

Process Report 4 - Planning the Community Health Project in Atsiekpoe

Date: 25 May 2015

Venue: Community Meeting Ground Atsiekpoe

Present: Representatives Atsiekpoe, Stepping Stones for Africa and Jolinaiko Eco Tours

Facilitator: Mrs. Cindy Panou

Introduction

The community members of Atsiekpoe and the board of Stepping Stones for Africa Foundation (SSFA) met to discuss the progress and next steps to be taken concerning the Community Health Project in Atsiekpoe. This project is the outcome of three appraisals that were facilitated by SSFA between October 2014 and December 2014. During these appraisals, the Atsiekpoe community identified and prioritized their main development needs. Poor health and poor accesibility to health care facilities were identified as their main challenges. In response, a stakeholders survey and a community health survey were conducted to better understand these perceived health related problems.

Based on the outcome of these surveys, the decision was made to establish a CHPS-compound which stands for Community based Health Planning Services. This is a basic clinic staffed and managed by government under the condition that construction and maintenance is the responsibility of the community possibly in collaboration with a third party.

Apart from the ambition to establish a basic clinic, the community also anticipates health educational programs and WASH (Water, Health and Sanitation) solutions and these three aspects should be part of the Community Health Project we are yet to design and plan together. As the decision has been made to focus on these three topics, we have consequently moved to the next step of the Development Cycle as illustrated in figure 1. This meeting held on the 25th of May is therefore the first Planning Meeting towards the realisation of this wonderful ambition.

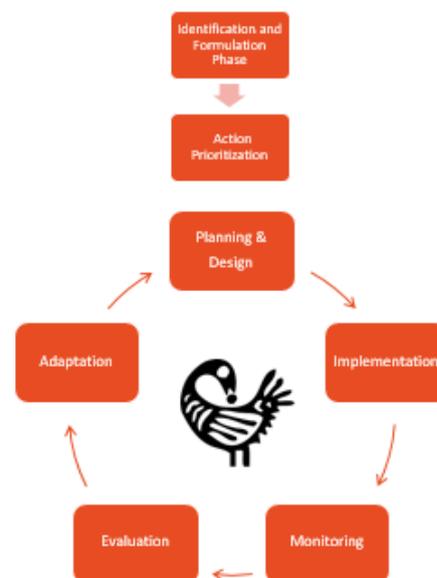


Figure 1: Project Cycle Atsiekpoe Community Development Initiative

What is a CHPS-Compound?

A **CHPS-Compound** literally stands for **C**ommunity based **H**ealth **P**lanning and **S**ervices. These centres are government-run primary health care clinics established to improve accesibility to basic health care in rural areas.



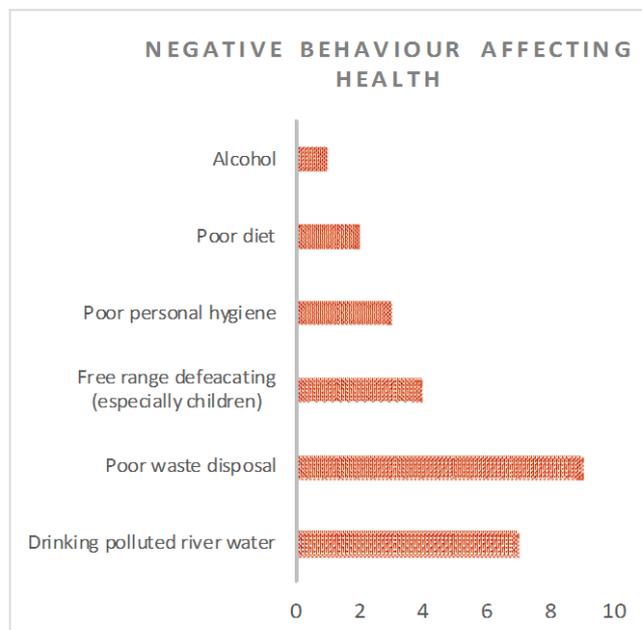
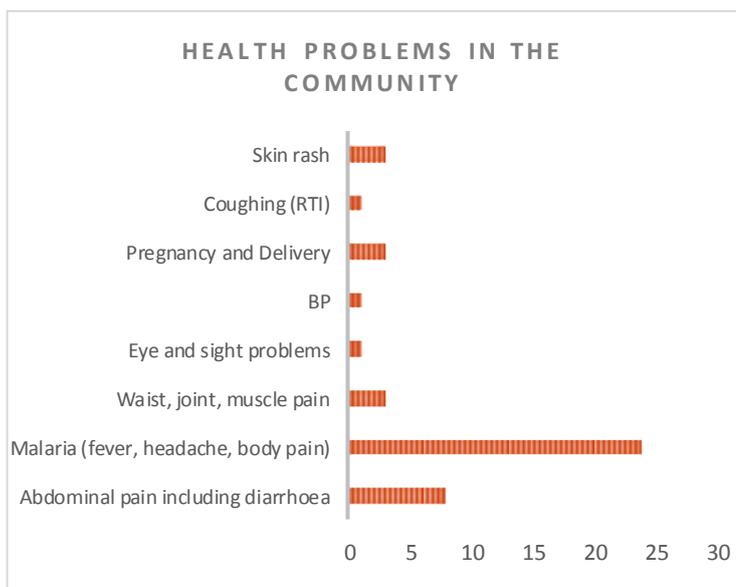
Summary of the Meeting

New faces: The meeting started with a prayer and an introduction of Mrs. Guro Sorensen who joined SSFA as an assistant executive. Mrs. Guro, who is from Norwegian origin, lives and works as a nurse in Ghana. She is very much interested in the Community Health Project and would like to be involved. Welcome to Guro!



Presentation of Actions and Results: The outcome of the activities that were undertaken after the last meeting in December were presented. Mrs. Cindy Panou and Mr. Ameko shared the outcome of the stakeholders survey conducted among health care facilities and government institutions such as the district assembly and the health directorate. The most important information is that Atsiekpoe meets the criteria for a CHPS-compound, meaning that the government will take on staffing responsibility and manage the clinic once the building is completed. The proposed land by Togbe Akati has been approved by the Health Director Mr. Ivans Attivor who visited the community in January. We like to express our gratitude to Togbe Akati for his support in this project.

Solomon and Fausina, both members of the 'Action Group for Development' presented the results of a community health survey that was conducted among 30 residents by the same action group. The results provided useful insight in the perceived health needs that should be taken into account during the designing stage of the Community Health Project. The graphs below present their most important findings.



What is the Action Group for Development?

The Action Group consists of representatives appointed by the community who will be the contact persons and foot soldiers of the development activities conducted in partnership with SSFA and Jolinaiko Eco Tours.

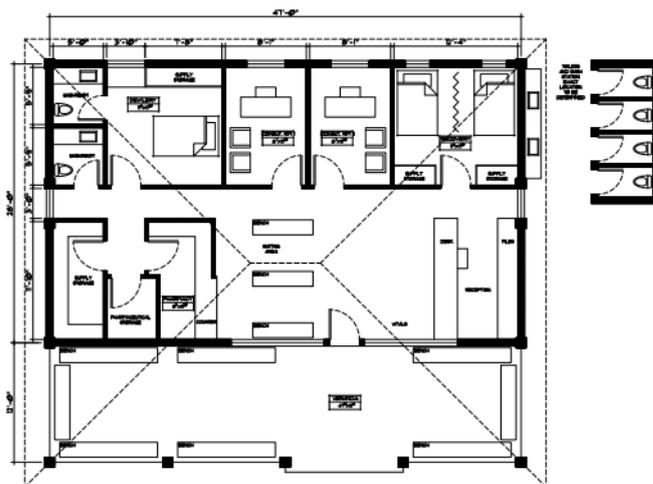
- **EziekelDziwornu** (overall contact person)
- **Mr. Ameko** (contact person for stakeholders)
- **Fausina** assisted by **Naomi, Rose** and **Sophia** (female foot soldiers)
- **Solomon** assisted by **Gabriel** and **Delali** (male foot soldiers)
- **Benjamin Akati** (health project assistant)

Process Report 4 - Planning the Community Health Project in Atsiekpoe

Play Mobile Visualisation Exercise : Only 30 residents participated in the community health survey. Therefore the opportunity was provided to participants, who were not interviewed, to also express their health concerns and the reason why they would come to the clinic. Play mobile dolls were shared and brought by the participants to our clinic drawing on plywood and they mentioned their ailments. The outcome was almost similar to the results of community health survey with additional needs related family planning, motor-bike accident and sexual weakness being mentioned. These outcomes including the graphs on page 2 are very important for the next planning sessions of the Community Health Project.



Assesing the Building Plan: A sketch of the proposed clinic was designed by SSFA with the help of various people. Special thanks goes to the Rhonda de Jong, an architect from Canada, who visted Atsiekpoe in April and May. Everybody favored the design of the clinic. The only important recommendation was adding a separate entrance to the delivery ward to guarantee privacy for expecting mothers.



Planning towards Construction: The CHPS-compound is going to be a public facility serving at least nine surrounding communities. The building requirements are therefore different from a private facility such as a residence. For that reason, district engineers need to be involved to authorize the building plan and inspect the building procedures during the construction period. In order to obtain the authorization of the building plan, we need the complete drawing and overviews of building materials. We also need an itimized budget for fundraising purposes.

There are different options for constructing this facility. We discussed the involvement of a private constructor or a contractor/engineer affiliated with the district as we don't have all the required expertise available in Atsiekpoe. We also explained that this building project is an opportunity for construction workers in the community to upgrade their skills. However, we did come to a final conclusion on how to go about the building process. For now, we decided to focus first on the complete drawing from an architect and an itimized budget of building materials. Both the community as SSFA members will work on a budget. Based on this information, a complete plan will be compiled and submitted at the district assembly for approval. It's a big project and therefore we have to cut it in small chuncks and meet regularly to discuss and decide on next actions to be taken. (see Action Table page 4).

Process Report 4 - Planning the Community Health Project in Atsiekpoe

ACTION TABLE				
Topic	Description	Action	Who	Deadline
Official drawing by architect	The current sketch only shows the building till roofing level. A drawing made by an architect is needed. Mr. Apollo Panou offered to take care of this.	Provide complete drawing by architect	Mr. Apollo Panou	19 June
Itemized budget of building materials	An overview of building materials is needed with its corresponding costs for authorization and fundraising. An estimation will be made by the community as well as by SSFA board in Accra to enable comparison. This will be done based on the official drawing.	Provide itemized budget	Action Group for Development	26 June
			Mrs. Cindy Panou	26 June
Additional requirements CHPS-compound	Questions were raised on requirements for accommodation of staff as well as furniture and equipment that need to be provided by the clinic under the collaboration with the government/the community.	Make inquiry at health directorate	Benjamin Akati	12 June
Community labour versus paid labour	There are general laborers and skilled laborers needed and the community should brainstorm to what extent work could be done on voluntary or paid base. They should also brainstorm on materials that could be made available by the community, like water or sand. This is important for next planning meeting.	Brainstorm on voluntary or paid labor.	Community	19 June
Expertise on WASH solutions	Clean water supply and sanitation are challenges in Atsiekpoe. We need more expertise and information to be able to make decision for how to construct the clinic. A seminar is planned in Accra from 24-26 June, and should be attended by community members. To get the best out of this visit, other organizations could be visited as well.	Plan a WASH-information visit to Accra	SSFA Board	19 June
		Attend the WASH-information visit	4 Action Group Members/2 Board Members	25-26 June or 24-25 June

Other matters: Mr. Apollo Panou raised the urgent matter concerning the need to reorganize the tourism board. Many activities are going on in the area of tourism and development. Therefore good communication and pro-activity is very important. There is a need to improve current communication channels, frequent board meetings and transparency. A suggestion was made to have a representative of each clan family on the Community Development and Tourism Board to ensure that the entire community is represented and communication flows fluently. **Therefore the appeal to the Atsiekpoe community to discuss possible reorganisation prior to the next meeting.**

Next Meeting: Date to be confirmed, preferably last week of June/first week of July.