

CONSTITUENCY PROFILE



ASANTE AKIM CENTRAL CONSTITUENCY

A PUBLICATION OF THE DATA FOR ACCOUNTABILITY PROJECT



**ASANTE AKIM CENTRAL
CONSTITUENCY
PROFILE**

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FOREWORD

The Constituency Profile Report is the first of its kind coming in the wake of an increased need for evidence-informed decision-making following the adoption of the Sustainable Development Goals (SDGs). Constituencies are well-defined geographical areas from which Members of Parliament are elected. Besides the legislation and oversight roles, Members of Parliament represent their constituents and are expected to lead and advocate the development of these constituencies. This development must be anchored on evidence that is often not readily available in the form and shape that incentivize its use. All Metropolitan, Municipal and District Assemblies (MMDAs) have medium-term plans and annual work programs that drive their development agenda. The implementation and monitoring of these must be of interest to the Parliament of Ghana for effective representation of the people.

This report provides valuable information on the size, structure, and distribution of the population and socio-economic characteristics of the constituency which provide some insights into the development of the social sector in particular. Indeed, the constituency profile is a singular attempt to provide data to Members of Ghana's Parliament to enable them to monitor the progress of implementation of the SDGs and to advocate more and better alignment of resources for their constituencies.

The Constituency Profile Report mostly relied on administrative data generated by departments of the MMDAs over the period 2009 to 2019. The challenges of administrative data in Ghana notwithstanding, the report is a demonstration of the value these data bring to development planning, monitoring and evaluation. This brings to the fore the urgent need to harness administrative and other non-traditional data sources as the foundational data systems, especially for local government to ensure no one is left behind.

The Ghana Statistical Service, African Center for Parliamentary Affairs, INASP and the other implementing partners are, therefore, delighted to provide data-users, especially Parliamentarians, the Metropolitan, Municipal and District Assemblies, Civil Society Groups and the people of the selected constituencies with this useful report.

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This maiden profile for the Asante Akim Central Constituency would not have been possible without the full collaboration of the Data for Accountability Project Partners and the Leadership of the Parliament of Ghana. The role and time of staff of the various decentralized departments of the Wa East District Assembly who helped us compile the data are acknowledged and appreciated.

We offer our special thanks to Samuel Akrofi Darko, Rachel Bowers and Vitus Bobrnuo, who collected the data and prepared this report, and to Sylvester Gyamfi for reviewing the data collection templates and the report. We are grateful to Nana Yaw Minta of Ministry of Finance for preparing the budget data, Selaseh Akaho of GSS for the geospatial work, Edward Boamah of Digital Earth Africa for the Earth Observation data analysis and Anthony Amuzu-Pharin of GSS for working on the Census of Agriculture data.

We express our profound gratitude to the Flora and Hewlett Foundation for funding the DAP initiative in Ghana. We are also grateful to the ACEPA team, namely, Agnes Titriku, Issifu Lampo, Fayed Alidu and Emmanuel Benchie for the support provided during the data collection and report preparation.

We are equally grateful to Omar Seidu of GSS for providing the leadership and general guidance in the preparation of this report and coordination of the DAP project from GSS.

ABBREVIATIONS AND ACRONYMS

ACEPA	African Centre for Parliamentary Affairs
AIDS	Acquired Immune Deficiency Syndrome
BECE	Basic Education Certificate Examination
CHPS	Community-based Health Planning Services
DACF	District Assembly Common Fund
DAP	Data for Accountability Project
DDF	District Development Fund
EIPM	Evidence Informed Policy Making
ENDISI	Enhanced Normalized Difference impervious Surface Index
GAR	Gross Attendance Ratio
GER	Gross Enrolment Ratio
GPI	Gender Parity Index
GPRTU	Ghana Private Road Transport Union
GSS	Ghana Statistical Service
HIV	Human Immunodeficiency Virus
ICC	Implementing Coordinating Committee
ICT	Information and Communications Technology
IGF	Internally Generated Fund
INASP	International Network for Advancing Science and Policy
JHS	Junior High School
LI	Legislative Instrument
MDGs	Millennium Development Goals
MMDAs	Metropolitan and Municipal District Assemblies
MTTD	Motor Transport and Traffic Directorate
MoFA	Ministry of Food and Agriculture
MUSEC	Municipal Security Committee
NRTTFC	National Road Transport and Transit
OPD	Out-patient Department
PHC	Population and Housing Census
SDGs	Sustainable Development Goals
SHS	Senior High School
UNESCO	United Nations Educational, Scientific and Cultural Organization
WASSCE	West Africa Senior School Certificate Examination
WHO	World Health Organization

CHAPTER ONE

INTRODUCTION

1.1 Background

Following the progress made under the Millennium Development Goals (MDGs), which shaped development efforts in most developing countries from 2000 to 2015, Ghana joined the rest of the world to adopt the Sustainable Development Goals (SDGs) in September 2015. The SDGs are continuing the fight against extreme poverty whilst addressing the challenges of ensuring equitable development and environmental sustainability. The ability of nations to achieve the SDGs is underpinned by the availability and use of their data systems to understand and inform decisions.

After the adoption of the global indicator framework by the United Nations Statistical Commission in March 2016, the Ghana Statistical Service (GSS), as the coordinating body for the National Statistics System (NSS) in Ghana, in collaboration with the SDGs Implementation Coordinating Committee (ICC) developed a framework to provide the required data and statistics to inform programming and to monitor progress. Consequently, a national SDGs Baseline Report, SDGs Budget Report and a national SDGs reporting platform were launched in 2018. These were followed by a Voluntary National Review (VNR) on SDGs and SDGs Budget Reports in 2019.

The Data for Accountability Project (DAP) is being jointly implemented by the African Centre for Parliamentary Affairs (ACEPA), Ghana Statistical Service (GSS) and INASP, with funding from the Hewlett Foundation. DAP is a two-year project that seeks to enhance the use of evidence in parliament, specifically, towards improving the capacity of Ghana's Parliament for monitoring the country's progress on the SDGs. In furtherance of this objective, DAP seeks to achieve the following goals: (i) Strengthened systems: Contribute to improvements in policy processes, systems, capacities and incentives that enable ongoing use of evidence in policymaking, and (ii) Contribute to the field; Fortify the emerging field of evidence-informed policymaking in Africa. The key expected outcomes the project aims to work towards include the following:

- Strengthened oversight capacity in two parliamentary committees
- Improved representation capacity in two committees
- Improved collaboration between data producers and parliament
- Shared learning on Evidence Informed Policy Making (EIPM) cultures in Africa

Traditionally, the main functions of the Ghanaian Parliament are executive oversight, legislation, and constituent representation. Parliament is the supreme forum for the ventilation of grievances aimed at seeking redress. The Member of Parliament (MP) is the communication link between his constituents and Government. Through parliamentary mechanisms/tools such as question time, statements, motions, debate on policy/bills, among others, an MP has the opportunity to draw attention to developments in his/her constituency and explore avenues for their socio-

economic development. For effective representation, an MP needs to better understand their constituencies and the people they represent.

1.2 Purpose of the Constituency Profile

Parliament is expected to play a unique role in the achievement of the SDGs as part of their representation and oversight roles. In view of that the Data for Accountability Project is the first focused effort to introduce data for SDGs monitoring to any sub-committee in the Parliament of Ghana. This is expected to help Parliament oversee the implementation of the SDGs in Ghana, by providing the evidence needed to monitor progress and advocate better for their constituencies. The project's goal is to help Parliament improve the quality of life in Ghana by using data to oversee progress towards the SDGs and other national and international development frameworks.

In recent years, the role of parliament and the MPs in particular has come into sharper focus, with varying degree of perspectives from citizens, especially in the area of representation. Often, MPs are overwhelmed with demands from constituents to provide resources for the welfare of individuals and services that ought to be provided through local government. How much of this support is based on evidence on the development trajectory of the constituency? The Constituency Profile is therefore an attempt to document evidence through time series data analysis to provide background or context to the development needs of constituencies. This is the first attempt to compile time series data from selected sectors for five constituencies to help shed light on the development in those sectors.

1.3 Background on Constituency

This section discusses the creation of the constituency as well as the climate and vegetation of the constituency. It must be noted that the Asante Akim Central Constituency is the same as Asante Akim Central Municipal and the two designations are used interchangeably.

1.3.1 Creation of Constituency

The Asante Akim Central Municipal Assembly which has Konongo-Odumasi as its twin capital town was created by the Legislative Instrument (L.I) 2056 in July 2012. The Assembly went through a series of status metamorphoses by first being carved out of the then Asante Akim District Council in 1988, then being elevated to a municipal status by L.I. 1907 in November 2007 and was known as Asante Akim North District Assembly till attaining the current name in July 2012. The Constituency is located in the Eastern part of the Ashanti Region and shares boundaries with Asante Akim North to the North, Juaben District to the West, Asante Akim South to the East and Bosome-Freho District to the South–West.

1.3.2 Climate

The climate is the wet semi-equatorial type. Temperatures are generally high, averaging 26° C. Temperatures as high as 30° C are recorded around March and April. There are two rainy seasons in the Municipality: May to July (peaking in the month of June) and September to November.

1.3.3 Vegetation

The vegetation in the Municipality is mostly semi-deciduous forest comprising an open forest which covers the highlands, and a closed forest covering the lowlands. However, most of the original forest has degenerated into secondary forest and grassland due to indiscriminate felling of trees, bushfires, poor farming practices, such as shifting cultivation and bush fallowing, and mining activities.

1.3.4 Society and culture

Chieftaincy remains an indispensable aspect of the culture of the people in the Constituency. This is because the chiefs still remain the custodians of culture. They help in conflict resolution, thereby contributing to the maintenance of peace in the Constituency. The Chiefs are also development partners to the Municipal Assembly. In the Constituency, Tuesdays are generally observed as taboo days on which people are forbidden to engage in any farming activities. Such days are sometimes used for communal labour that helps to sustain the environment of the communities.

1.3.5 Governance structure

The General Assembly, which is the highest decision-making body, has executive and legislative functions. The functions of the General Assembly include enacting bye-laws, approving development plans and projects, approving budgets, and managing allocation and security issues. The General Assembly is required to meet at least three times in a year. Ex-officio members are required to attend General Assembly meetings. These include the Member of Parliament, the Municipal Co-coordinating Director, the Core Staff of the Assembly, and Heads of Decentralized Departments and Zonal Councils. The governance structure of the Asante Akim Central Municipal Assembly follows the nationwide structure.

1.3.6 Local Economy

The Constituency has gold deposits and therefore benefits from industrial mining at the areas of Konongo, Odumasi and Obenimase. Small-scale mining is also undertaken by the youth in the area. The Dwease–Praaso area is extensively rich in untapped granite which has a potential for large-scale quarrying. The constituency has a few commercial banks, rural banks and micro-finance institutions.

1.4 Organization of report

The report is organized into six chapters. Chapter one deals with the introduction of the report. This chapter looks at the background of the constituency and its characteristics. The methodology is presented in Chapter Two and highlights the selection of the constituencies, data collection and analysis. Chapter Three focuses on demographic characteristics of the constituency, specifically the estimated population, its structure and distribution as well as dependency ratio. Chapter Four is devoted to thematic areas such as health, education, agriculture, water and sanitation,

electricity, road network and security. Geospatial information is also included for selected indicators. Revenue performance and expenditure are discussed in Chapter Five. The chapter deals with revenues from Common Fund, Internal Generated Fund and other sources as well as annual budgetary allocation and releases. The chapter further highlights the constituency's budgets allocation and expenditure on the SDGs while Chapter Six presents the summary and recommendations.

CHAPTER TWO

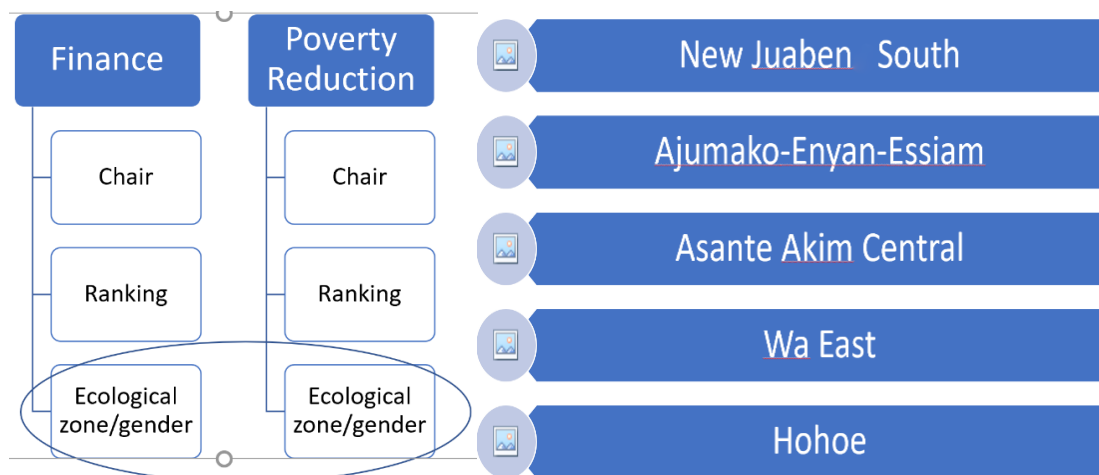
METHODOLOGY

2.1 Introduction

Ghana has a unicameral Legislature composed of 275 Members of Parliament from single-member constituencies with an Executive President. Out of the 275 constituencies, five were selected for the Data for Accountability Project's constituency profiles. This chapter provides an overview of the selection of constituencies and how data were compiled for the publication.

2.2 Criteria for selection

The Data for Accountability Project targeted the constituencies of members of two sub-committees of the 7th Parliament of Ghana. These were the Finance Committee and the Committee on Poverty Reduction. To ensure fairness in the selection process, the project team used a criterion of proportional representation of the parties in parliament.



For the Finance Committee, including the chair and ranking members were selected and a third member in the forest ecological zone was included. Regarding the Committee on Poverty Reduction, both the chair and the ranking members were from the Savannah ecological zone (Upper West and East respectively). The team therefore dropped the constituency of the ranking member and selected another from within the political party of the ranking member whose MP was a female. The constituencies selected for the project were: New Juaben South in the Eastern Region, Ajumako-Enyan-Essiam in the Central Region and Asante Akim Central in the Ashanti Region. The rest were Wa East in the Upper West Region and Hohoe in the Volta Region. All five selected constituencies were in alignment with their districts which are the planning authorities, therefore making it easy for data compilation.

2.3 Method of data compilation

The project focused on compiling data on key selected sectors of the Metropolitan, Municipal and District Assemblies (MMDAs) based on data availability. To ensure consistency across all five districts/constituencies data templates were developed for the selected sectors to guide data collection. A series of review sessions and an orientation was provided for a team from GSS staff that led the data collection. Data for the preparation of the report were basically secondary/administrative data covering a ten-year period from 2009 to 2019. Where data was available for the year 2020, it was also included. This offered an opportunity to analyze trends on key issues of interest.

2.4 Data availability

Generally, data was available for most districts but was not well disaggregated in the format needed. All the departments had some data but not for all the variables needed. For the Asante Akim Central Constituency however, data was available for most of the selected departments, but not well disaggregated in the format needed. The data requested was for the period 2009 to 2020. However, not all the departments were able to provide data for all the years required, while others could only provide an aggregated data for the period. This made it difficult to have a trend analysis of the indicators involved. Again, data collection for most departments was delayed, because most of the decentralized departments for the constituency were sited outside the district capital and in some cases, they depended on the regional office for data. In fact, in a few cases, some departments were reluctant to provide information, and this contributed to the overall delay in data collection. In all, 13 departments were consulted for data.

CHAPTER THREE

DEMOGRAPHIC CHARACTERISTICS

3.1 Introduction

Population composition is a demographic snapshot of a population based on the birth rate, migration and mortality. Population composition or characteristics can be represented in diverse ways such as age and sex distribution, population size, composition and age-sex structure are critical in understanding the components of the population. It also helps to understand the variations and changes in fertility, mortality and migration dynamics of any country. The age-sex structure is useful for population projections. A country's population composition, for example, greatly influences its needs and wellbeing. The objective of this chapter is to analyse the size, composition, distribution, age-sex structure and sex ratio of the population of the Asante Akim Central Constituency based on the 2020 projected population.

3.2 Population size, age and sex distribution

Age and sex are the most basic characteristics of a given population. Every population different age and sex composition signifying the number and proportion of males and females in each age group. This structure can have considerable impact on the population's current and future social and economic situation (PRB's Population Handbook, 2011).

The 2020 projected population of Asante Akim Central Constituency stood at 89,261, an increase of about 21% from the 2010 population of **70,717** (Table 3.2.1). The population is made up of **43,959** males (49.2 percent) and 45302 females (50.8 percent).

Table 3.2.1 Population distribution (2010-2020)

Age groups	2010 (actual)				2020 (estimated)			
	Both Sexes		Male	Female	Both Sexes		Male	Female
	Number	Percent	Number	Number	Number	Percent	Number	Number
All Ages	70,717	100.0	33,643	37,074	89,261	100.0	43,959	45,302
0-4	9,989	14.1	4,987	5,002	12,470	14	6,375	6,095
5-9	8,945	12.6	4,639	4,306	11,140	12.5	5,906	5,234
10-14	9,078	12.8	4,429	4,649	10,194	11.4	5,145	5,049
15-19	7,776	11	3,979	3,797	9,136	10.2	4,826	4,310
20-24	6,589	9.3	2,885	3,704	7,841	8.8	3,736	4,105
25-29	5,754	8.1	2,520	3,234	6,959	7.8	3,360	3,599
30-34	4,594	6.5	2,115	2,479	6,029	6.8	2,912	3,117

35-39	3,741	5.3	1,755	1,986	5,059	5.7	2,434	2,625
40-44	3,104	4.4	1,475	1,629	4,243	4.8	2,022	2,221
45-49	2,691	3.8	1,204	1,487	3,906	4.4	1,750	2,156
50-54	2,358	3.3	992	1,366	3,109	3.5	1,350	1,759
55-59	1,714	2.4	778	936	2,901	3.3	1,298	1,603
60-64	1,444	2.0	681	763	2,046	2.3	986	1,060
65-69	950	1.3	414	536	1,635	1.8	741	894
70-74	1,105	1.6	454	651	1,091	1.2	501	590
75-79	616	0.9	265	351	689	0.8	314	375
80+	269	0.4	71	198	813	0.9	303	510

3.3 Age-Sex Structure

A population pyramid is a graphical illustration of the distribution of the age-sex structure in a population. The shape of the pyramid is influenced by the levels of fertility, mortality and migration. The broadness of the base is determined by the level of fertility, while the narrow apex is determined by mortality and to some extent, migration. This type of pyramid normally depicts the age-sex population structure of a developing country.

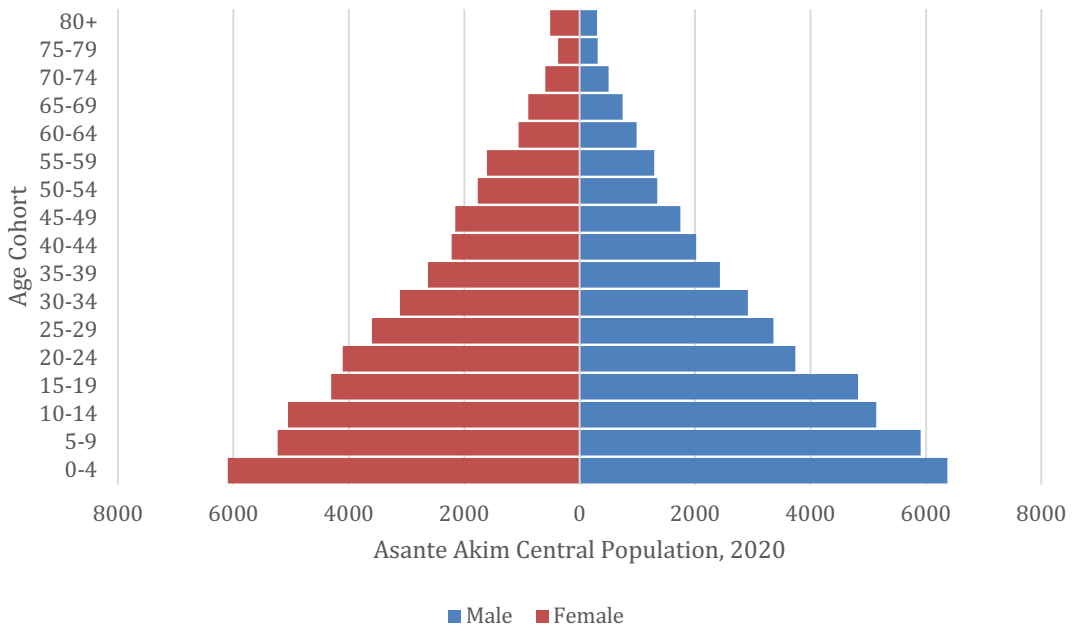


Figure 3.3.1: Population pyramid

Figure 3.3.1 illustrates the age-sex structure of the population of Asante Akim Central. The broad base of the pyramid depicts a younger population consisting of large numbers of children

while the narrow apex signifies a small older population. This has implications for the economic development of the district.

3.4. Dependency ratio

The age-dependency ratio is the ratio of the dependent-age population (those under age 15 and above age 64 years) to the working-age population (15 to 64 years). The age-dependency ratio is often used as an indicator of economic burden that the productive portion of a population must carry. Countries with very high birth rates usually have the highest age-dependency ratios because of the large proportion of children in the population. The higher the dependency ratio, the more a potential worker in the working class is assumed to be supporting and vice-versa.

Table 3.4.1 shows the age dependency ratio for the constituency to be 74.2. This means that 74 persons in the inactive population group (child 0-15 years and old age 65+ years) are dependent on 100 persons in the active population group (population between 15 and 64 years). This represents a decrease on the 2010 dependency ratio of 77.8, which means the working population group are less burdened in 2020 as compared with 2010, since one person in the active group takes care of less persons in the inactive population.

Table 3.4.1: Age dependency ratio

Age group/ratio	2010	2020
All Ages	70,717	89,261
0-14	28,012	33,804
15-64	39,765	51,229
65+	2,940	4,228
Total dependency ratio	77.8	74.2
Child dependency ratio	70.4	66.0
Old age dependency ratio	7.4	8.3

3.5 Population projections

Population projection gives a picture of what the future size and structure of the population by sex and age might look like. It is based on knowledge of the past trends and is used to predict future trends based on assumptions made for three components: fertility, mortality and migration. Population projection is important to policy-makers, government and researchers, because it helps in planning for the future. Population projections are useful in estimating the basic needs of the human population, such as demand for food, water, power, transportation, schools etc.

Figure 3.3.2 shows the population projection of the Asante Akim Central constituency with the base year being 2010 PHC. From the graph it is seen that the population of the constituency increased steadily over the years. The figure shows that the population of females was consistently higher than the male population for the entire period under review.

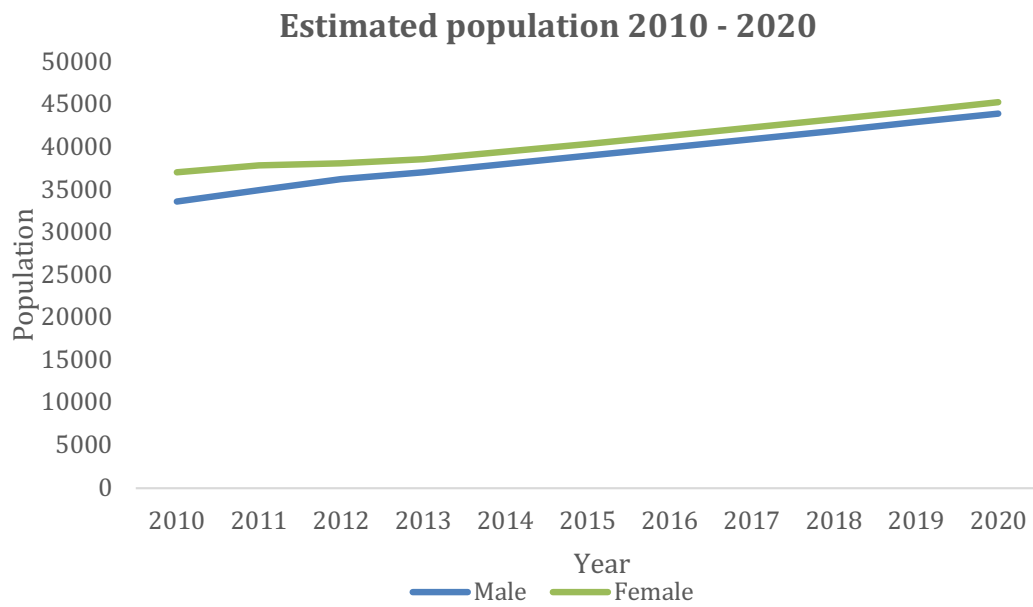


Figure 3.3.2: Population projection

CHAPTER FOUR

KEY THEMATIC AREAS

4.1 Introduction

Key thematic areas such as health, education, food and agriculture, water and sanitation, electricity, the road network, as well as issues of security in the constituency are discussed in this chapter. The chapter also presents geospatial information on the constituency.

4.2 Health

Health is defined by the World Health Organization (WHO) as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, and political belief, economic or social condition. This is clearly articulated in SDG goal 3 “To ensure healthy lives and promote well-being for all at all ages”.

4.2.1 Health facilities

Most health services are provided in hospitals, clinics and medical centers run either by the government or the private sector. Health facilities play a very significant role in the treatment of diseases and mitigation of disasters because of their particular function of treating illnesses injuries, and of handling outbreaks of diseases. Health delivery in most part of the district is through Health Centers.

The Asante Akim Central constituency data did not indicate the availability of public clinics from 2012-2016. However, private clinics have been available throughout the period 2012-2019 in the constituency. Public health centers were dominant throughout 2012-2017, with the CHPS compound system taking over slightly from 2018-2019. All the health centers are Public-owned, while the clinics are privately owned.

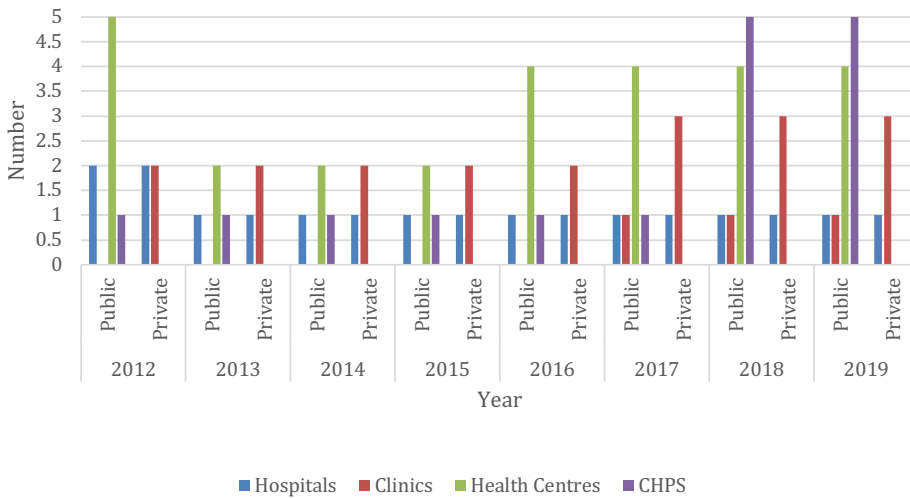


Figure 4. 2.1: Number of Health facilities

4.2.2 Number of Health Physicians

Health professionals play a central and critical role in improving access and quality of health-care for the population. They provide essential services that promote health and prevent diseases. They also deliver health-care services to individuals, families and communities based on the primary health-care approach.

Figure 4.2.2 shows the number of physicians, in the Asante Akim Central constituency. The data covers health physicians in both public and private health facilities. The number of health physicians in the public health facilities was static over the period 2012-2017.

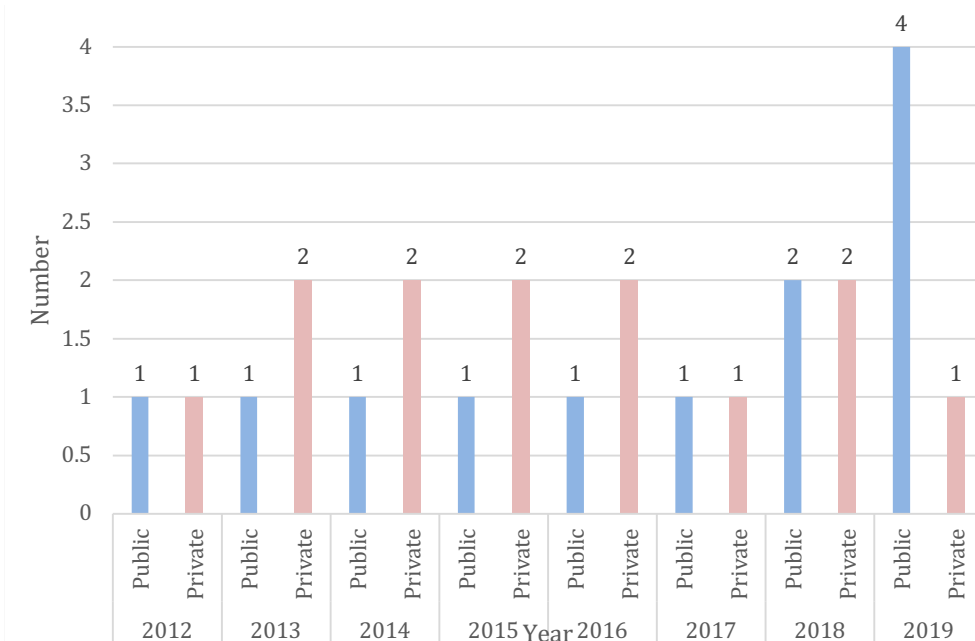


Figure 4 2.2: Number of physicians by sector

4.2.3 Number of pharmacists per sector

Figure 4.2.3 shows the number of pharmacists in the Asante Akim Central constituency. This consists of pharmacists in both public and private health facilities. The number of pharmacists in public health facilities remained the same over the years with the exception of 2015.

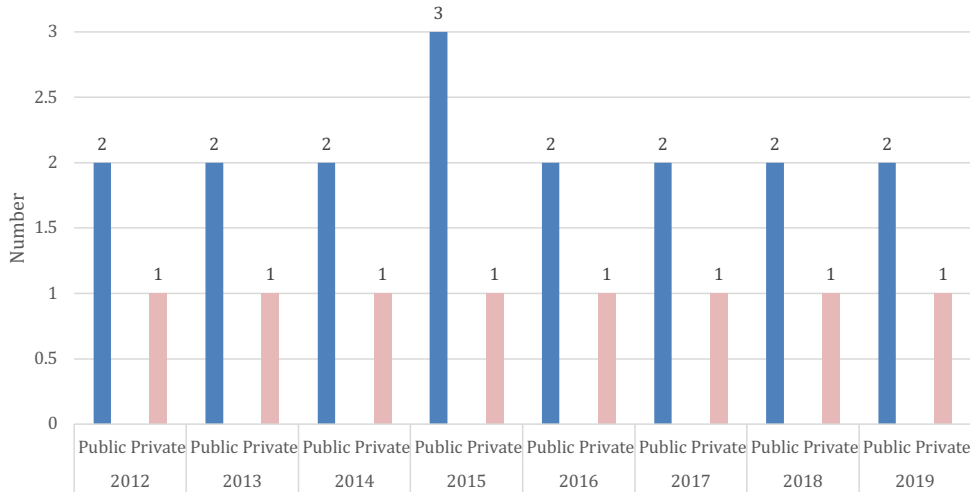


Figure 4. 2.3: Number of pharmacists by sector

4.2.4 Access to and use of health-care during pregnancy

Figure 4.2.4 shows that antenatal care (ANC) coverage was about eight out of 10 pregnant women in the constituency. This suggests that the Constituency did not make significant progress in the five-year period.

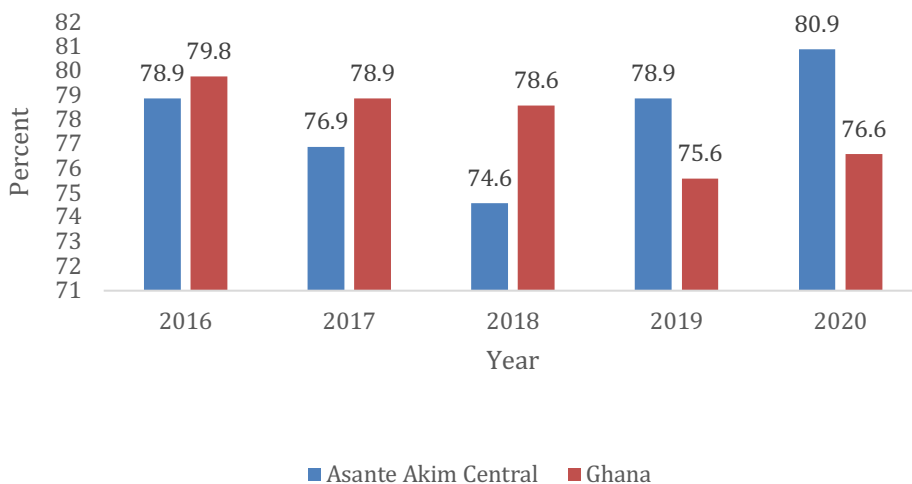


Figure 4. 2.4: Access to and use of health-care during pregnancy (ANC coverage)

4.2.5 Teenage pregnancies among ANC attendees

Over the past five years the proportion of teenagers among ANC attendees was relatively stable and slightly higher than the national average.

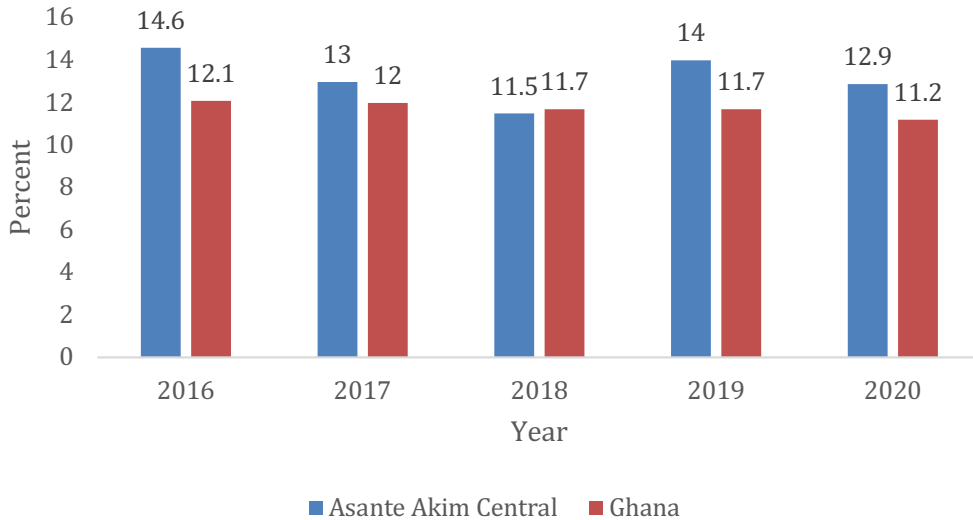


Figure 4.2.5 Teenage pregnancies among ANC attendees

4.2.6 Accredited Professionals trained to conduct deliveries

Figure 4.2.6 shows the percentage of deliveries conducted by skilled professionals trained to conduct deliveries. Generally, the percentage of deliveries attended to by trained health personnel increased marginally and stalled in the last three years.

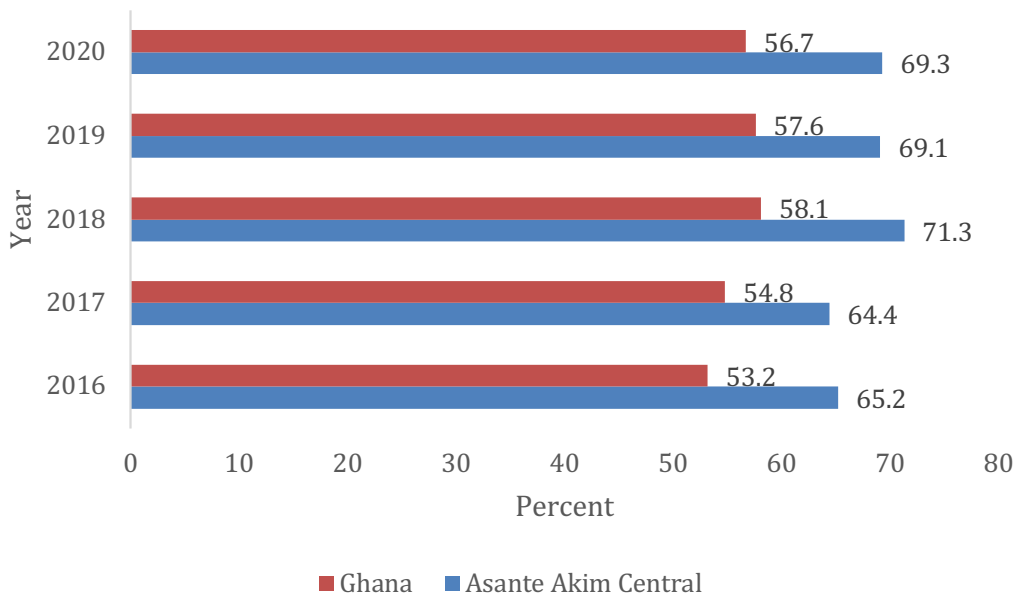


Figure 4.2.6: Accredited Professionals trained to conduct deliveries

4.2.7 Institutional Maternal Mortality Ratio

In the year 2016 about 93 maternal deaths out of every 100,000 live births occurred in health facilities in the constituency (Figure 4.2.7). For the subsequent years that data was available, significant progress was seen as the numbers declined by more than half.

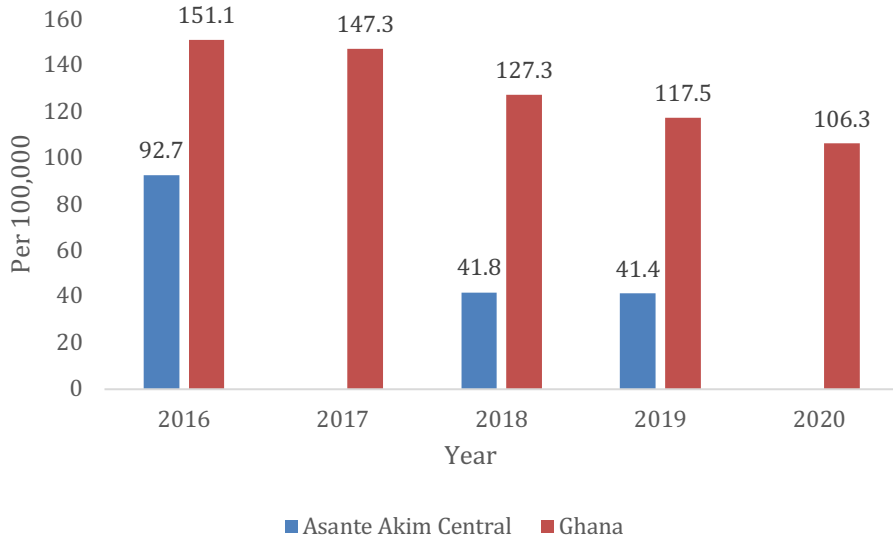


Figure: 4.2.7 Institutional Maternal Mortality Ratio

4.2.8 Under-five mortality

Figure 4.2.8 presents under-fives’ death rates in health facilities. This is the probability of children dying between birth and exactly age five, expressed per 1000 live births in a given year in health facilities. Generally, under-five mortality has been low with some improvement over the last five years.

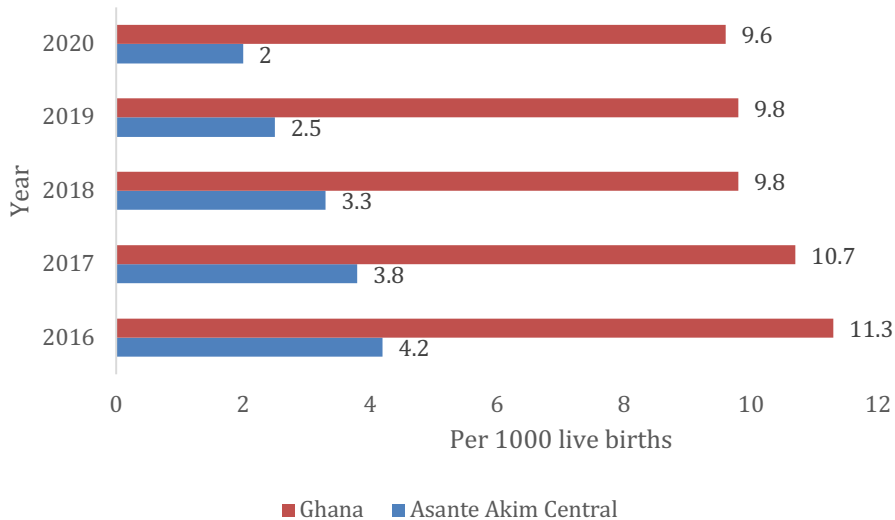


Figure 4.2.8 Under-five mortality rate

4.2.9 Institutional infant mortality

Figure 4.2.9 shows the number of deaths per 1,000 live births of children under one year of age which occurred in health facilities. It can be noted that the probability of dying within the first year of life is low in the constituency.

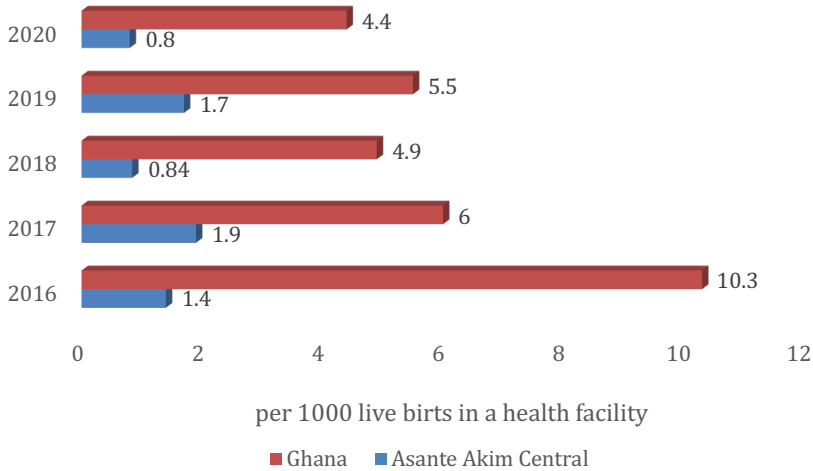


Figure 4.2.9: Institutional infant mortality rate

4.2.10 Frequency of OPD attendance

Overall, the frequency of OPD attendance per person in a year in the constituency saw some decline as the years progressed although it was still high in 2020. 2016, 2017 and 2018 show a one-time OPD attendance per person in the constituency in a year. This implies that OPD attendance per person in a year was never more than once per person. This could mean that people in the constituency did not easily fall sick or when sick they did not seek medical treatment at the orthodox health facilities where OPD routine checks are followed.

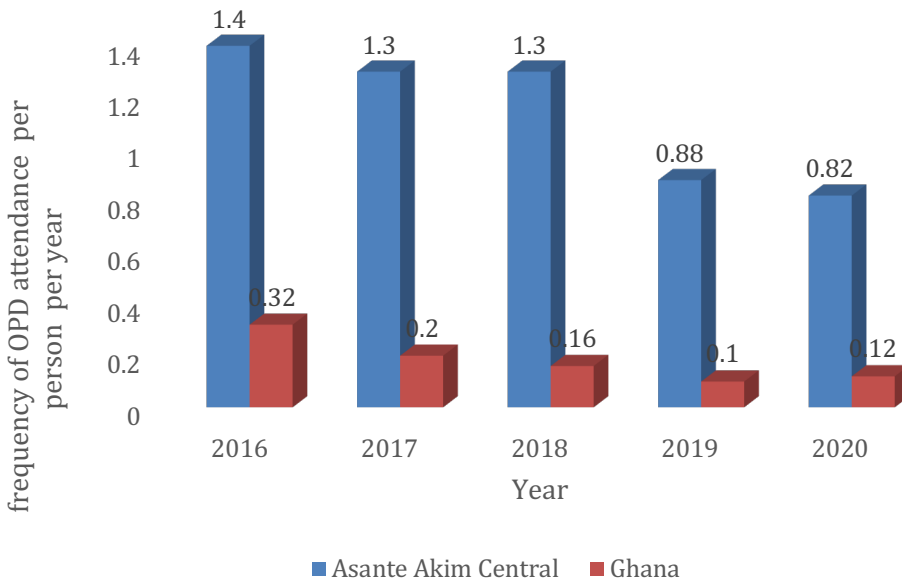


Figure 4.2.10: OPD attendance per capita

4.2.11 Number of still births

Figure 4.2.11 shows the number of deliveries that did not show any sign of life per every 1000 births, otherwise referred to as still births. *Still birth rate* is defined as the number of babies born with no sign of life at 28 weeks or more of gestation, per 1,000 total births per year.

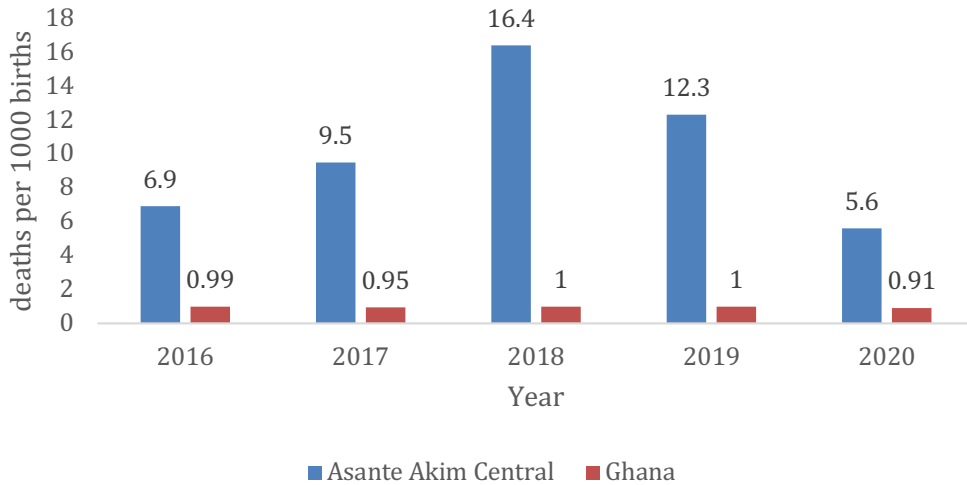


Figure 4.2.11: Still birth rate

4.2.12 Penta3 vaccination

The Constituency had a high vaccination rate for Penta3. In 2020 only three out of every 100 children below one year of age missed the vaccination.

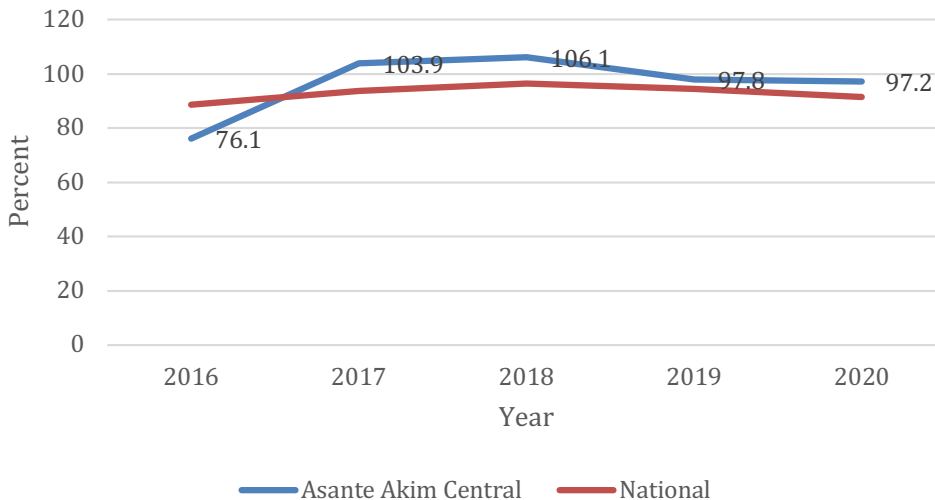


Figure 4.2.12: Penta3 coverage for infants under 1 year

4.2.13 Institutional cases of pregnant women with anaemia

Anaemia is a condition characterized by a reduction in the red blood cell volume and a decrease in the concentration of haemoglobin in the blood. Haemoglobin is necessary for transporting oxygen to tissues and organs in the body. Figure 4.2.13 shows the number of pregnant women who reported at a health facility with anaemia in the constituency.

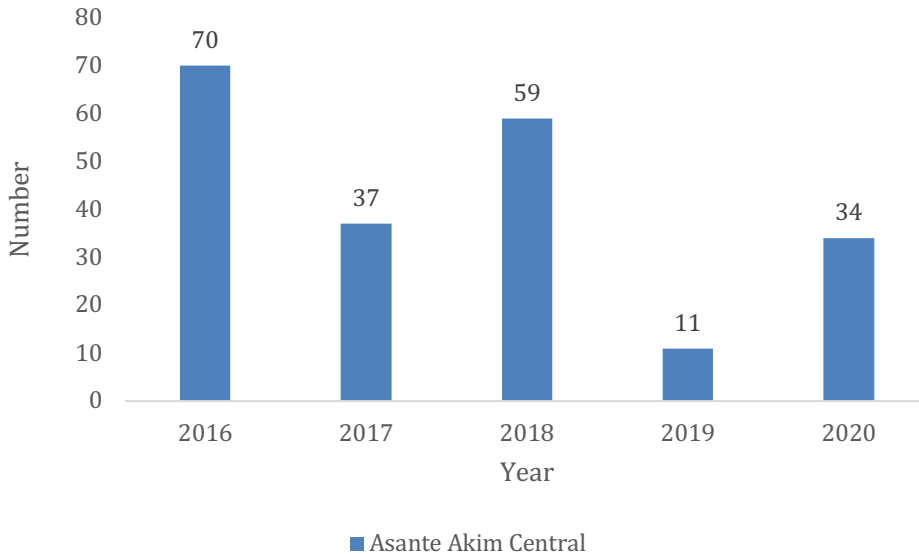


Figure: 4.2 13: Number of pregnant women who reported at a health facility with anemia

4.2.14 Annual hypertension cases

High blood pressure, or hypertension, is one major risk for cardiovascular disease. The year 2019 recorded the least number of reported cases of hypertension (Figure 4.2.14).

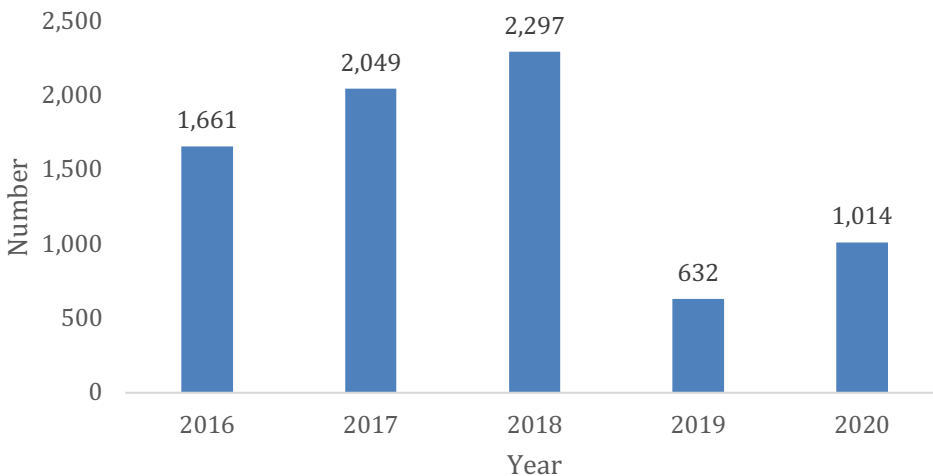


Figure: 4.2 14: Annual hypertension cases

4.2.15 Annual diabetes cases

Diabetes is a chronic disease that occurs either when the pancreas does not produce enough insulin or when the body cannot effectively use the insulin it produces. Figure 4.2.15 shows the number of annual diabetes cases reported to health facilities in the constituency.

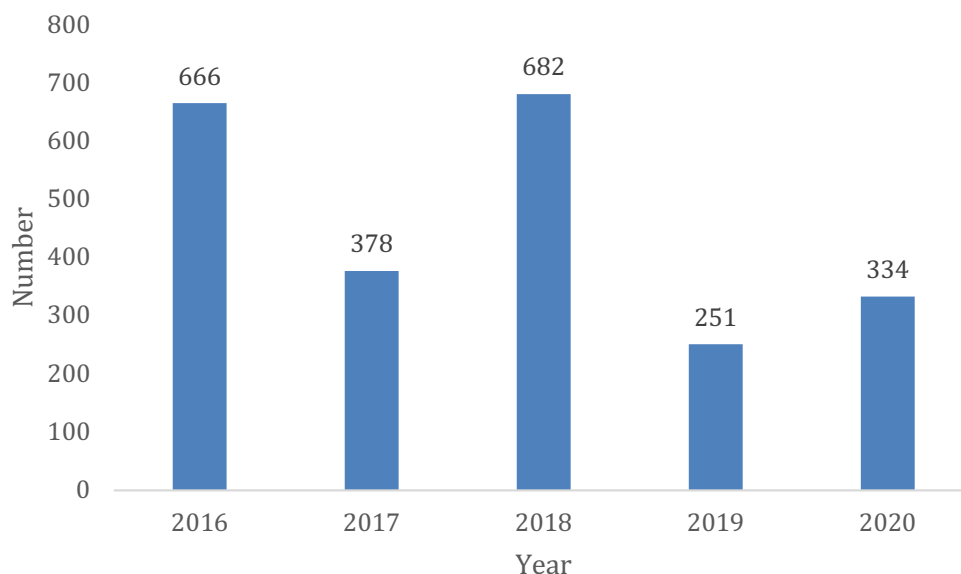


Figure: 4.2. 15: Annual diabetes cases

3.1.16 Out-patients attendance with valid health insurance

Figure 4.2.16 presents information on the percentage of out-patients who attended a health facility OPD with valid health insurance. Generally, most ODP attendees have a valid health insurance but a decline is observed in the last two years under review.

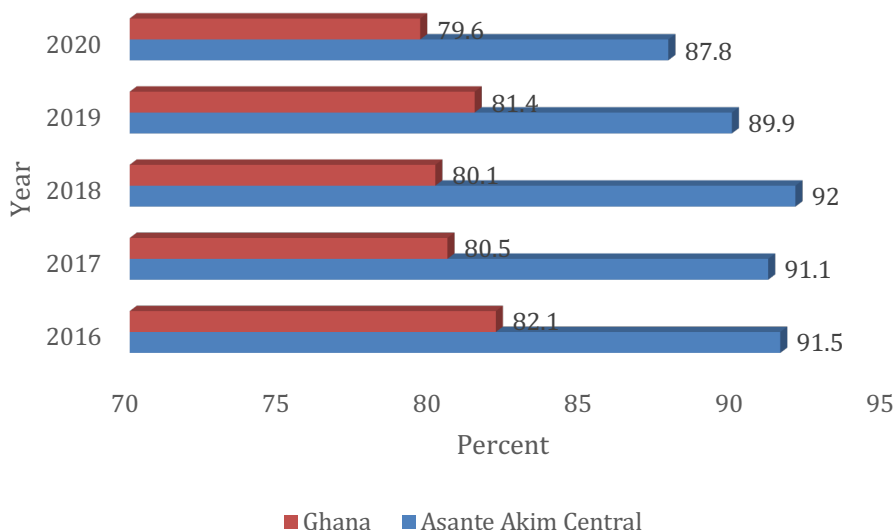


Figure: 4.2.16. Percentage of out-patients who attended a health facility with valid health insurance

4.2.17 Health facility attendees that tested HIV positive

Figure 4.2.17 shows clients who tested HIV positive (HTC) in health facilities. 2017 accounted for the highest number (353 persons) who tested HIV positive. No data was reported for 2020.

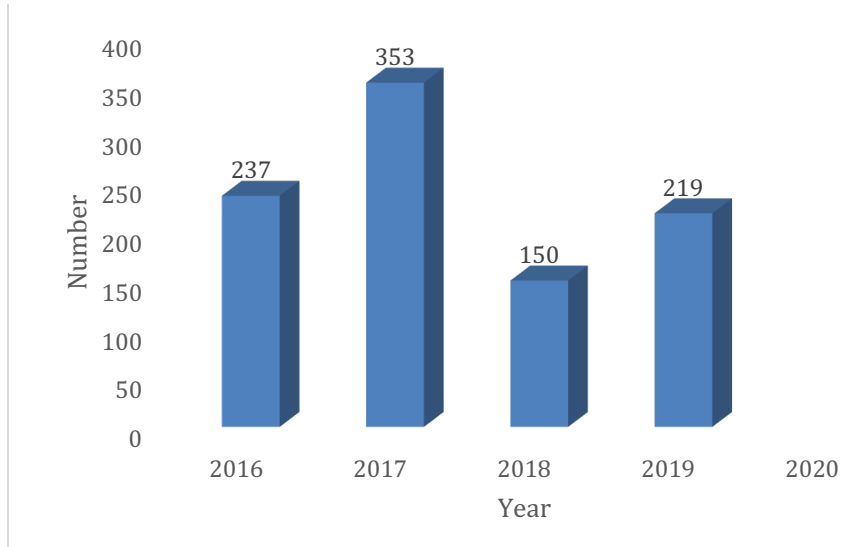


Figure: 4.2.17: Number of health facility attendees that tested HIV positive

4.2.18 HIV-positive patients screened for TB

Figure 4.2.18 displays HIV-positive patients who were screened for TB. The number of HIV positive patients who were screened for TB in the constituency over the years steadily increased over the years.

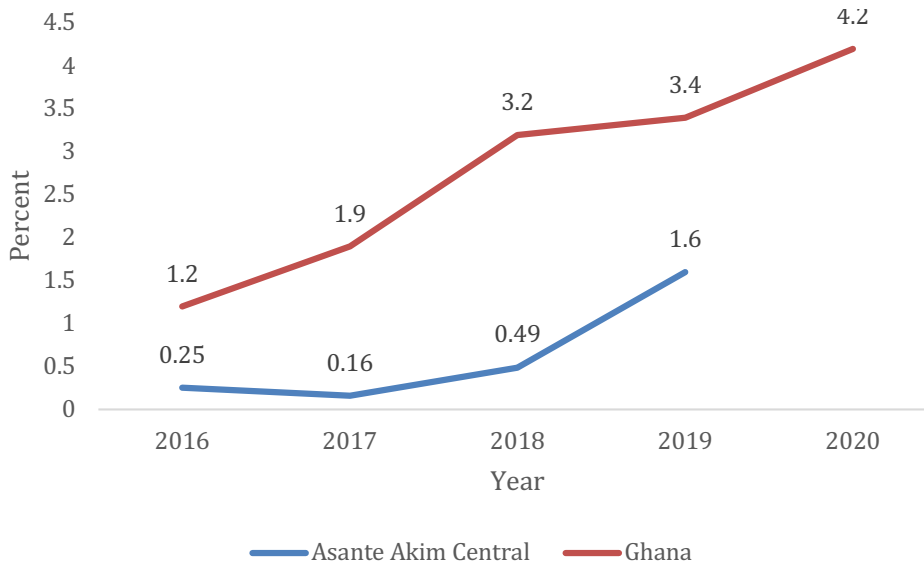


Figure: 4.2.18 Percentage of HIV positive patients screened for tuberculosis (TB)

4.2.19 Physician Assistants/midwifery/nurses in public health facilities

Health professionals play a central and critical role in improving access and quality of health care for the population. They provide essential services that promote health and prevent diseases, and they also deliver health-care services to individuals, families and communities based on the primary health-care approach. Figure 4.2.19 shows the number of physicians, midwives and nurses in public health facilities in the constituency.

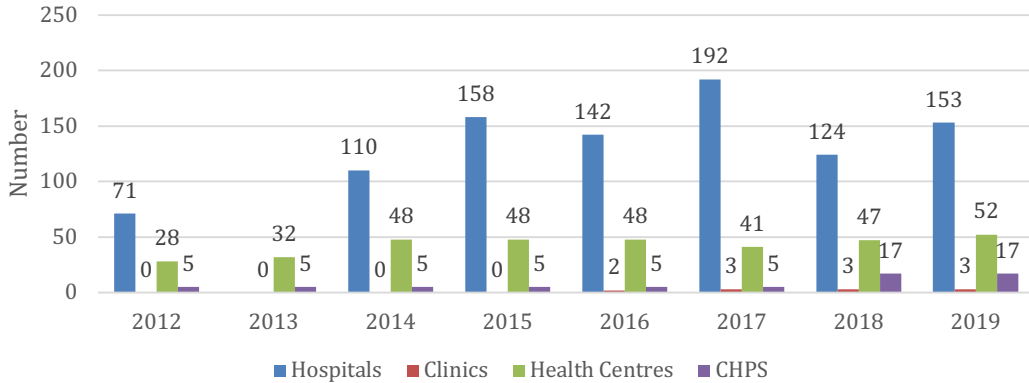


Figure 4.2.19: Number of Physician Assistants/midwives/nurses in public health facilities

4.2.20 Physician Assistants/midwives/nurses in private health facilities

Figure 4.2.20 shows the personnel in private health facilities in the Asante Akim Central Constituency.

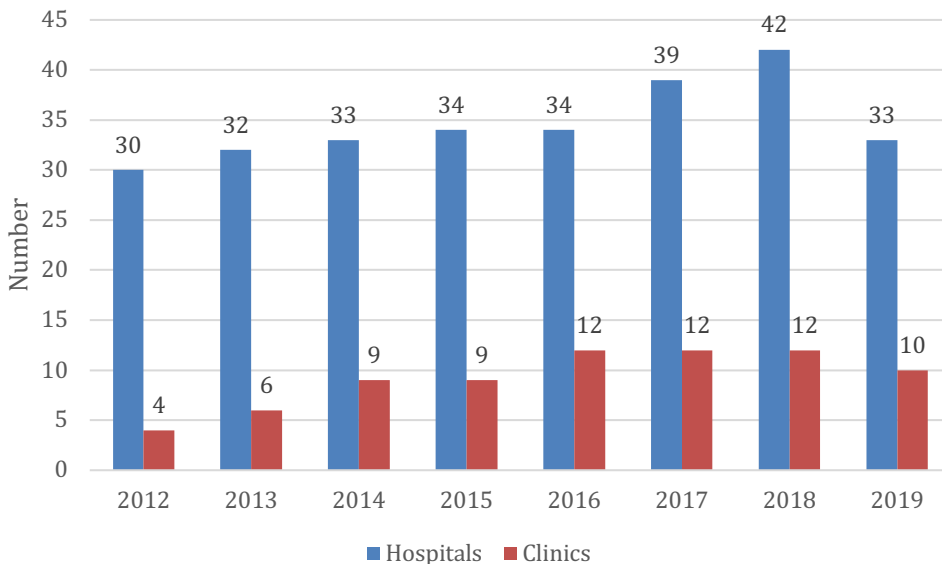


Figure 4.2.20: Number of physician assistants/midwives/nurses in private health facilities

4.2.21 Access to ambulance service by health facilities (Public and Private)

The availability of ambulance services at health facilities is critical for ensuring effective and efficient delivery of emergency services.

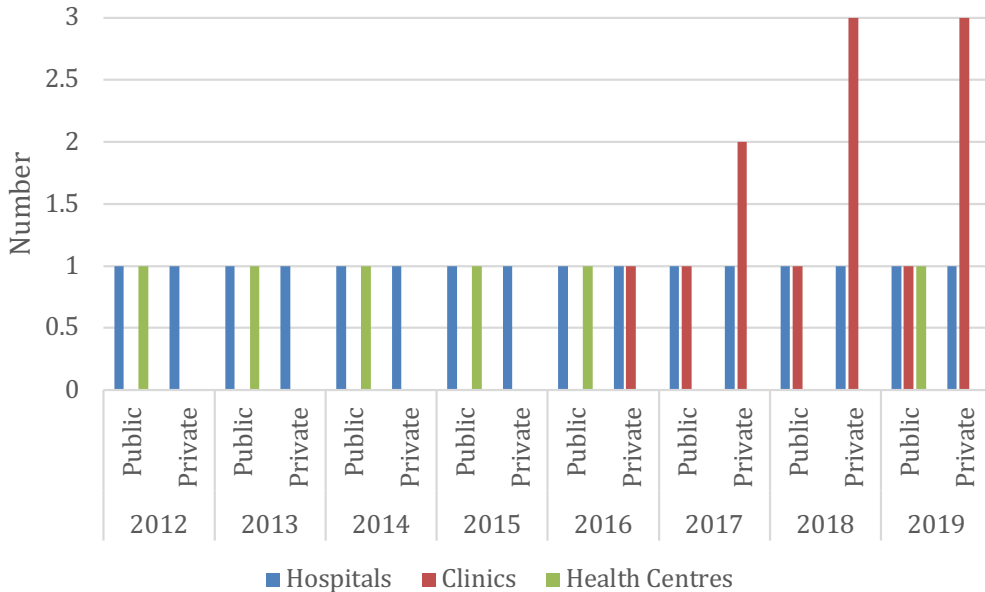


Figure 4.2.21: Number of ambulances by facility type and sector

4.2.22 Registered births under one year by location of delivery

Most births registered in the Municipality occurred in hospitals though a significant number of these registered births occurred at home.

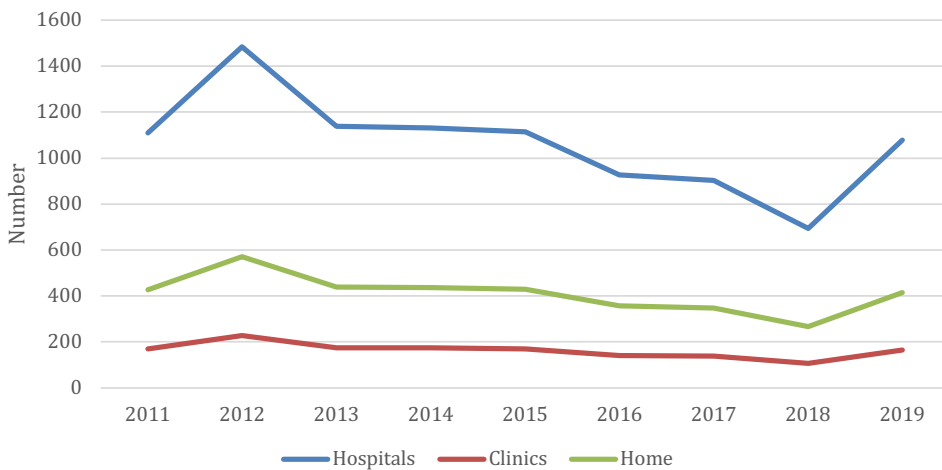


Figure 4.2.22: Registered births under one year by location of delivery

4.2.23 Registered deaths by location of occurrence

Most registered deaths occurred in hospitals, although a significant number occurred at home. This situation is very similar to that of births (Figure 4.2.22).

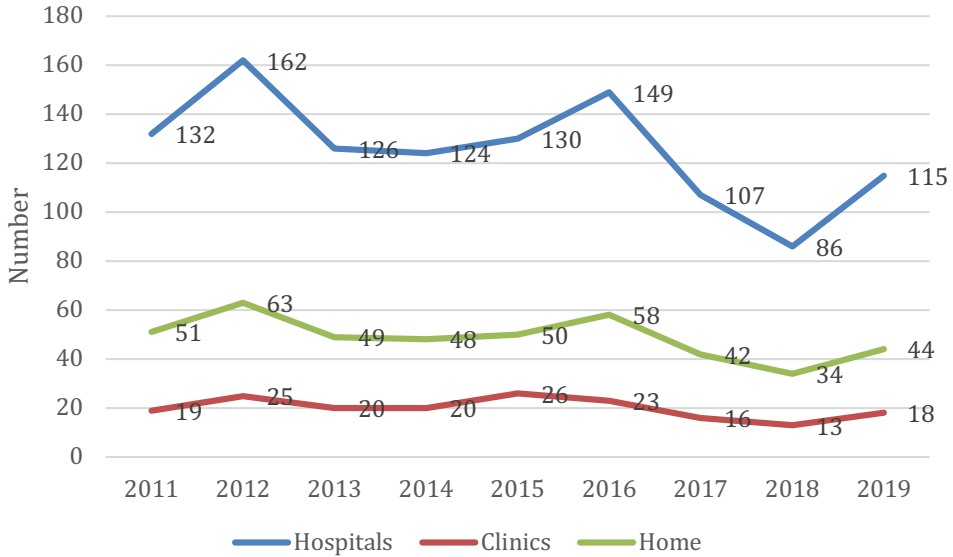


Figure 4.2.23: Registered deaths by location of occurrence

4.2.24 OPD Attendance per year

Figure 4.2.24 is a comparison of public and private OPD attendance per year. Private health facilities provided a considerable amount of OPD service in the constituency except in the year 2020.

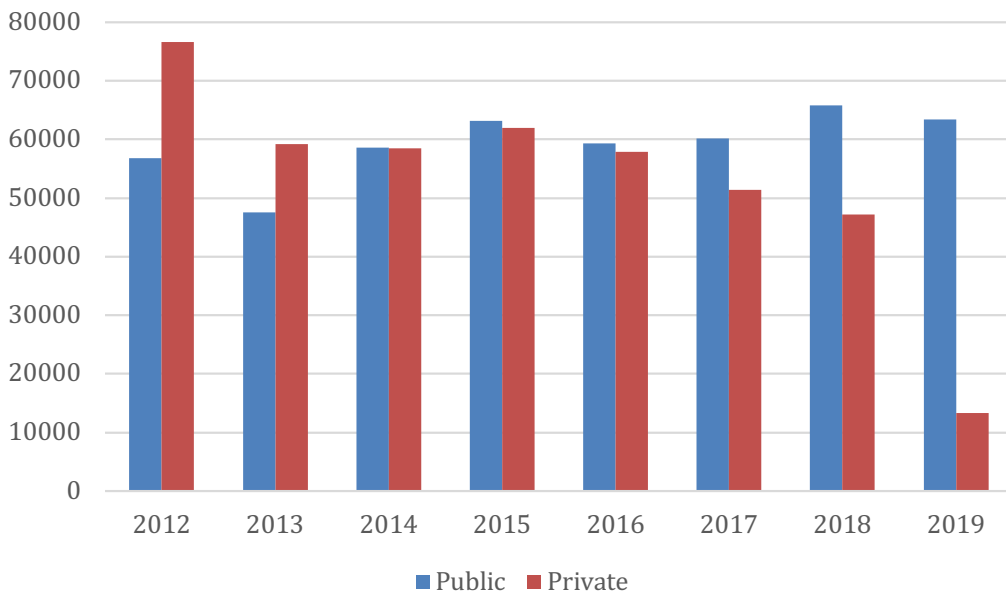


Figure 4.2.24: OPD Attendance per year

4.2.25 Admission by health facility type

As shown in Figure 4.2.25, in general, admission in public health facilities has remained relatively stable over the period. A significant decrease in admissions in private health facilities occurred from 2017 onwards.

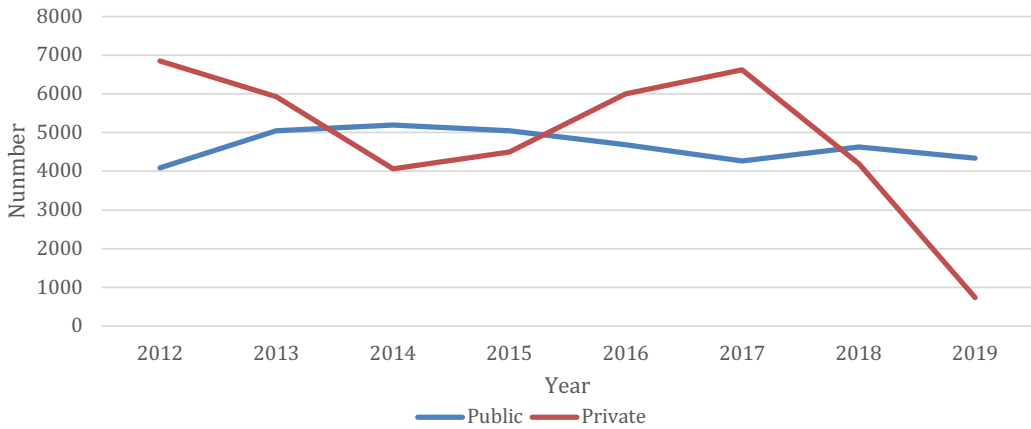


Figure 4.2.25: Hospitalizations by sector

4.2.26 Persons affected by the top 10 diseases

Figure 4.2.26 shows that the number of persons affected by the top 10 diseases was highest in 2012, totalling 96,584. Thereafter, the numbers began to decline steadily and in 2019 there was a sharp decline.

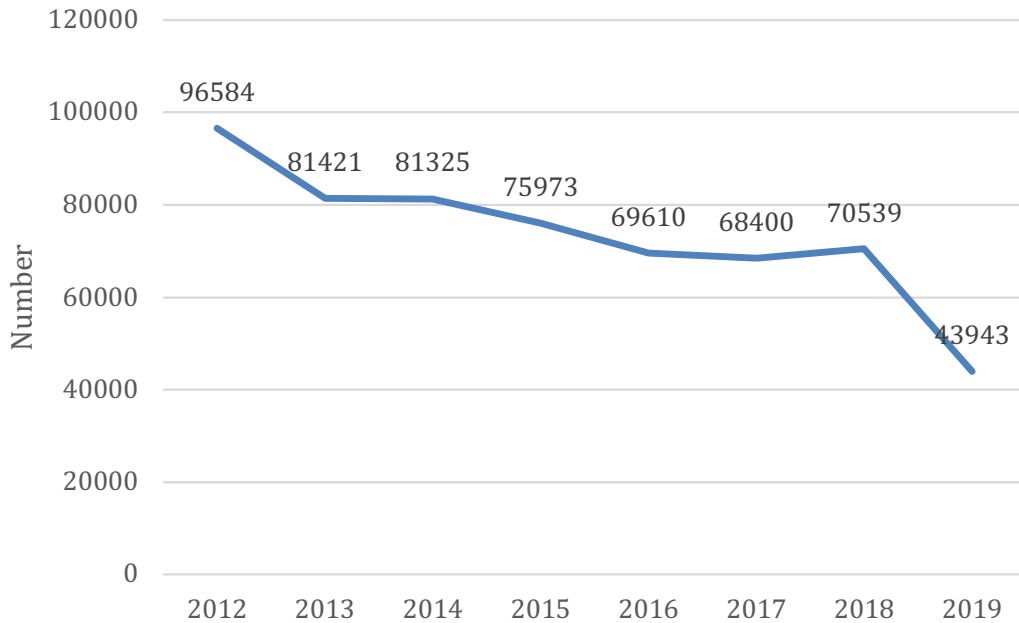


Figure 4. 2.26: Number persons affected by the top ten diseases

4.3 Education

Education aims at the total development of the human person. It is linked to SDG goal 4 which is geared to ensuring universal access to inclusive and equitable quality education and learning, leaving no one behind. For a nation to develop and advance, it is important that its citizens have access to good quality education which is aimed at the total development of the human personality and the promotion of mutual understanding, tolerance, friendship and peace. The data obtained from the constituency in relation to education was at both the basic and secondary levels and covers areas such as Net Enrolment Rate, Gross Enrolment Rate, Net Admission Rate, Gross Admission Rate, Completion Rate, Gender Parity Index, etc.

4.3.1 Gross school enrolment/admission rate

Figure 4.3.1 depicts the gross enrolment rate at the basic and the secondary levels for six academic years starting from the 2014/15 to the 2019/20 academic year.

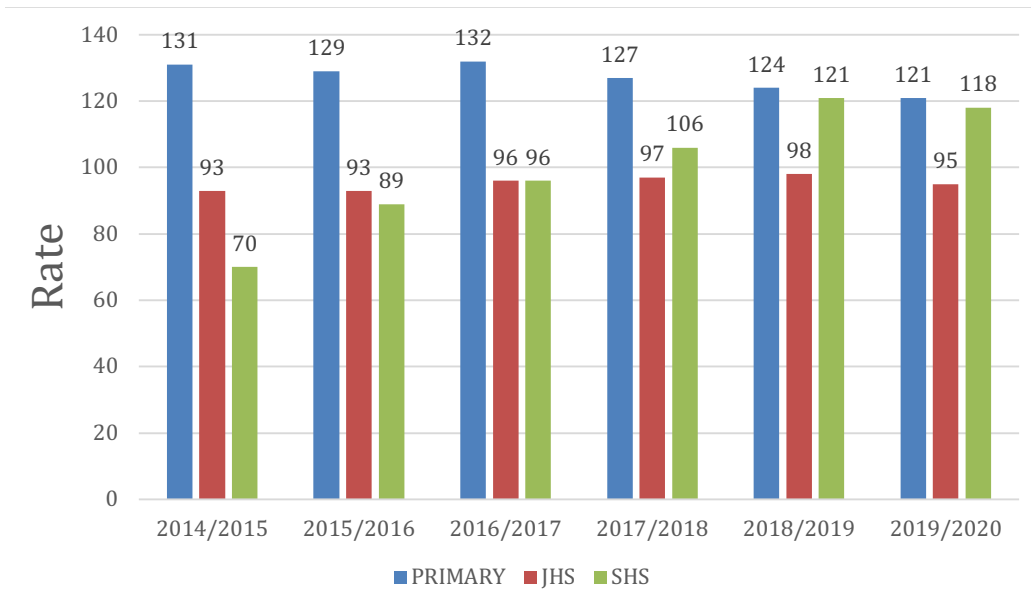


Figure 4.3.1a: Gross school enrolment rate

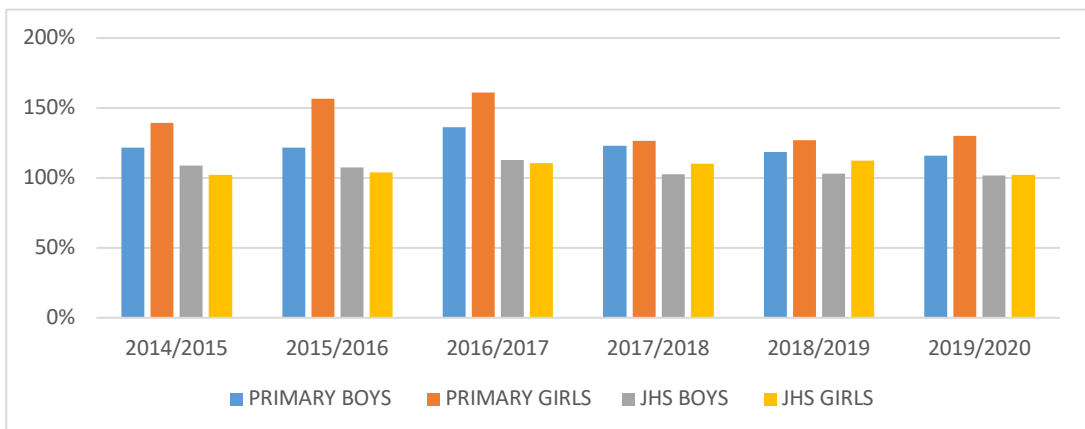


Figure 4.3.1b: Gross school admission rate

4.3.2 Net school enrolment rate

The net enrolment rate is the number of children of school-going age at a particular level of education that are enrolled at that level of education, expressed as a percentage of the total population in that age group. Figure 4.3.2 presents information on the net enrolment rate at the primary, JHS and SHS levels from the 2014/15 academic year to the 2019/20 academic year.

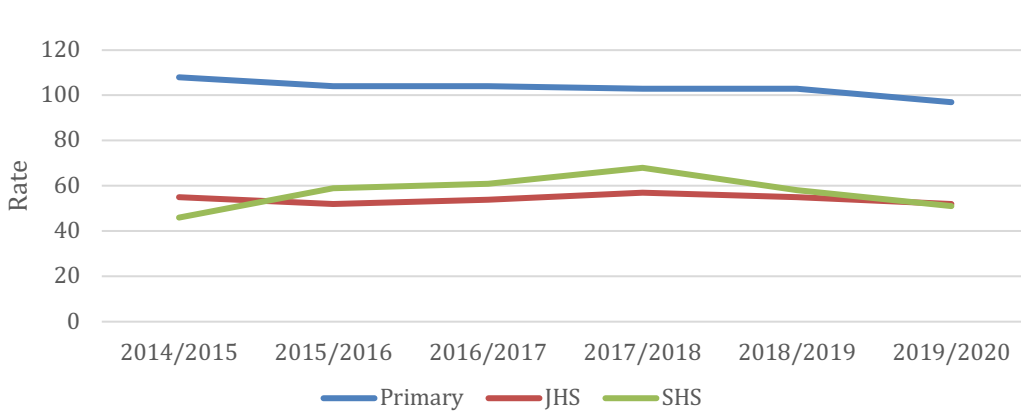


Figure 4.3.2a: Net school enrolment rate

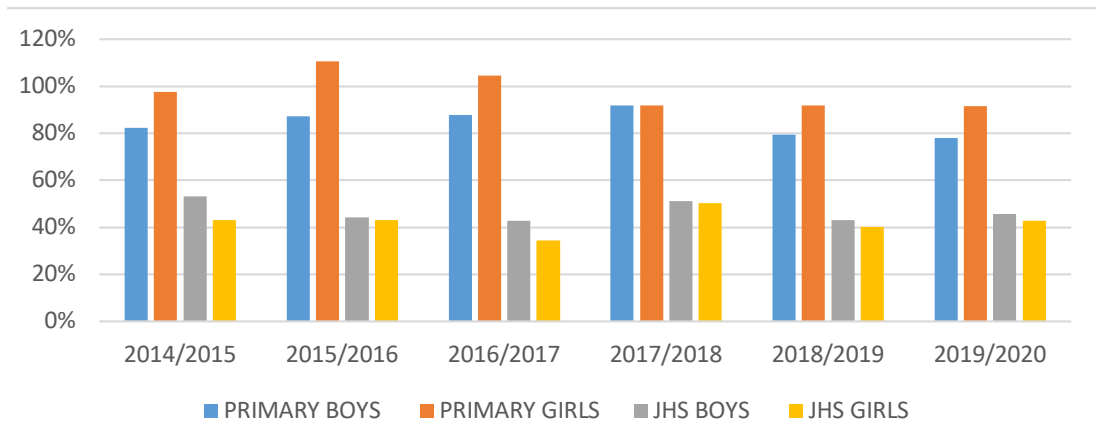


Figure 4.3.2b: Net school admission rate

4.3.3 Gender parity index

Gender parity in education at a particular level is the ratio of girls to boys at that level, a value of one indicating parity between the two groups. At the primary and SHS levels, there were more girls than boys enrolled in school. The ratio of girls to boys at JHS level is clustered around 1 indicating there is general parity at that level.

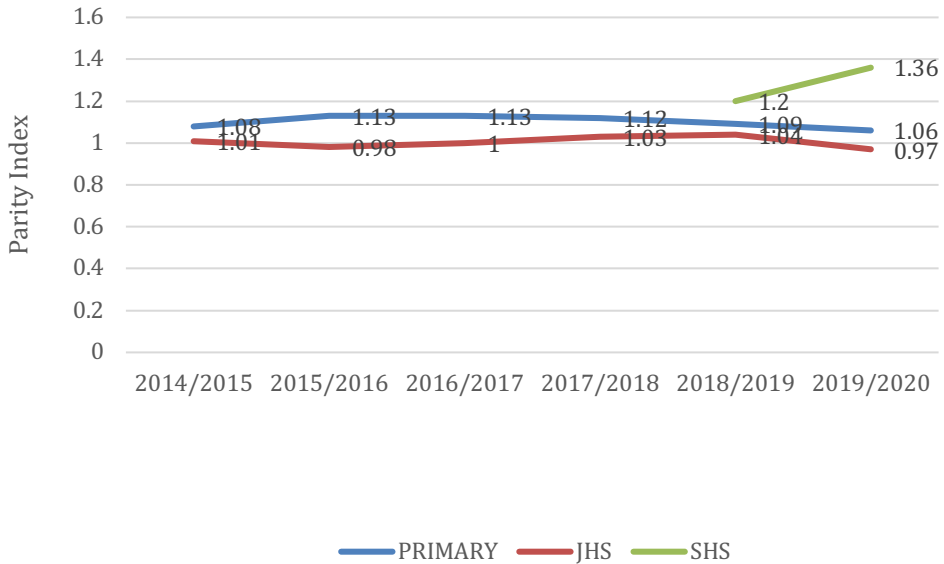


Figure 4.3.3: Gender parity index

4.3.4 School completion rate

The proportion of pupils who completed the primary level from 2015/16 to 2019/20 academic years in the constituency steadily decreased from 121 in 2015/16 to 117 for the 2018/19 academic year. At the JHS level nearly 80 percent of children who started that level of education completed it. The SHS level saw an increase in the percentage that completed that level. The trend suggests that students from other areas may have completed SHS in the constituency.

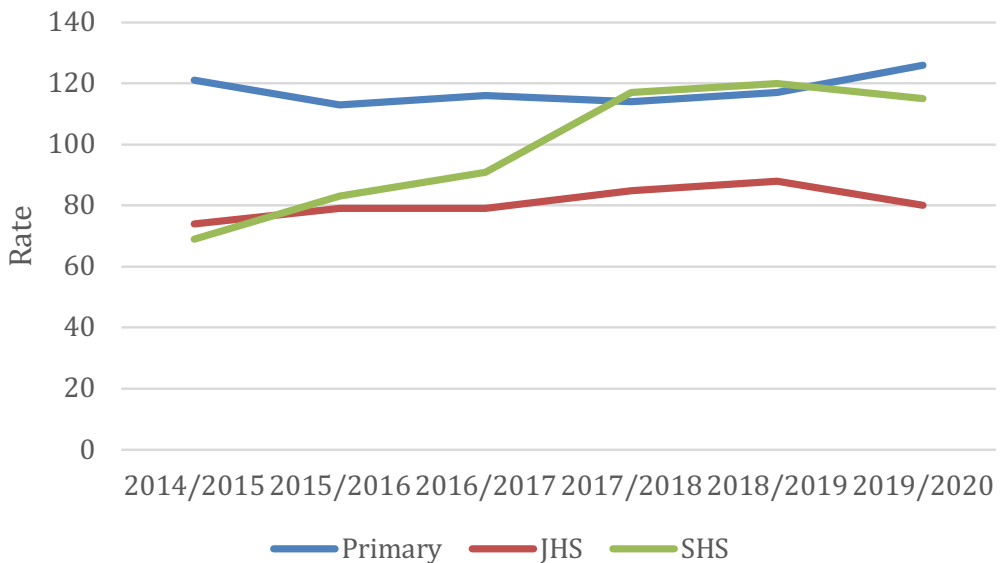


Figure 4.3.4: School completion rate

4.3.5 BECE and WASSCE core subjects passed

Consistently in the six years from 2014 to 2020 a high percentage of students passed the core subjects in the BECE examinations although a marginal decline is observed in last two years.

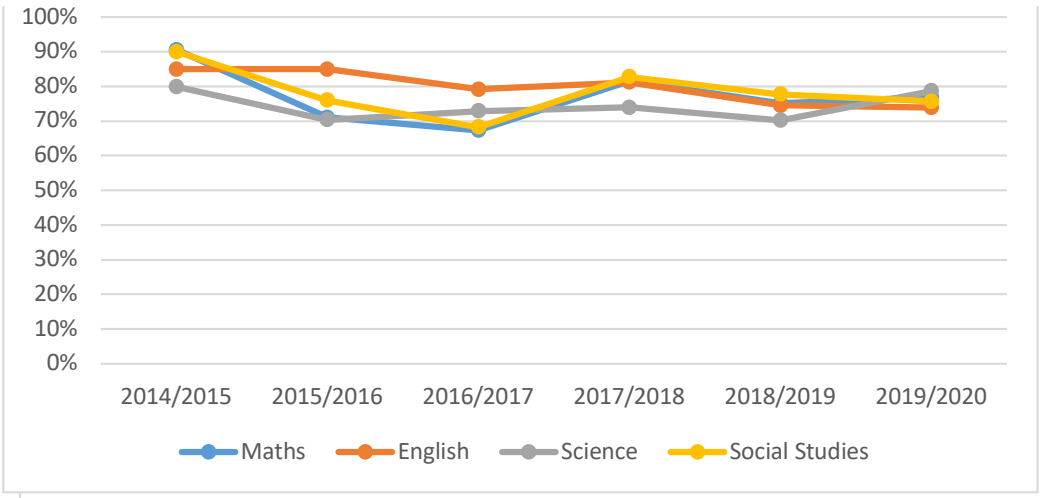


Figure 4.3.5a: BECE passes in core subject

No substantial difference is seen in the BECE performance for the core subjects according to the sex of students.

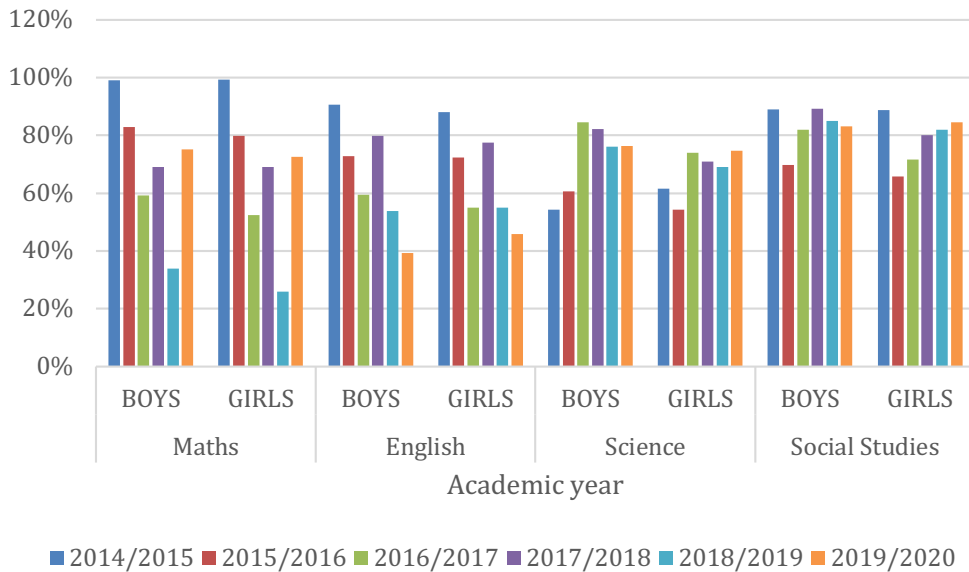


Figure 4.3.5b: BECE passes in core subject by sex

Students’ performance in the WASSCE core subjects has generally not been consistent. *Mathematics* that was best-performing in the 2014/15 and the 2015/16 academic years was the worst in 2018/19, although it picked up pace again in 2020.

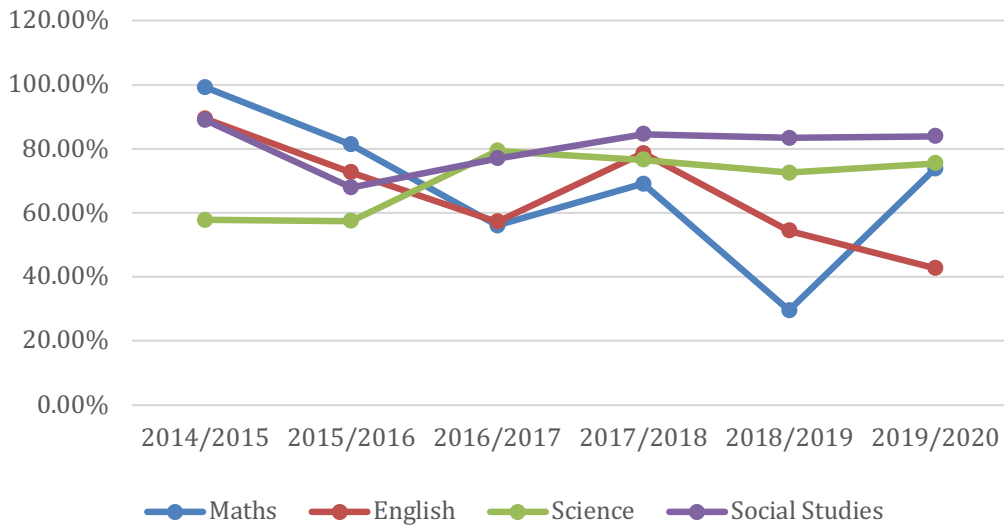


Figure 4.3.5c: WASSCE passes in core subject

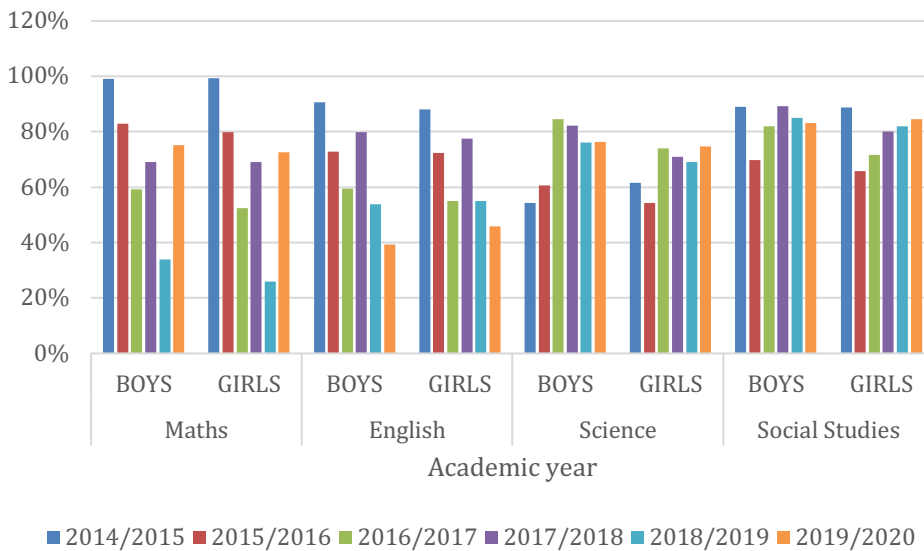


Figure 4.3.5d: WASSCE passes in core subject by sex

4.4 Environment and Forestry

Good environment and forestry management are key to human livelihood and are therefore linked to the Sustainable Development Goal 15, which is aimed at protecting, restoring and promoting sustainable use of terrestrial ecosystems, sustainably managing forests, combating desertification, and halting and reversing land degradation and biodiversity losses. One significant role of the conservation of forests is reducing the risk of natural disasters, including floods, droughts, landslides and other extreme events. For instance, at the international level, forests mitigate climate change through carbon sequestration, which contributes to the balance of oxygen, carbon dioxide and humidity in the air and protects watersheds which supply 75 percent of freshwater

worldwide. Furthermore, it is worth noting that a nation that invests in forests and forestry ends up investing in people and their livelihoods, specifically the rural poor, the youth and women (UN SDG Knowledge platform, 2015).

Forest area as a proportion of total land area in the Municipality in 2009 was 60 percent. This decreased in subsequent years to 45 percent in 2019. The proportion of degraded land as a percentage of the total land area of the Municipality in 2009 was 40 percent, and this increased to 55 percent in 2019. On the other hand, the proportion of the degraded land restored in the Municipality saw tremendous improvements from 2014 reaching 18 percent in 2019.

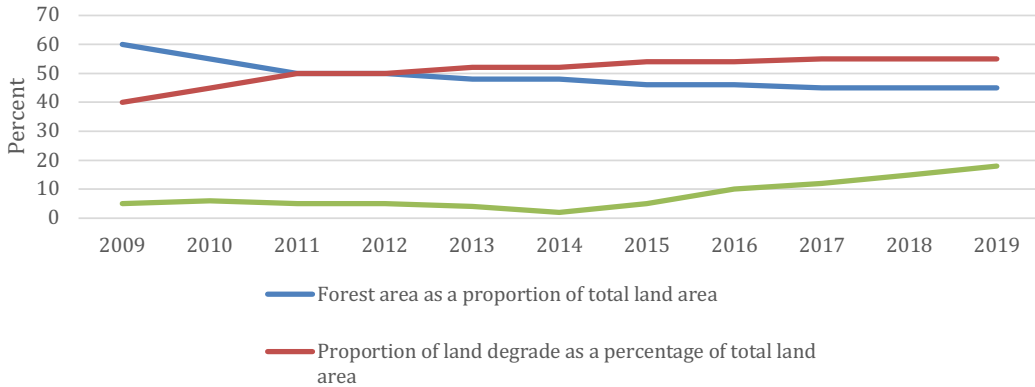


Figure 4.4: Land area degraded and area restored

4.5 Agriculture

4.5.1 Household population engaged in agriculture

Figure 4.5.1 shows that the vast majority of females in the households (91%) were engaged in field-crop farming as compared to their male counterparts, of whom 82.3 percent were engaged in this type of farming. When it comes to tree-crop farming, of the males in the households, 67.7 percent were engaged as compared to 51.7 percent of the females.

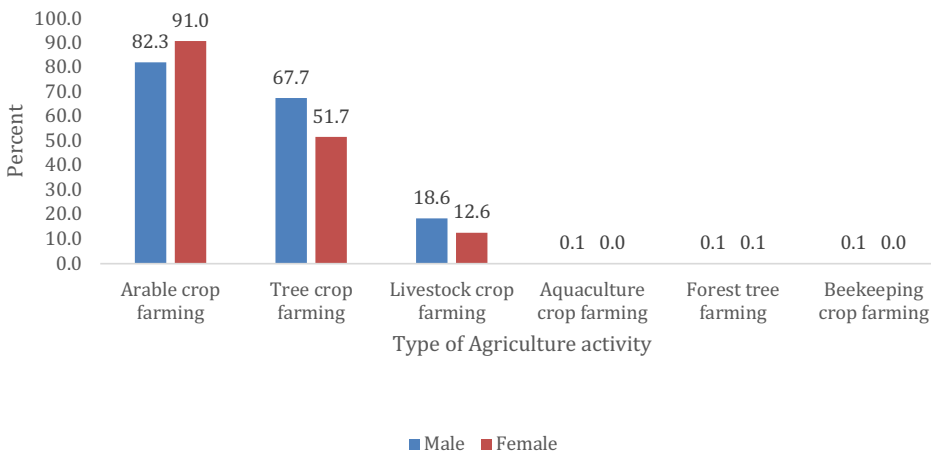


Figure 4.5.1: Household Population engaged in Agriculture

4.5.2 Population in agriculture

Figure 4.5.2 shows that generally males were more engaged in agriculture in the three years from 2017 to 2019 as compared to females. For all the years male have shown 6 out of 10 involvement in agriculture, while females 3 out of 10.

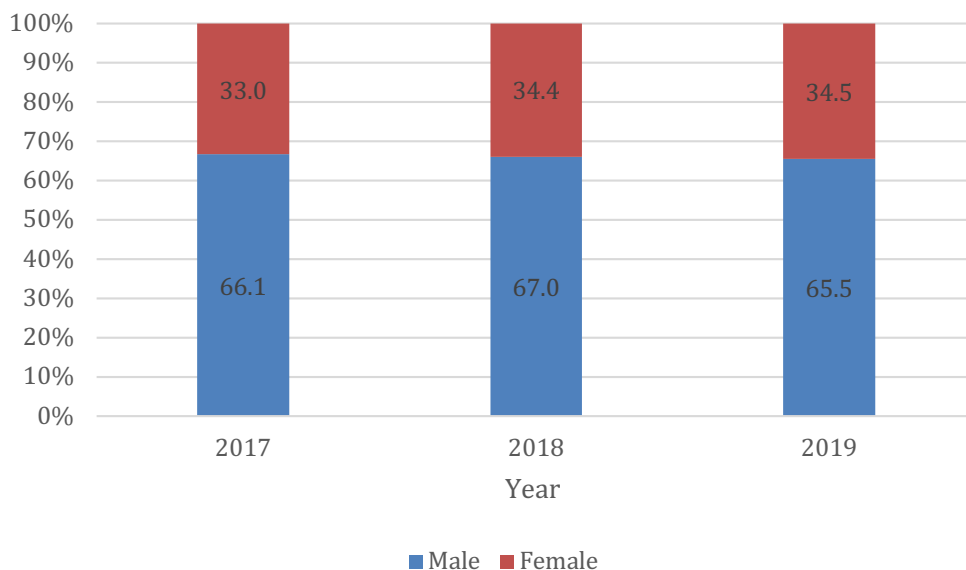


Figure 4.5.2: Population in Agriculture

4.5.3 Livestock reared

Livestock rearing (production) is an integral part of the agricultural activities undertaken in the Asante Akim Central Municipality. Poultry was the predominant livestock reared, involving nearly 39,000 poultry birds in 2019.

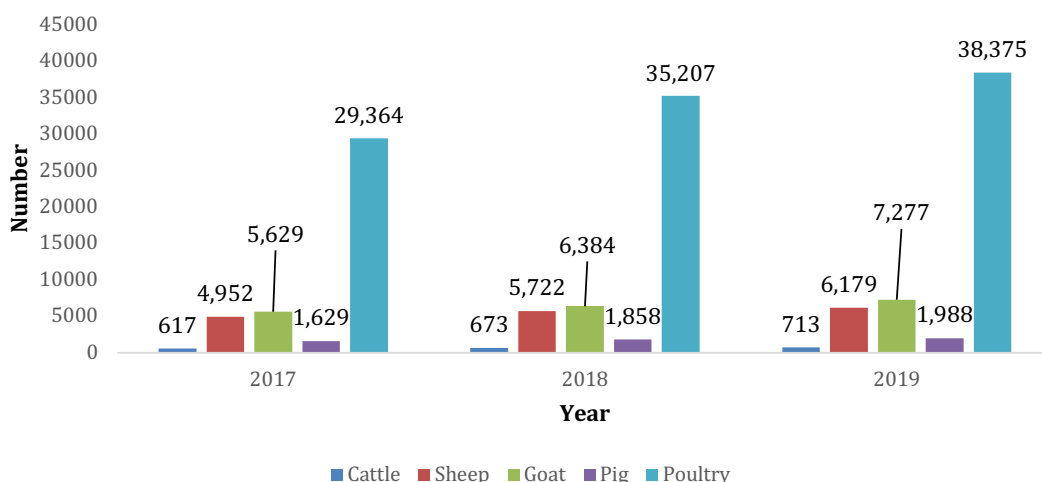


Figure 4.5.3: Livestock reared

4.6 Sanitation

The proportion of the population with access to improved sanitation increased marginally from about seven to 10 percent from 2009 to 2019.

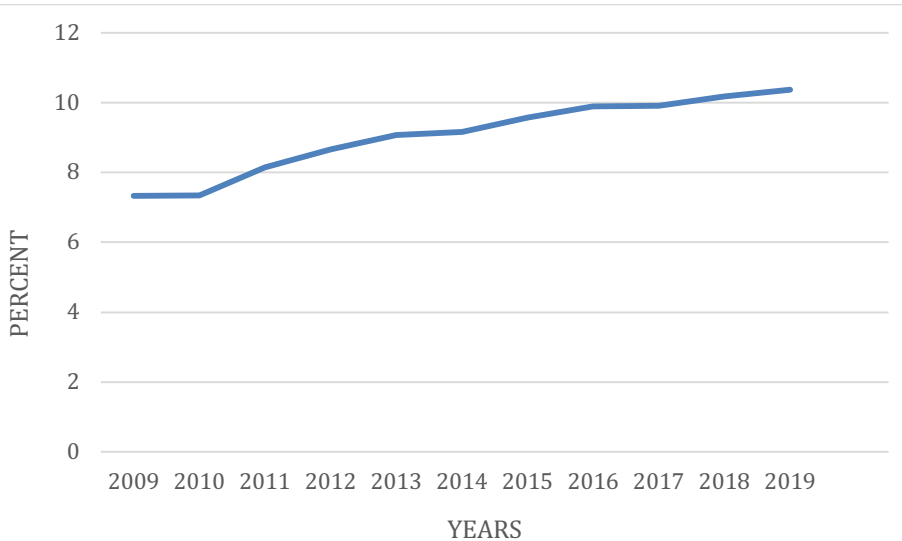


Figure 4.6: Percentage of the urban population with improved sanitation

4.7 Electricity

Electricity is linked to the SDG Goal 7 - Affordable and Clean energy. This is geared to making energy affordable and widely used by all as well as achieving universal access to electricity by 2030.

Table 3.2.3 shows the urban population connected to the national grid (electricity). Generally, the number of urban residents connected to the national grid increased steadily as the years progressed. The largest number was attained in 2019, with 11,006 of the urban population connected, followed by 2018 with 9,756 of the urban population, while the least was in 2016 with 3,397 urban population.

Table 4.7.1: Urban population connected to national grid (electricity)

Years	Urban Population
2009	3,397
2010	4,597
2011	5,597
2012	6,397
2013	7,197
2014	7,697
2015	8,297
2016	8,714
2017	9,131
2018	9,756
2019	11,006

4.8 Road network coverage by surface type and condition

Data obtained for only 2019 shows that the total road network was 182.40 km consisting of 118.56 km gravel, 36.43 km earth and 27.36 km bitumen. Roads surfaced with bitumen constitute the largest proportion (21.7 kilometers) of the trunk road network. Then of the feeder road network the largest proportion of 59.95 km has a bare-earth surface, while most of the urban road network (34.38 kilometres) has a bitumen surface.

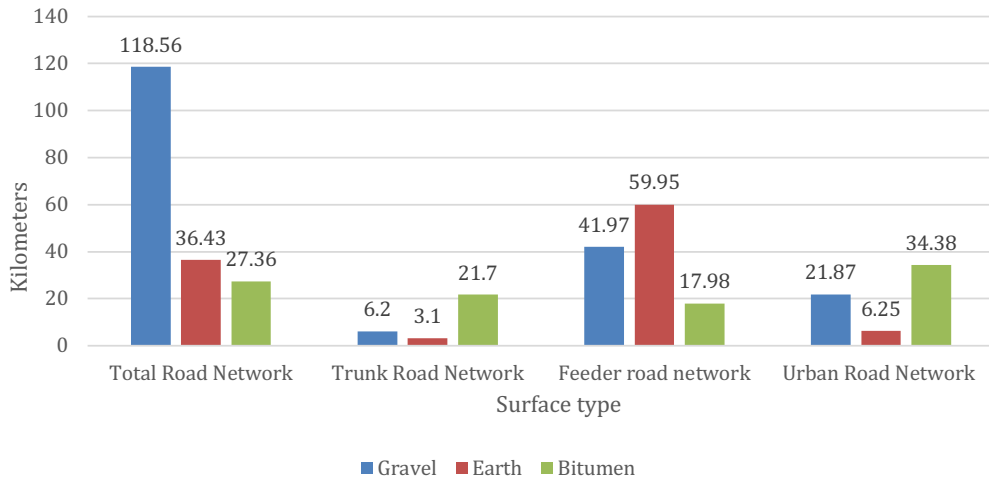


Figure 4.8: Road network coverage by surface type and condition

4.9 Urbanization

Rapid, unplanned urbanization can result in poor social, economic, and environmental outcomes due to insufficient and overburdened infrastructure and services. It creates congestion and leads to inadequate housing.

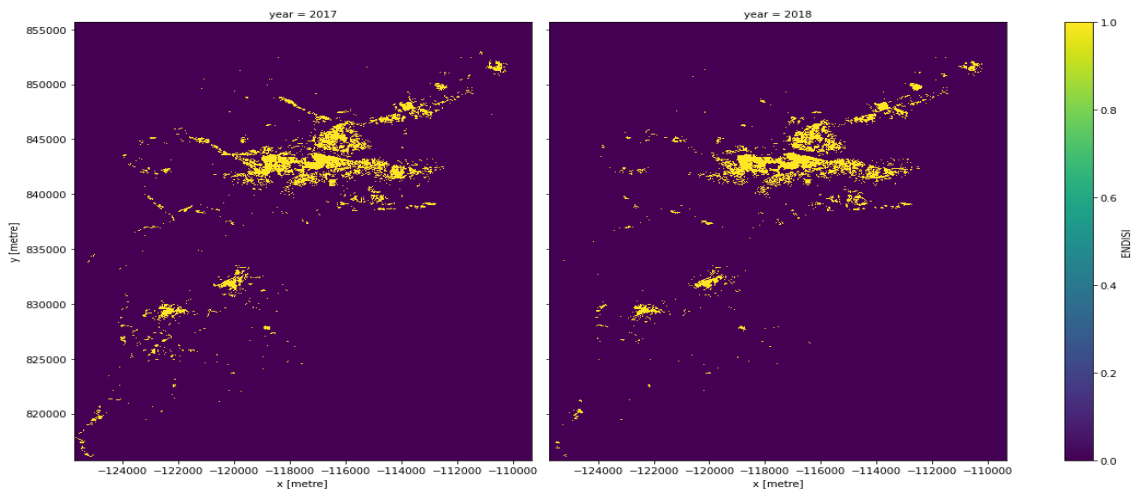
To address the effects of rapid urbanization, we must first monitor urban expansion accurately and regularly track urban development over time. Traditionally, urbanization has been measured in Ghana using census data, with the urban threshold being communities with a population of 5,000 or more. To obtain a more regular measure of the urbanization extent of towns and cities we must use other data sources such as Earth Observation from satellites. Digital Earth Africa provides open accessible and free available analysis-ready data (earth observation satellite imagery) for the AfriGEO communities as well as other geospatial scientists to produce decision-ready products. Using the products provides a better understanding of how communities are evolving.

One of the products is the urban extent that could be applied in Asante Akim Central. To understand the urban extent from Earth Observation, the Enhanced Normalized Difference Impervious Surfaces Index (ENDISI) which was developed for urbanization proxy has been shown to work well in a variety of environments. A machine-learning algorithm (Ostu method) is applied on the computed image to determine the threshold (-0.33) for Asante Akim Central. The threshold aids in identifying the urban and non-urban areas.

4.10 Earth Observation

This session uses Earth Observation (satellite imagery from Digital Earth Africa) to provide insights into the landscape-change-related deforestation and urbanization.

The image below shows the urban extent of Asante Akim Central for 2017, 2018, 2019 and 2020. The yellow colors (from the legend = 1) shown in the images are the urban extent of the constituency extracted using a threshold value for the particular year.



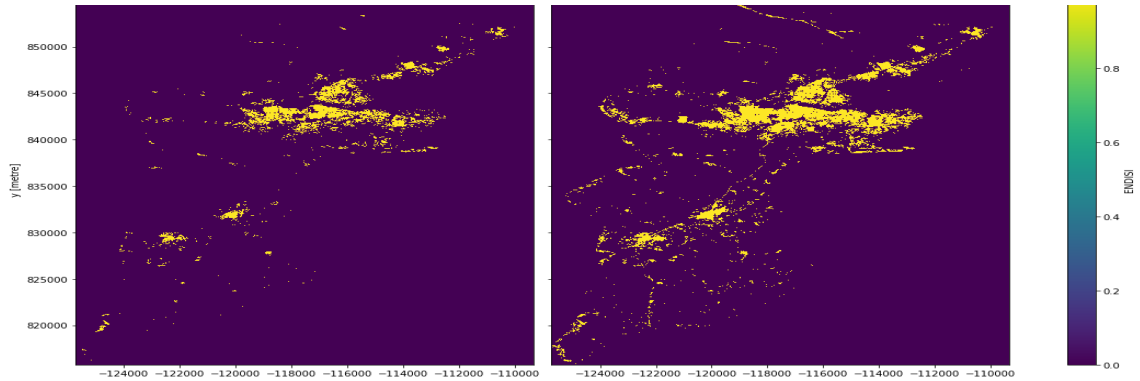


Figure 4.10a: Extent of urban growth between 2019 and 2020 based on satellite imagery

Figure 4.10b shows the vegetation lost in square kilometers for the Asante Akim Central Constituency from January 2017 to December 2020. The highest loss of about 2,500 km sq. of vegetation was recorded in January 2019.

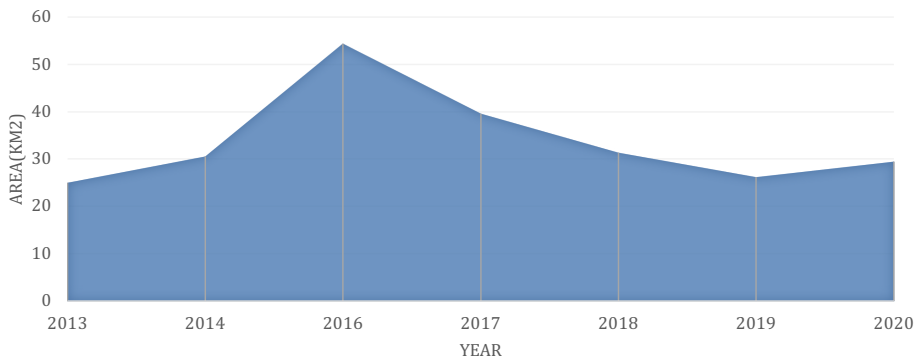


Figure 4.10b: Vegetation lost possibly through mining, 2017-2020

4.11 Gold Mining (surface mining)

Gold mining is the extraction of minerals, mainly through an open pit but sometimes from beaches and inland dunes or by dredging ocean and river beds. Although gold mining remains a good source of income for a country, these operations can result in deleterious effects on farmlands, forests, and water bodies. Asante Akim Central is one of the constituencies in Ghana where sand wining or mining is a productive business venture. Earth observation data make it possible to monitor these activities and their impact on the environment. Below is an analyzed satellite image showing locations mined for gold from 2017 to 2020, and also the area that has undergone vegetation loss due to this activity as seen in Figure 4.1 1a and Figure 4.11b.

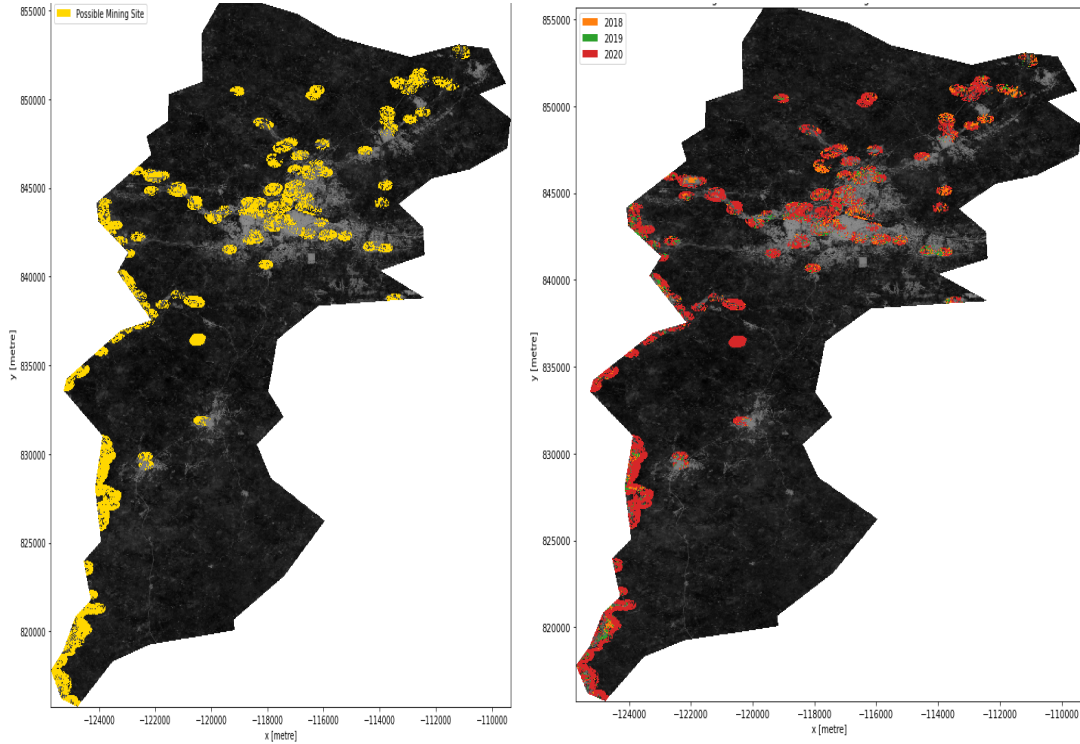


Figure 4.11a: Possible mining sites by year of establishment

Between January 2017 and December 2020, Figure 4.2.40 shows the vegetation lost in square kilometres for the Asante Akim Central Constituency. The highest lost was recorded in January 2019 of about 2,500 km sq. of vegetation lost.

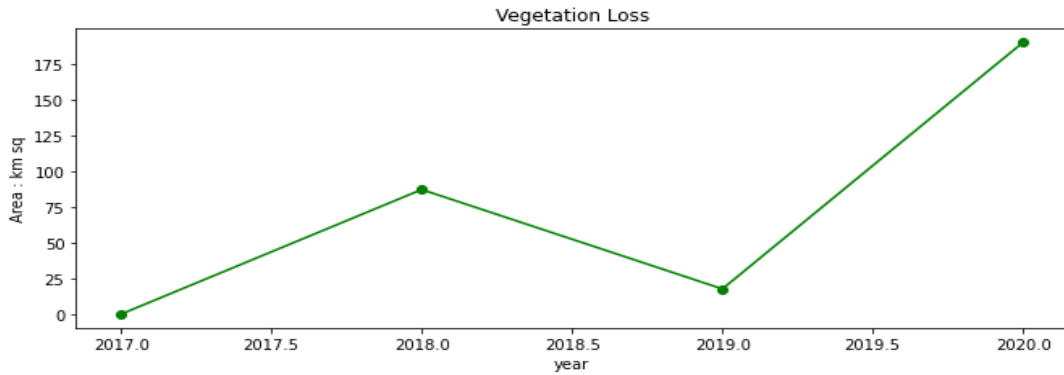


Figure 4.11b: Vegetation lost possibly from mining, 2017-2020

CHAPTER FIVE

REVENUE, EXPENDITURE AND SDGs BUDGET

5.1 Introduction

Budget performance is one that reflects both the input of resources and the output of services for each unit of an organization. Relating the inflows of revenue and expenditure activities of assemblies is important in determining the extent of services that can be carried out. Revenue sources to MMDAs are varied. The ability of MMDAs to effectively generate revenue from all the various sources will determine the quantum of revenues accrued to them and the services they could render. Revenue sources available to MMDAs include fees and charges, market tolls, property rates, the District Assembly Common Fund (DACF), and the District Development Fund (DDF).

5.2 Internally Generated Funds

Internally-generated funds (IGF) are one of the sources of revenue inflows for MMDAs. As its name implies, it is generated by the district assembly from sources within the district such as taxes from markets (market tolls), property rates, fees, and charges for granting permits and others. The amount of revenue generated depends largely on the efficiency of revenue mobilization strategies including accountability measures implemented by the district. Figure 5.2.1 shows IGF generation as a percentage of total revenue from 2017 to 2020.

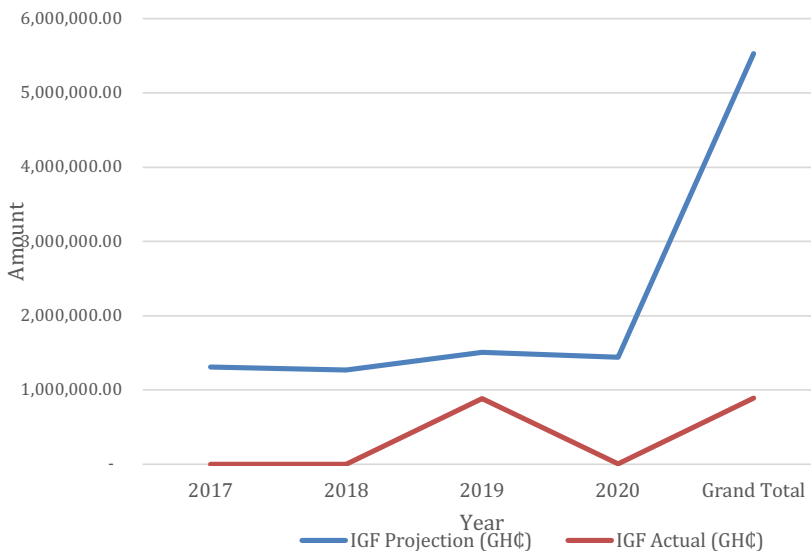


Figure 5.2.1: Internally Generated Funds (IGF)

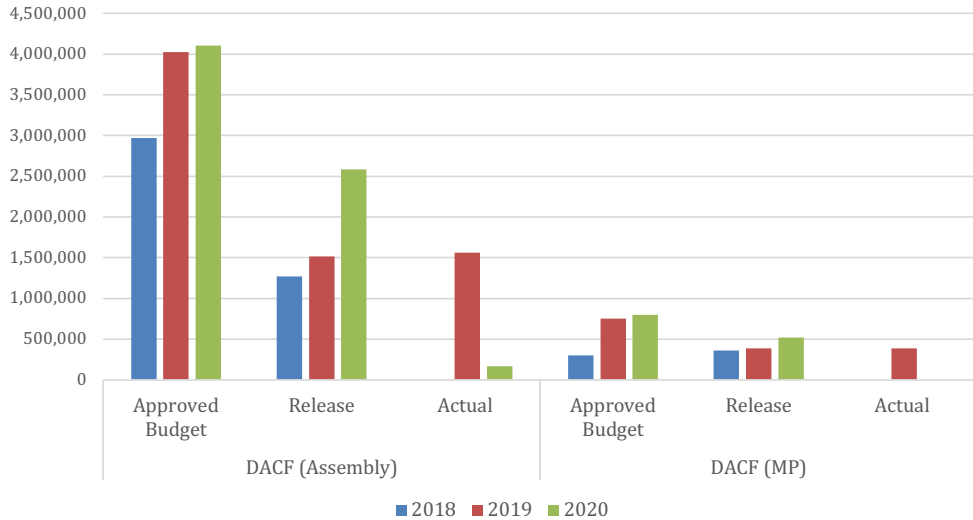


Figure 5.2.2: District Assembly Common Fund (DACF)

5.3 SDGs Budget Allocations

In 2019, the Minister for Finance directed all MDAs and MMDAs to align their budgets and withdrawals from the Consolidated Fund to specific SDG targets. This provides an opportunity for districts to implement programmes towards the achievement of specific targets relevant to the MMDAs or MDAs. Figure 5.3.1 shows compliance to the directive in terms of budgetary allocation. Generally budget approval has been high in all the years under review.

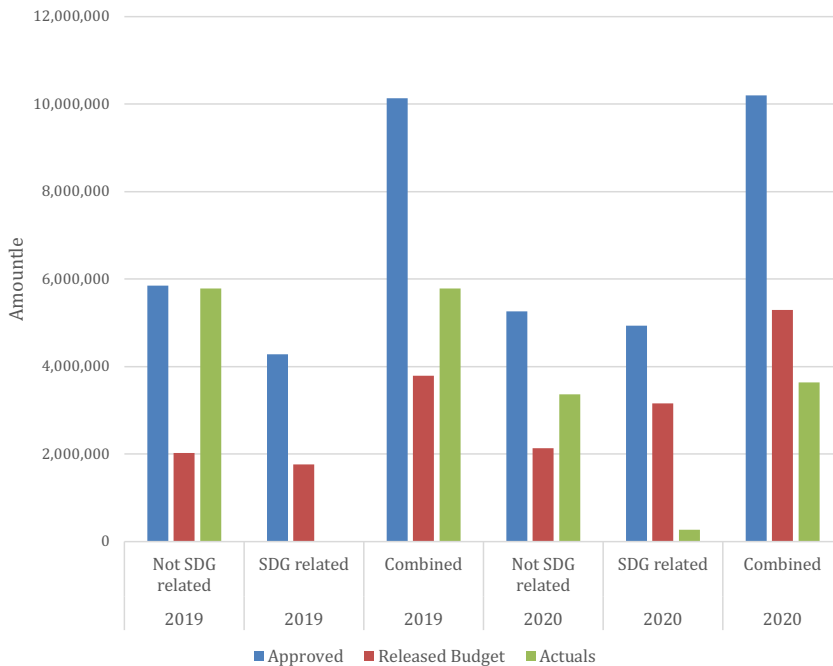


Figure 5.3.1: Budget allocation to SDGs

Source: Ministry of Finance

5.4 Budget allocations for specific SDG targets

The Sustainable Development Goals have 169 targets in all 17 goals. In 2019 the Asante Akim Central Constituency budgeted for eight of the targets and another eight targets in 2020 (Figure 5.4.1 and Table 5.4.1). The targets with the most expenditure in 2020 were health (target 3.8), education (target 4.1) and resilient infrastructure (target 9.1).

Figure 5.4.1 shows that out of the 17 targets that received budget approval, some funds were released for 12 of them, but in all cases the funds were diverted to other programmes. The year 2020 saw an improved expenditure for all but one of the targets that were budgeted for.

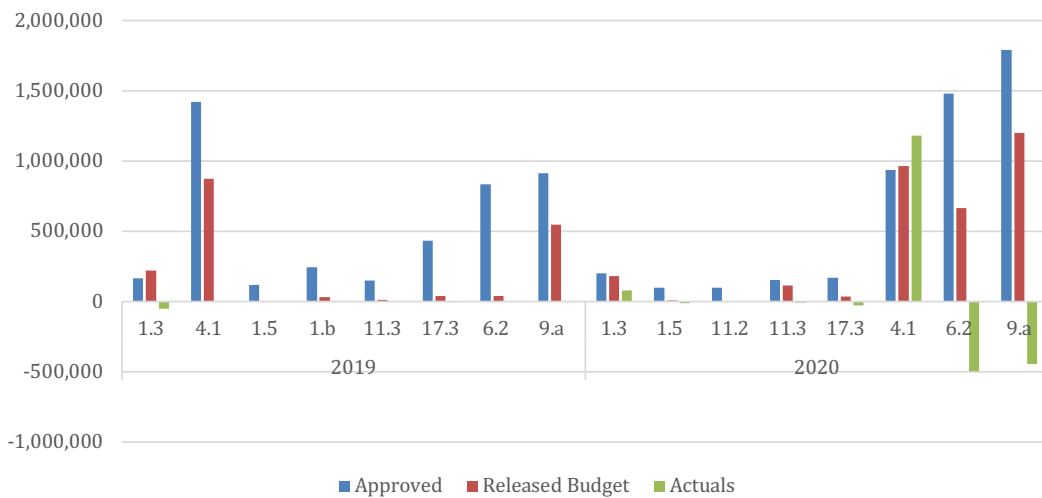


Figure 5.4.1: Budget allocation to specific SDG targets

Table 5.4.1: Asante Akim Central Municipal Assembly_AACMA

Year	SDG Target		Approved	Released Budget	Actuals
2019	1.3	Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable	165,096	221,886	-50,772
2019	4.1	By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes.	1,420,359	874,747	0
2019	1.5	By 2030, build the resilience of the poor and those in vulnerable situations and reduce their exposure and vulnerability to climate-related extreme events and other economic, social and environmental shocks and disasters.	120,000	0	0
2019	1.b	Create sound policy frameworks at the national, regional and international levels, based on pro-poor and gender-sensitive development strategies, to support accelerated investment in poverty eradication actions.	245,000	29,732	0
2019	11.3	By 2030, enhance inclusive and sustainable urbanization and capacity for participatory, integrated and sustainable human settlement planning and management in all countries.	150,000	10,357	0
2019	17.3	Mobilize additional financial resources for developing countries from multiple sources.	432,000	38,245	-2,100

2019	6.2	By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations.	834,948	39,797	0
2019	9.a	Facilitate sustainable and resilient infrastructure development in developing countries through enhanced financial, technological and technical support to African countries, least developed countries, landlocked developing countries and small island developing States.	915,122	546,387	-4,431
2020	1.3	Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable.	202,792	180,714	78,184
2020	1.5	By 2030, build the resilience of the poor and those in vulnerable situations and reduce their exposure and vulnerability to climate-related extreme events and other economic, social and environmental shocks and disasters.	100,000	6,090	-13,046
2020	11.2	By 2030, provide access to safe, affordable, accessible and sustainable transport systems for all, improving road safety, notably by expanding public transport, with special attention to the needs of those in vulnerable situations, women, children, persons with disabilities and older persons.	100,000	0	0

2020	11.3	By 2030, enhance inclusive and sustainable urbanization and capacity for participatory, integrated and sustainable human settlement planning and management in all countries.	152,674	114,155	-5,905
2020	17.3	Mobilize additional financial resources for developing countries from multiple sources.	170,000	34,310	-26,560
2020	4.1	By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes.	937,127	962,677	1,181,924
2020	6.2	By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations.	1,479,127	663,701	-495,172
2020	9.a	Facilitate sustainable and resilient infrastructure development in developing countries through enhanced financial, technological and technical support to African countries, least developed countries, landlocked developing countries and small island developing States.	1,790,286	1,201,222	-442,726
Grand Total			9,214,530	4,924,020	219,395

CHAPTER SIX

SUMMARY AND RECOMMENDATIONS

6.1 Introduction

The availability of timely and reliable data is a very critical component towards the achievement of the Sustainable Development Goals. It is therefore very important for policy makers like parliamentarians to be provided with the requisite data on all facets of the economy to help them perform their constitutional roles. The data for accountability Project therefore comes in handy to help monitor progress on attainment of the SDGs.

6.2 Summary

The 2020 projected population of Asante Akim Central Constituency stood at 89,261, which is an increase of about 21% from the 2010 population of 70,717. The district has more females 45,302 (50.8 percent) compared to the males 43,959 (49.2 percent). The population aged 0 – 14 years constitute 37.9 percent.

As at 2019, the district had one (1) hospital, four (4) clinics/health centres and five (5) CHPS which are public owned; the district also had one (1) hospital and three (3) clinics privately owned, totalling two (2) hospitals, seven (7) clinics/health centres and five (5) CHPS.

The number of critical health staff mainly physicians and pharmacists stood at six (6) for the public health centres and two (2) for the private centres, totalling eight (8) critical health staff tasked with serving the health needs of the district.

Antenatal (ANC) coverage was at a laudable eight out of 10 pregnant women in the constituency for the period 2016-2020. In 2019, the proportion of teenagers among ANC attendees was 12.9. This figure has relatively been stable and slightly higher than the national average over the past five years. Institutional maternal mortality in the district saw a significant drop from 93 maternal deaths per every 100,000 live births in 2016 to 41 deaths per every 100,000 live births in 2019. Both infants and under-5 mortality rate has seen much improvement over the last five years, infant and under-5 mortality rate fell from 10 deaths per 1,000 live births in 2016 to 4 deaths per 1,000 live births in 2020 and 1 death per 1,000 live births in 2016 to 10 deaths per 1,000 live births in 2020 respectively. The district has a high vaccination rate for Penta3. In 2020, only three out of every 100 children below one year of age missed the vaccination. The figure for health facility attendees who tested HIV positive (HTC) in health facilities has been fluctuating within the last four years. In the year 2019, the figure stood at 219, a 69 increment from the 2018 figure of 150; this figure though high still falls well below that of the year 2017 which recorded the highest, 353 persons who tested HIV positive.

Net enrolment rate at the primary level of education declined steadily from a rate of 108 in the 2014/2015 academic year to 97 in the 2018/2019 academic year. At the JHS level however,

there was a yearly gradual increase in enrolment rate across the past six academic years. Similarly, enrolment rate at SHS level saw a decline from 68 to 46 in the 2017/2018 academic year compared to 2019/2020 academic year. Primary level education tops the charts for admission rate for both sexes. While admission rate is higher for girls at the primary level, boys' admission rate at the JHS records higher values compared to that of the girls. Admission rate for boys at the Primary level shows a steady rise from 82 percent in 2014/2015 to 92 percent in the 2017/2018 academic year, declining to 79 percent and 78 percent in 2018/2019 and 2019/2020 academic years respectively.

Their female counterparts follow a similar trajectory but at higher values; the 2015/2016 academic year admission rate for primary girls was the highest at 111 percent after rising from 98 percent in 2014/2015 academic year. This figure dropped to 104 percent in 2015/2016 and remained at 92 percent in the last three academic years (2016/2017 to 2019/2020). The highest enrolment rate recorded for boys at the JHS level was 53 percent in the 2014/2016 academic year followed by 51 percent in 2017/2018 academic year with 2016/2017 and 2018/19 recording the lowest admission rate at 43 percent. Enrolment rate for JHS girls was at a low 34 percent in 2016/2017 academic year; 2017/2018 recorded the highest rate of 50 percent before dropping to 40 percent in 2018/2019 and ascending to 43 percent in 2019/2020 academic year.

The district recorded a high percentage of students passing the core subjects in the BECE and WASSCE examinations over the last six academic years with the percentage of students passing at as high as 80-90 percent in the 2014/2015 academic year in all core subjects. However, there was a marginal decline in the last two years with values ranging between 70 and 76 percent.

Agriculture is the mainstay of the district's economy, employing a third of the population. Ninety-one percent of females in the households engage in arable crop farming as compared to their male counterparts at 82.3 percent. Regarding tree crop farming, males in the households formed 67.7 percent of engagement as compared to the females at 51.7 percent. Generally, poultry is the predominant livestock reared with nearly 39,000 poultry birds in 2019, 35,000 in 2018 and 29,000 in 2017. The proportion of the population with access to improved sanitation increased steadily from about seven to 10 percent between 2009 and 2019.

Generally, the urban population connected to the national grid increased steadily as the years progressed. The largest number was accounted for in 2019 with 11,006 urban population connected, followed by 2018 with 9,756 urban population and the least being 2016 with 3,397 urban population.

Total IGF projection for the district from 2017 to 2020 stood at GH¢ 5,528,651.34 while the total actual generated IGF from 2017 to 2020 is GH¢ 891,175.49. Year in year out however, the district has fallen short of meeting her IGF targets. In 2019, the district collected GH¢ 884,521.73 as IGF compared to a projection of GH¢ 1,504,195.67. This figure dropped to GH¢ 6,653.76 in 2020 as compared to an IGF projection of GH¢ 1,442,194.21.

The main source of revenue to the district is the DACF. However, only about 43 percent of the DACF allocation was released to the district for the period 2018 to 2020. Out of the 17 targets in line with SDG goals that received budget approval, funds were released for 12. Unfortunately, however, some of these funds were vied or used for other programs.

6.3 Recommendations

The following recommendations are made for consideration to help resolve the developmental challenges in the district.

- Central government must post critical health staff to the district to stem the tide of inadequate health personnel in the district. This will improve on the health delivery of the people in the district.
- The District Health Directorate should collaborate with the Directorate of Education as well as the Commission of Civic Education so as to intensify public education on HIV/AIDS to curb the rise of the rate of infection.
- The District Assembly must improve on its revenue generation strategies and find innovative avenues to generate additional funds internally to meet their projected financial targets.
- The Central Government should ensure strict adherence to the legal provisions of the DACF and dutifully disburse same quarterly to the District Assembly. The District Assembly should ensure that funds released for the implementation of SDG activities are disbursed accordingly.

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