t know those at the Assembly and they too don’t know us.” Similar sentiments were expressed. In BNCF1 and BSCF2, citizens do not perceive assembly projects to be transparent and they find it difficult holding the Assembly accountable because of the distance to the district capital. Poor people were often aware that the District Assembly has developmental responsibilities, but had very little knowledge about how the Assembly functions. Others alleged discrimination by the Assembly in the distribution of development benefits such as the school feeding programme and access to youth employment services.

Virtually everywhere there was a general sentiment that Members of Parliament (MPs) are only visible during the election season. The focus group of poor men at MMCN2 observed, “we voted for the MP and he won; [he] did not do anything for us…and we did not vote for him again so he told us if our children are sick we would carry [them] on a donkey to Walewale.” Poor women in that community expressed similar sentiments, “our MP is not effective at all. Some of us don’t even know him because he does not come here. The DCE too is like the MP; he doesn’t come here.” Several other communities acknowledged experiencing the efforts of the MP for Builsa South in particular (presumably through his share of the so-called “MPs Common Fund”35) in forms such as support to paying school fees, school uniforms, boreholes, and solar lighting.

Most trusted community institution
In the overwhelming majority of communities, sub-chiefs were ranked as the most responsive community governance institution. Women mentioned that they sometimes fall on the sub-chief when they are subject to domestic violence by their husbands. During the construction of a school in BSCF2, the sub-chief lobbied the contractor for women to be included in the workforce. In several communities, the Assemblyman was ranked next whereas it was the TBA in the Mampruli communities; Assemblypersons ranked very low. Other relatively high mentions include the youth leaders and, in BNCF1, a particular individual.

Decision-making and power relations at the household level
Overall, it is a father’s prerogative to make decisions for his household. He is not obliged to consult his wives or any other woman. As a result, women are consistently sidelined in household decision-making. Men suggested that women have a higher propensity to be emotional and compulsive thereby undermining their ability to keep secrets. In an interview with a group of poor men in BSMV1, one opined that, “women are very volatile and unfaithful; unlike [men], they can leave the community at any time and...share our community’s secrets...with our enemies. Although we do not involve women, whether old or young, we however involve our young [sons] in decisions concerning our community... They are our future.” At several sites, women appeared to confirm this perception about not being dependable with secrets. Another reason why females are generally left out is fear that young women will carry their family secrets to their husbands’ homes when they leave for marriage. Some exceptions to this cultural construct were mentioned in MWMV1 and BSMV1. At the latter, “a woman may be allowed to take part in decision-making and...[be] considered as a man if she [remains in the marriage for a long time] and they...trust that she will not leave to re-marry.”

Anecdotally, a woman can only win an election if she contests in her father’s home area rather than in her husband’s home area. It is said that “a woman cannot come from somewhere else to make a sacrifice in her husband’s home.”

Children generally have no say in household decision-making. Boys from about 15 years of age are often invited to meetings in the compound whereas even the mother of the house tends to be denied participation in such meetings. One girl shared her experience during a discussion in BSCF1: “Some [fathers] don’t even believe we

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35 Across Ghana, MPs commonly invest part of this fund in paying for roofing sheets and cement to facilitate the completion and rehabilitation of schooling and other community infrastructure projects.
[children] can make meaningful contributions [to discussions]. Our mothers are not the problem...it’s the fathers. Our mothers sometimes prefer [for us to] sit and listen but [that] idea is always rejected by the fathers. They say our lips are light and easily open.”

Men typically have control over the use and disposal of the more valuable assets within the household. These include farmland, housing, ruminants, farm equipment, food stocks, and household goods. Women have some control over selected assets such as farm produce from their own farms, fowls, pots and pans they brought into the marriage, self-acquired bicycles, money generated from capital given to them by their brothers, and assets they have brought into the marriage. Women are also adopting strategies to buy livestock in the names of their eldest sons as tradition grants some exclusive rights/control over these assets. Doing so on the blind side of their husbands makes it easier for women to dispose of their assets without having to seek their permission.

How to enhance the involvement of the poor in decision-making

- Participants are content to leave decision-making in the hands of the sub-chiefs because of the high level of trust
  - In the Buili areas, NGOs were seen as effective partners in channelling the voice of the poor upwards
  - Assemblypersons were perceived to be more accessible than chiefs via mobile phones. People were generally reluctant to call chiefs on their phones
  - Participants from the poor believed that greater access to information and engagements with community radio would enhance inclusivity
  - Illiteracy was identified as a barrier to effective participation
  - In a minority of communities, the poor have lost confidence in the formal governance system and have given up on trying to be heard. At some sites the poor felt that efforts to consult directly with them (e.g. by educating their leaders and by securing direct representation of the poor in meetings of the traditional council) would facilitate their participation in decision-making
  - Some opined that community fora would be helpful in holding their MPs to account and contributing to decision-making
Annex 1. Profile of Communities

Key to the coding of communities:
BS = Builsa South
BN = Builsa North
MW = Mamprusi West
MM = Mamprugu Moaduri
MV = Millennium Village
CF = Control Far
CN = Control Near

<table>
<thead>
<tr>
<th>Community</th>
<th>Kind of community</th>
<th>Estimated number of households</th>
<th>Estimated population</th>
<th>Languages</th>
<th>Health</th>
<th>Education</th>
<th>Electricity</th>
<th>Water and Sanitation</th>
<th>Other Amenities</th>
<th>Distance to nearest major market</th>
<th>Nature of road linking major township</th>
<th>Comments</th>
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</thead>
<tbody>
<tr>
<td>MWMV1</td>
<td>Community on its own</td>
<td>90 houses and four sections – namely Nayilifong, Somafong, Yezogiri, and Yelipali</td>
<td>3,745 persons - 2,220 females and 1,525 males</td>
<td>Main language Mampruli. Other minor ones include Kantosi, Guruni, Busansi, and Fulani.</td>
<td>No health facility. Health services accessed at Walewale, Wulugu, and Bolgatanga</td>
<td>Infrastructure from pre-school to the JHS with a library under construction.</td>
<td>Not connected to the national grid but have 8 solar lamps provided by the Cocoa Marketing Board (CMB)</td>
<td>Three boreholes and four functional wells</td>
<td>There is a dam for agricultural purposes</td>
<td>5 km to Wulugu market</td>
<td>All the road to Wulugu is motorable even in the rainy season.</td>
<td>Charcoal burning is one of the most lucrative income sources in the community. People are not complaining of environmental pollution.</td>
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<tr>
<td>MMCN2</td>
<td>Community</td>
<td>48 houses and four sections – Tindaayili, Lori-Laanyiliand Nanchin-Naayili</td>
<td>766 persons - 452 females and 314 males</td>
<td>Main language Mampruli. Other minor languages are Frafra, Buili</td>
<td>No health facility, health is accessed at Walewale, Fumbisi, and Sandema</td>
<td>School under construction through community initiative. Only one teacher at the moment taking care of 3 classes</td>
<td>Not connected to the national grid but eight solar street lamps on one of which has been working since</td>
<td>Five open wells three of which are salty and two non-functional boreholes.</td>
<td>7 km to Djardima market</td>
<td>The road linking to the major town of Djadema is not tarred. Its gets flooded during the rainy season.</td>
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<td>Community</td>
<td>Kind of community</td>
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<td>MWCN1</td>
<td>Section of Kunamoari</td>
<td>Est. 63 households</td>
<td></td>
<td>Main language is Mampruli. Other minor languages are Dagomba, Dagaare, Frafra, Ewe</td>
<td>There is no health facility in the community. People largely depend on herbs. Health services accessed at Wulugu and Walewale.</td>
<td>There is no school in the community. Children living with parents in the community do not attend school.</td>
<td>There is no community not connected to the national grid.</td>
<td>There is no borehole or well. People depend on a stream for drinking water.</td>
<td>18 km to Walewale market</td>
<td>14 km to Wugulu market</td>
<td>The large proportion of the road is rocky and sandy which makes it difficult to access especially during the rainy season.</td>
<td>All inhabitants are settlers who have their families in other communities.</td>
</tr>
<tr>
<td>MMCF1</td>
<td>Community</td>
<td>Est. 25</td>
<td></td>
<td>Only language is Mampruli.</td>
<td>No health facility. Health services accessed at Yagaba.</td>
<td>There is no school. Children attend school at MMCF2.</td>
<td>The community is not connected to the national grid.</td>
<td>There are two open wells in the community.</td>
<td>6 km to Kubori</td>
<td></td>
<td>Community lies within the flood zone. This has compelled a lot of people to migrate with their entire families to other communities including MMCF2.</td>
<td>All the remaining 25 households are members of the same family.</td>
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<tr>
<td>MMCF2</td>
<td>Community</td>
<td>Est. 238 households</td>
<td>1,568</td>
<td>Main language is Mampruli. Other minor languages include Gruni, Buili</td>
<td>There is no health centre in the community. Health is accessed at Kubori.</td>
<td>There is a school from pre-school up to JHS.</td>
<td>There is no electricity. There are nine solar lamps scattered in the community.</td>
<td>There are seven boreholes in the community.</td>
<td>5 km to Kubori</td>
<td></td>
<td>The road to the nearest major towns of Yagaba and Kubori are not tarred. But it is motorable even in the dry season.</td>
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<tr>
<td>MMMV1</td>
<td>Community</td>
<td>Over 400 estimated</td>
<td></td>
<td>Main language is Mampruli.</td>
<td>No health facility. Infrastructure from pre-</td>
<td>The community All thirteen sections</td>
<td></td>
<td>5 km to Kpasenkpe</td>
<td></td>
<td>The road linking Kpasenkpe is not</td>
<td>There are 3 churches and</td>
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<td>Community</td>
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<td>Estimated population</td>
<td>Languages</td>
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<tr>
<td>1. BSMV3</td>
<td>Community</td>
<td>There are currently 48 households and sections – Nayiri, Bazeesa, Yipala, and Dalaasa</td>
<td></td>
<td>Buili. Other minor languages are Mamprusi, Frafra, Kantosi</td>
<td>Health services are accessed at Kpasenpke, Walewale, Yuasi, Gbedembiisi, and Fumbisi</td>
<td>School to JHS 3. There are two teachers' quarters, one of which is under construction. There is a solar panel that powers the solar lamps at the teachers' quarters.</td>
<td>is not connected to the national grid but plans are far advance in that regard as electric poles have already been erected.</td>
<td>have wells. The chiefs section and the school however have a mechanised borehole.</td>
<td>market 7 km to Djadema market</td>
<td>tarred but motorable in the rainy and dry season.</td>
<td>one mosque in the community</td>
<td></td>
</tr>
<tr>
<td>2. BNCF3</td>
<td>Section of Chuchuliga</td>
<td>Est. 97 households</td>
<td></td>
<td>Major language is Buili. Other minor languages include Kassen, Gruni</td>
<td>There is no health facility. Health is accessed at Chuchuliga Health Centre</td>
<td>There is no school. School is accessed at Chuchuliga</td>
<td>There is no electricity and no solar panels.</td>
<td>There are two open hand dug wells.</td>
<td>About 18 km to Fumbisi market</td>
<td>The road to the major towns of Djadema and Wiesi are not tarred. The community is cut off during rainy season.</td>
<td>The road linking Chuchuliga is in good shape and motorable throughout the year.</td>
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<td>Kind of community</td>
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<td>Estimated population</td>
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<td>BSCN1</td>
<td>Section of Chansa</td>
<td>Est. 31 households</td>
<td></td>
<td>Main language is Buili. Other minor languages are Gruni, Kassen</td>
<td>There is a health centre with 3 stationed community health nurses. There is also a com health volunteer under the MVP.</td>
<td>Infrastructure from pre-school to JHS 3.</td>
<td>There is no electricity. However there are some few solar lights in the community.</td>
<td>There are 2 mechanised boreholes in the community.</td>
<td>The community houses the area council office of the district.</td>
<td>About 12 km to Fumbisi market 2 km to Kaadema market 12 km to Wiaga market 22 km to Sandema market</td>
<td>The road to Kaadema is not tarred but motorable. Portions of the road get flooded by spill over from the Kaadema dam.</td>
<td></td>
</tr>
<tr>
<td>BSCN2</td>
<td>Section of Kaadema</td>
<td>Est. 122 households</td>
<td></td>
<td>Main language is Buili</td>
<td>Health is accessed at Kaadema</td>
<td>There is no school. School is accessed at Kaadema</td>
<td>There is no electricity or solar lamps in the community</td>
<td>There are no boreholes in the community.</td>
<td>The community houses the area council office.</td>
<td>The community has its own weekly market. 10 km to Wiiga market 15 km to Fumbisi market 20 km to Sandema market</td>
<td>Road linking to Wiaga is not tarred but it is in good shape. Motorable throughout the year.</td>
<td></td>
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<tr>
<td>BSMV1</td>
<td>Section of Uwasi</td>
<td>Est. 140 households</td>
<td>746 persons</td>
<td>Major language is Buili. Other minor languages include Kasen,</td>
<td>There is no health facility. Health service is accessed at CHP centre</td>
<td>There is no school. Children go to school at Uwasi about 1 km away</td>
<td>There is no electricity or solar street lamps.</td>
<td>There is only one borehole in the community.</td>
<td></td>
<td>About 15 km to Fumbisi market</td>
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<tr>
<td>Community</td>
<td>Kind of community</td>
<td>Estimated number of households</td>
<td>Estimated population</td>
<td>Languages</td>
<td>Health</td>
<td>Education</td>
<td>Electricity</td>
<td>Water and Sanitation</td>
<td>Other Amenities</td>
<td>Distance to the nearest major market</td>
<td>Nature of road linking major township</td>
<td>Comments</td>
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</tr>
<tr>
<td>Gruni</td>
<td></td>
<td></td>
<td>Gruni</td>
<td>at Uwasi. There is also a TBA in the next community</td>
<td></td>
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</tr>
<tr>
<td>BSMV2</td>
<td>Section of Wiaga</td>
<td>Est. 138 households</td>
<td>Major language is Buili</td>
<td>There is a completed CHP compound but yet to commence operation. Health is currently accessed at Kadema. Outreach nurses visit the community on a regular basis.</td>
<td>Infrastructure from pre-school to JHS 1. Classrooms for JHS 2 and 3 are under construction.</td>
<td>There is no electricity in the community.</td>
<td>There are 3 boreholes in the community.</td>
<td>Zamsa to Kaadema is 3 km and 15 km to Wiaga market.</td>
<td>With the exception of some portion of the road to Kaadema that gets flooded during the rainy season, the road is motorable throughout the year.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BNCF1</td>
<td>Section of Sandema</td>
<td>Est. 164 households and 50 houses.</td>
<td>600 people</td>
<td>Main language is Buili</td>
<td>There is no health facility in the community. Health is accessed at Sandema</td>
<td>There is a day care and primary school. JHS is accessed at Sandema</td>
<td>There is no electricity in the community.</td>
<td>3 km to Sandema market</td>
<td>Though very close to Sandema, the community is totally cut off by flood during rainy season.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BSCF2</td>
<td>Section of BNCN1</td>
<td>Est. 319 households</td>
<td>Main languages are Buili, Kasen,</td>
<td>There is a child welfare clinic.</td>
<td>Infrastructure from pre-school to JHS 1.</td>
<td>There is no electricity</td>
<td>There are 2 mechanized borehole in the</td>
<td>There is a dam for farming and animal</td>
<td>12 km to Sandema market</td>
<td>Greater portion of the road is in good shape. People still manage to use it</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community</td>
<td>Kind of community</td>
<td>Estimated number of households</td>
<td>Estimated population</td>
<td>Languages</td>
<td>Health</td>
<td>Education</td>
<td>Electricity</td>
<td>Water and Sanitation</td>
<td>Other Amenities</td>
<td>Distance to the nearest major market</td>
<td>Nature of road linking major township</td>
<td>Comments</td>
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</tr>
<tr>
<td>BSCF1</td>
<td>Section of Wiaga</td>
<td>Est. 147 households</td>
<td></td>
<td>Gruni</td>
<td>Community health nurses make periodic visits to the community.</td>
<td>There is no school in the community.</td>
<td>There are two mechaniised boreholes in the community</td>
<td>The community shares a dam with Bachinsa community. Dam is currently broken.</td>
<td>5 km to Wiaga market and 15 km to Sandema market</td>
<td>Road linking Wiaga and Sandema is motorable throughout the year.</td>
<td>During the dry season.</td>
<td></td>
</tr>
<tr>
<td>BNCF2</td>
<td>Section of BNCN1</td>
<td>Est. 107 households and three sections – Aduak-yeiri, Tinyansa-yeiri, and Apanga-yeiri</td>
<td></td>
<td>Main language is Buili</td>
<td>There is no health facility in the community. Health is accessed at BNCN1</td>
<td>There is no school in the community.</td>
<td>The community is connected to the national grid</td>
<td>There are four boreholes and six open wells.</td>
<td>Most of the houses in this community have their own toilet facility.</td>
<td>12 km to Sandema market</td>
<td>One of the best feeder roads in the district, it is motorable throughout the year.</td>
<td></td>
</tr>
<tr>
<td>BSCN4</td>
<td>Section of Chansa</td>
<td>Est. 109 households, 31 houses and five sections – Nayengsa, Nangangde m, BNCF2, Singsa, and</td>
<td></td>
<td>Main language is Buili</td>
<td>There is no health facility. Health is accessed at BSCN1</td>
<td>There is only kindergarten in the community. Children go to school at BSCN1</td>
<td>There is no electricity.</td>
<td>There is only one borehole in the community.</td>
<td></td>
<td>6 km to Kaadema market 16 km to Wiaga market 25 km to Sandema</td>
<td>BSCN4 and BSCN1 use the same road.</td>
<td></td>
</tr>
<tr>
<td>Community</td>
<td>Kind of community</td>
<td>Estimated number of household</td>
<td>Estimated populatio</td>
<td>Languages</td>
<td>Health</td>
<td>Education</td>
<td>Electricity</td>
<td>Water and Sanitation</td>
<td>Other Amenities</td>
<td>Distance to the nearest market</td>
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<tr>
<td>Kumlabsa</td>
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</tr>
<tr>
<td>BSMV3</td>
<td>Community</td>
<td>Est. 120 households and six sections- Poodelma, BNCF2, Yipala, Kumpilinsa, Maansa, and Talisa</td>
<td></td>
<td>Main languages are Buili and Kantosi</td>
<td>There is a CHP centre in the community</td>
<td>Infrastructure from pre-school to JHS 3</td>
<td>There is no electricity</td>
<td>There are four mechanised boreholes and 14 fully functional hand dug wells.</td>
<td>The community is multi-religious, made up of traditional African religion, Christianity, and Islam.</td>
<td>6 km to Fumbisi market</td>
<td>Road is very sandy making it difficult to use in both rainy and dry seasons.</td>
<td></td>
</tr>
<tr>
<td>BSMV4</td>
<td>Community</td>
<td>Est. 186 households and four sections- Yemonna, Gongdom, Gunta, and Yipala.</td>
<td></td>
<td>Main language is Buili</td>
<td>There is no health facility</td>
<td>Infrastructure from pre-school to JHS. School also has teacher’s quarters, urinal and toilet facility for boys, girls and teachers.</td>
<td>Community is connected to national grid.</td>
<td>There are five mechanised boreholes in the community.</td>
<td></td>
<td>2 km to Fumbisi</td>
<td>2 km to Fumbisi market</td>
<td>Road to Fumbisi is not tarred but in good shape.</td>
</tr>
<tr>
<td>BNCN1</td>
<td>Community</td>
<td>Est. 129 households</td>
<td></td>
<td>Main language is Buili</td>
<td>There is a health centre in the community</td>
<td>Infrastructure from pre-school to JHS.</td>
<td>Community got connected to the national grid less than a year ago.</td>
<td>It houses the area council and the health insurance office.</td>
<td></td>
<td>12 km to Sandema market</td>
<td>BNCN1 and BNCF2 use the same road, which is regarded is one of the best feeder roads in the district.</td>
<td></td>
</tr>
<tr>
<td>BSCN3</td>
<td>BSCN3 is a section of Gbedemah (not MVP community)</td>
<td>158 estimated households The community</td>
<td>Estimated 751 people</td>
<td>Main language is Buili</td>
<td>There is a newly constructed CHP centre, which has</td>
<td>There are primary schools in three of the four sections</td>
<td>Not connected to the national electricity</td>
<td>There are four functioning boreholes distributed</td>
<td></td>
<td>12 km to Fumbisi market</td>
<td>The roads linking to the major markets of Wiaga, Sandema, and Fumbisi are not</td>
<td></td>
</tr>
<tr>
<td>Community</td>
<td>Kind of communit y</td>
<td>Estimated number of household s</td>
<td>Estimated populatio n</td>
<td>Languages</td>
<td>Health</td>
<td>Education</td>
<td>Electricity</td>
<td>Water and Sanitation</td>
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<tr>
<td></td>
<td>consist of four sections i.e. BNCF2, Balerinsa, Garibiensa, and Gbenaasa</td>
<td>yet to commence operation. Currently healthcare is accessed at Gbedemah CHP centre.</td>
<td>i.e. BNCF2, Balerinsa, and Garibiensa. JHS in two sections i.e. BNCF2 and Balensia</td>
<td>grid.</td>
<td>across the community</td>
<td>One additional borehole is under construction</td>
<td>tarred.</td>
<td></td>
<td></td>
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</tbody>
</table>
## Annex 2. PRA Focus Group and Key Informant Interviews

<table>
<thead>
<tr>
<th>COMMUNITY</th>
<th>FOCUS GROUP DISCUSSIONS</th>
<th>KEY INFORMANT INTERVIEWS</th>
<th>OTHER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>MEN</td>
<td>WOMEN</td>
<td>SCHOOL CHILDREN ASSEMBLY MAN/UNIT COM.</td>
</tr>
<tr>
<td>RAR</td>
<td>PVP</td>
<td>RAR</td>
<td>PVP</td>
</tr>
<tr>
<td>MMMV1</td>
<td>11</td>
<td>13</td>
<td>11</td>
</tr>
<tr>
<td>BSMV5</td>
<td>10</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>BNCF3</td>
<td>10</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>BSCN2</td>
<td>11</td>
<td>13</td>
<td>10</td>
</tr>
<tr>
<td>BSCN1</td>
<td>10</td>
<td>8</td>
<td>10</td>
</tr>
<tr>
<td>BSCM2</td>
<td>10</td>
<td>11</td>
<td>10</td>
</tr>
<tr>
<td>BNCF1</td>
<td>12</td>
<td>12</td>
<td>13</td>
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<tr>
<td>BSCF2</td>
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<td>BSCF1</td>
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<td>BSMV1</td>
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<td>BSMV4</td>
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<td>BSCN4</td>
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<tr>
<td>BSCN3</td>
<td>10</td>
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</tr>
<tr>
<td>BSMV3</td>
<td>15</td>
<td>15</td>
<td>12</td>
</tr>
<tr>
<td>BNCF2</td>
<td>17</td>
<td>17</td>
<td>14</td>
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<tr>
<td>MWMV1</td>
<td>12</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>MMCF2</td>
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<td>10</td>
</tr>
<tr>
<td>MMCN2</td>
<td>10</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>MMCF1</td>
<td>10</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>MWCN1</td>
<td>10</td>
<td>10</td>
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</tbody>
</table>

- Migrant workers
- Galamsey workers
- Spiritual church leader
- Stone quarry workers
- Returnee migrants
<table>
<thead>
<tr>
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<th>FOCUS GROUP DISCUSSIONS</th>
<th>KEY INFORMANT INTERVIEWS</th>
<th>OTHER</th>
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<tbody>
<tr>
<td></td>
<td>MEN</td>
<td>WOMEN</td>
<td>SCHOOL CHILDREN</td>
</tr>
<tr>
<td>RAR</td>
<td>11</td>
<td>13</td>
<td>10</td>
</tr>
<tr>
<td>PVP</td>
<td>11</td>
<td>13</td>
<td>10</td>
</tr>
<tr>
<td>BNCN1</td>
<td>14</td>
<td>15</td>
<td>12</td>
</tr>
<tr>
<td>TOTAL</td>
<td>217</td>
<td>241</td>
<td>208</td>
</tr>
</tbody>
</table>

NOTES:

1. Focus group discussions took place with all pre-identified groups i.e. rich/avergely rich (RAR), both men and women, and poor/very poor (PVP), both men and women, in all communities except MMCF1 and MWCN1 where local population was not large enough to generate more than two FGD groups for the purpose of our discussions. In these two communities, the discussions took place with only one male and one female group.

2. The agreed arrangement was to have discussions with 10 people in each well-being category. However in many of these communities, the attendance exceeded 10. The highest number of attendance recorded was 17 with the PVP and RAR men at BNCF2. However, for the purpose of controlling the process, the discussions were limited to the original 10 people invited with occasional input from the observers. Overall, the number of FGD participants for both male and female was more than the 400 recorded in the table.

3. At the time of the fieldwork, school and academic work was in full session. As a result of that it was difficult to organize teachers for a focus group discussion. At the schools, the field team had access to not more than four teachers (including headmaster) for the FGD. Communities MMCN2 and BSMV5 recorded the least amount of teachers with one and three, respectively.

4. Even though it is recorded in the table that 11 health officials were interviewed, the actual people interviewed was 8. This is because some communities were sharing the same facility. For example, BNCF2 and BNCN1, BSCN1 and BSCN4, MMCF2 and MMCF1, respectively.

5. At the district level, extensive interviews were conducted with district agricultural officers to clarify issues with regards to agricultural intervention programs, credit schemes, input supplies, extension services as well as veterinary services.