

# FOUNDATION MBALLA EKOBE MARCEL (FMEM)



ANNUAL REPORT 2020 - 2021  
(COVID RESPONSE)



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## Overview of the project

### Background

#### **The initial situation of access to water and sanitation in times of COVID-19**

Access to drinking water affects a large number of families in the project area (Eastern Cameroon region). The water currently consumed by the population is drawn from rivers and ponds located below the villages, often several kilometers away.

In the absence of proper roads, and because of the geographical location of the villages, the fetching of water, traditionally carried out by women and children, is particularly painful and take away precious hours which could be dedicated to more productive activities (sale of surplus on local markets ...).

With almost no access to sanitation systems in these villages, villagers defecate in and around water sources. As a result, runoff, abundant in this tropical region, pollutes the water points in which each family relies on for showering, washing clothes ... and draws water for cooking and drinking. The fecal peril therefore remains a permanent threat to the health of child populations, regularly decimated by epidemics of dysentery and other diarrheal diseases. It is estimated that 70 per cent of the diseases that affect people in these rural areas are still related to poor water quality.

This area (Department of Haut-Nyong and Lom and Djerem) has been proposed as a priority by the FMEM team for the year 2020. As a response mechanism to the spread of the COVID-19 pandemic in landlocked areas of the region.

The activities that were carried out in the targeted areas were based on epidemiological monitoring, strengthening local capacities in connection with the health sector, developing a collaboration plan with the municipal authorities, responding to emergency WASH needs in this emergency period (awareness session on hygiene promotion, development and rehabilitation of water points).

### Presentation of the partners

As partners we can mention institutional partners such as:

1. The municipality of Angossas
2. The commune of Lomié
3. The family school of agriculture of Essandiane.

Whose purpose is to develop and promote development actions.

We can also count on technical partners such as the NGO MUTCARE which specializes in training and support issues for disadvantaged groups.

## Description of the project objectives

The objective of the actions for the year was to sustainably reduce water born diseases in villages (about 6000 peoples) in the East region, which can increase the death rate in combination with COVID, through access to drinking water and sanitation and the training of local actors.

The specific objectives were to:

1. The provision of drinking water to target populations;
2. The emergence of a local dynamic with a gradual change in risky health behaviours that can promote the spread of COVID-19;
3. Improvement of the health and social situation of the population.
4. Provide the Water Point Committees and the project managers with the tools necessary for the sustainability of the projects: Technical tools, financial tools.

## Project progress:

The project had two (02) components:

**A component access to water - Rehabilitation of 14 water wells in three municipalities of the Eastern region:**

Some of these villages were equipped with wells. But they were unsanitary and supplied only a small proportion of the villagers. Elsewhere, the population had no access to drinking water.



*Photo 1: some images of the project.*

**An accompaniment component - Training and equipment of local officials:**

The formation of 14 Water Point Management Committees and maintenance managers, who will be essential factors in the future autonomy of rural communities for infrastructure management and the reduction of waterborne diseases.

## Objectives achieved:

- ⇒ The **rehabilitation of wells equipped with PMH in the 10 target villages** has made it possible to provide the local population with access to quality water within a radius, in accordance with the recommendations set out in the project.
- ⇒ The population reports an immediate improvement in **diarrhoeal diseases** in young children, as well as an increase in cleanliness in general.
- ⇒ In addition to cleanliness and hygiene, the arrival of water in the village is for many inhabitants a factor of **general well-being** and especially of **human dignity**.
- ⇒ The women gained an average of **2 hours thanks to the lightening of the water chore**. They massively use this free time to increase their working time on farms and AGRs in order to improve the level of nutrition of their families. The project has therefore had direct and immediate effects in the fight against poverty.
- ⇒ Raising **public awareness of hygiene rules** (WASH strategy) has created a new sanitation dynamic: improved knowledge of the link between health and sanitation, promotion of handwashing with soap, promotion of family latrines.
- ⇒ **10 Water Committees** were trained and sensitized by MUTCARE facilitators. Their medium-term support remains necessary to strengthen their operating autonomy and improve their skills, particularly in terms of water resources protection.

## Review of technical execution

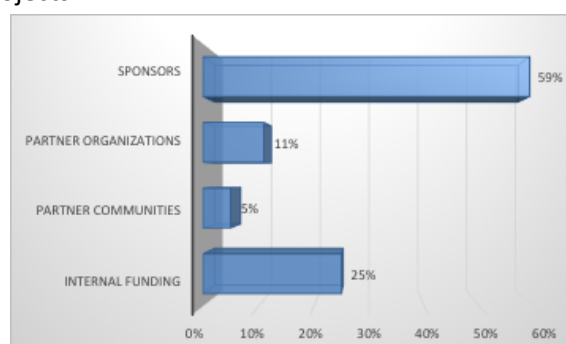
### Means used

#### Human resources:

- A facilitator: responsible for the support and training of the Water Point Management Committees and the health education of the populations;
- A specialist in hydraulic infrastructure for the construction of infrastructure;
- The heads of the town halls for the logistical mobilization;
- Village chiefs responsible for material mobilization and local labour participation for infrastructure works.

#### Financial means:

The foundation held a fundraiser throughout the year, despite the COVID climate FMEM's funding target for 2020 was 80,000 GBP. Together with COOPTOM, partner communities, and sponsors, we met 78% of this target (£62400) which was a very encouraging result during such uncertain financial times. While the result of the fundraising were below target the fund collected allowed us to complet some of the projects postponed in 2020 without severely impacting on the new projects.





## Hardship:

The difficulties encountered during this first phase are more related to the understanding of local authorities and local populations. We can also mention the climate that has not always been favorable to the implementation of activities (rains that prevented the delivery of materials on time, thus creating a consequent fluctuation in the prices of raw materials).



*Photo 2: KASSARAFAM Village during the works*

## Stream 1: Drinking Water Infrastructure

### 1. Actions implemented:

#### 2. Rehabilitation of 10 drinking water points:

The existing water points were built between 2000 and 2004 in the majority of municipalities. These are the 03 main municipalities of intervention of the FMEM since its creation. The headquarters of BMG, our local partner, is located in Bélabo, which facilitated its follow-up work on this project.



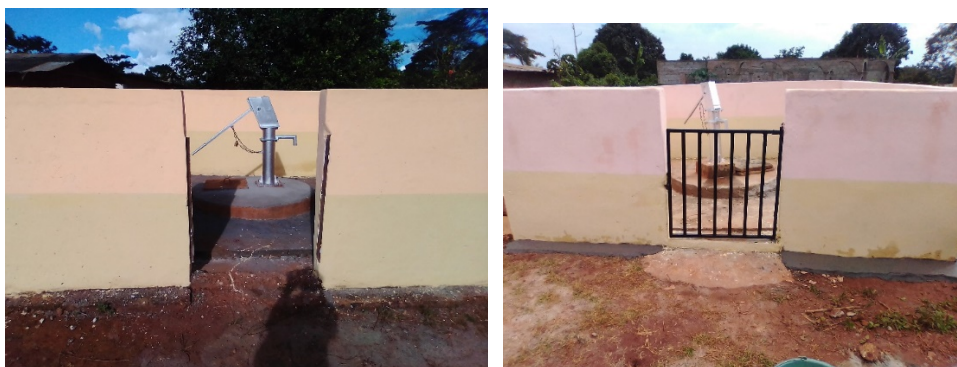
*Photo 3: MBOMBA Public School after and before*



*Photo 2 ADIELA Public School after and before*



*Photo 4: BINGONGOL Village after and before*



*Photo 5: Bagoboung village and Anguengué*

## Component 2: Support for local actors

The FMEM and the MUTCARE facilitator accompanied the populations in the formation of their Management Committees and in the adoption of sanitary behaviors to strengthen the effects of drinking water on health and barrier measures: hand washing with soap, use of family latrines, maintenance of water quality.



**Photo 6: Presentation of the certificate and kit to a training participant**



**Photo 7: Family photo of the training**



### 1. Analysis of results achieved :

The evaluation carried out by the FMEM in March 2021 made it possible to note the results obtained in terms of training local actors:

	Positive elements	Possible improvements
<b>Management Committees</b>	Members of the Management Committees  And managers are well aware of their roles and responsibilities and are willing to assume them within their means.	Some committee leaders, in particular treasurers and secretaries, expressed doubts about their capacities and requested additional training to carry out their mission. The aim would be to provide them with precise methodological tools, adapted to their capabilities, in terms of information gathering, scoring, etc.
<b>Techniques Animation</b>	The training of the facilitators allowed them to acquire new animation techniques as well as concrete awareness-raising tools.	Progress remains to be made in implementing the implementation of a WASH strategy. Targeting messages and audiences must become systematic. For this, a more intensive presence of the communal authorities on the ground is required.

## Conclusion :

### The project

The project has achieved the objectives announced: in addition to the rehabilitation of drinking water and sanitation infrastructure, it has made it possible to set up new procedures for accompanying and supporting local actors. The evaluation carried out at the end of the project and the reflection undertaken with the FMEM team allowed us to update the successes but also the weaknesses of this first phase and to plan the necessary adjustments to improve our method of intervention as part of the rest of the action.

The momentum will therefore continue, with a view to both extending and sustaining the benefits of the 2020 project. From now on, local communities are better equipped and more motivated than ever to assert their expertise and continue the actions of support of the actors.



## Partnership

This project could not have taken place without the significant support of decentralized local authorities; in particular the Commune of Angossas and other development associations that have agreed to commit to the development of the poorest populations of Madagascar!

This financial commitment was for us the only way to combine the essential services of drinking water; sanitation with the necessary support for populations and the fight against COVID 19 to sustain their infrastructure and adopt behavioral changes that really improve their health situation.

Training and local support represent a long-term work, which requires the sustainable commitment of everyone. This is why the FMEM calls on its partners to maintain this momentum of progress and allow the implementation of new projects that constitute both an extension and a deepening of the previous achievements.