

ANNUAL REPORT OF THE HUMANITARIAN / RESIDENT COORDINATOR ON THE USE OF CERF GRANTS

Country	TOGO	
Humanitarian / Resident Coordinator	Rosine Sori Coulibaly	
Reporting Period	2007	

I. Executive Summary

According to the 2007 United Nations Development Programme (UNDP) Human Development Report, Togo is ranked 152nd out of 177 countries, which implies that a large part of the population lives in precarious conditions, with inadequate food security and little access to social services. This ranking and other indicators underscore a deterioration of the situation compared to previous years (Togo's ranking was 147th in 2006). Political crisis and economic recession, exacerbated by donor disengagement since 1993 elections, all have had a devastating impact on poverty over the last decade. Poverty has risen dramatically throughout the country where a global poverty figure of 62 percent (QUIBBS 2006) masks regional disparities. The situation is critical in the north of the country, where poverty figures reach 91 percent in Savanes, the most northerly region.

Few government resources reach the north of the country, where civil servants are demoralized and few. For many years the role of operational non-governmental organizations (NGOs) and civil society was discouraged and therefore the extent of the nutritional situation remained largely uncommented on. In 2006 MICS and a food security survey undertaken by the Food and Agriculture Organization of the Untied Nations (FAO) and World Food Programme (WFP) rang alarm bells as rates of up to 32 percent malnutrition were recorded in the Savanes region with Kara and coastal Maritime regions recording unacceptably high malnutrition rates. Initially the Government of Togo was unwilling to acknowledge the rates of malnutrition; a further six months of advocacy followed before the government declared an emergency. It was then that the UN agencies were able to mobilise significant resources.

In the months of September and October a considerable amount of rain resulted in floods in the Savanes and Maritimes regions of Togo. Estimated rainfall in the Savanes region for August and September was 38 percent higher than in 2006 with 30 percent of the total falling in just three days. Dams in the north had to be opened to prevent further loss of life and property but this had a cumulative effect in the south where heavy rainfall had already swollen rivers and a second wave of flooding occurred in the Maritime region in October. This situation affected livelihoods, damaged crops, livestock and dwellings and left an estimated 60 000 people in need of food aid, shelter, water and health services in the Savanes and an estimated 16 000 affected by temporary displacement in the Maritimes region. The impact on agricultural production was serious as was loss of livestock. In the most affected areas between 16 percent and 28 percent of crops were lost.

Some \$3.85 million was allocated from CERF in response to an urgent request from the United Nations Resident Coordiantor. CERF funds kick-started the response to the nutrition crisis, for example, as it allowed interventions to begin during the rainy season and by putting systems in place to address distribution needs during subsequent flooding. Training of health agents and provision of therapeutic feeding, drugs and anthropometric materials have increased the access to adequate care of malnourished children and the improvement of the nutritional status of children under five.

Total amount of humanitarian funding required and received (per reporting year)	Required: \$12,120,011 Received: \$6,732,558					
Total amount of CERF funding received by funding window	Rapid Response: \$3,855,356 Under funded: Not applicable Grand Total: \$3,855,356					
Total amount of CERF funding for direct UN agency/IOM implementation and total amount forwarded to implementing partners	Total UN agencies/IOM: \$3,450,010 (mainly supplies) Total implementing partners: \$405,346					
	Total	under 5 years of age	Female (If available)	Male (If available)		
Approximate total number of beneficiaries reached with CERF funding (disaggregated by sex/age if possible)	99,862	Nutrition: est. 14,104 Floods approximately 17,000				
Geographic areas of implementation	Savanes and Maritimes regions					

II. Coordination and Partnership-building

(a) Decision-making process:

Nutrition

Coupled with a Multiple Indicator Cluster Survey (MICS) 2006 and a food security analysis (malnutrition among children under five years of age above the World Health Organization (WHO) emergency threshold (≥15 percent) in Savanes, Kara and above the critical threshold in Maritime regions) reports from assessment missions carried out by the United Nations Children's Fund (UNICEF), WFP and FAO in 2006 characterized the situation as alarming and called for an urgent and integrated response from the government and the humanitarian community. Initially, the government was somewhat reluctant to make an appeal for resources to address the nutritional problem, concerned that bad publicity would follow. Advocacy with the Ministries of Health and Agriculture led to the declaration of a nutritional crisis in April 2007. WFP and UNICEF joined efforts to address this situation and consultations over CERF funding were jointly discussed with HC/RC and backed by the Interagency Humanitarian Response Group and the line Ministries. Initially FAO also planned to complete the partnership; however, they could not raise funds for needed agricultural inputs to the programme.

Floods

In early September 2007 UNICEF and Red Cross were in the Savanes region assessing the impact of nutritional work on the region when flooding became widespread. This led to early humanitarian alerts to the UN Resident Coordinator's (RC) office. Arrangements were made for UNICEF to 'borrow' supplies for water and sanitation and shelter from its programme in Cote d'Ivoire while early assessments of displacement were made. At this time Government was engaged in a lengthy electoral campaign and the RC office found advocacy regarding the state of emergency challenging. Eventually in early October there was a request for humanitarian assistance from government. An interagency assessment mission conducted in early October 2007 in the affected regions found an increased risk of livelihoods deterioration and exacerbation of food insecurity. The mission cautioned on the lack of access to flooded areas and the absence of reliable information in government services. Recommendations from the rapid the United Nations Country Team (UNCT) assessment were crucial in the decision from the RC to apply for CERF funding. A meeting with potential donors was also organized in Lomé to inform them and

government of the decision and partners already engaged in the nutritional response were again mobilized to react.

(b) Coordination amongst the humanitarian country team:

Humanitarian coordination meetings took place monthly in most of 2007, chaired by HC/RCs office with the UN lead agency at the time the United Nations High Commissioner for Refugees (UNHCR). The meetings included operational and human rights based UN agencies, NGOs and civil society and faith based organizations as well as in country donors and representatives of some government bodies related to climate and the return of refugees. An inter-agency contingency plan was developed in 2006 and was updated in 2007 scenarios in the plan cover nutrition, flooding and avian flu. Decision making regarding planning and implementation of the nutrition programme was largely undertaken at the Ministry of Health and with the Ministry of Agriculture, where central capacity does exist. Regionally this was decentralized with local government and faith based implementing organizations and local NGOs planning with the UN agencies involved.

In 2007 there was not real clarity with the government on which national body had overall humanitarian preparedness and response responsibility. However, the Ministry of Social Affairs was proactive locally and with the Ministry of Health did take some lead on inter agency assessments. UN coordination was good and donors engaged and local government and NGOs were ready to provide assistance. Interagency meetings in Lome and in the north were held several times in September and October to plan the response and to try to get a clear picture of the extent of flood damage. In addition good collaboration between UNICEF on shelter and water and sanitation with the armed forces existed in the Maritimes region were some 2,000 people had to be relocated to a temporary camp which the military constructed.

(c) Partnerships:

2007 was a key election year in Togo, the first free elections in almost 20 years were held in October 2007, though slated for early April and postponed several times. This meant that much of government's energy was taken up with the political process and it was difficult for the UN to engage in the level of support to government on humanitarian/emergency preparedness and response which would have been desirable. However, for refugee returns, nutrition and avian flu programming and responses good working partnerships were established with line ministries. Clarity on governmental roles and responsibilities is now being sought with the new government (established 12 December 2007) and planning for reinforcing capacity drawn up with the government. The government was generally keen to have UN agencies and partners engaged in responses to humanitarian crisis throughout the period, at times though their reaction was slow and frustrated the speed at which sizable responses could be mounted.

Regional civil service structures are unmotivated and under-staff. In both the Savanes and Maritimes regions those civil servants who were not engaged in the electoral process were willing to work on local responses to the crises. However, the lack of training and planning was clear. The UN will work with government on developing regional coordination and EPR plans for 2008.

There were strong partnerships established by the nutrition programme, the response to an avian flu outbreak and refugee return programmes on the ground in the areas most affected by the floods in 2007. Implementing NGOs and faith based organizations include: the Togolese Red Cross, Sar Afrique, 3ACS, Caritas, agricultural organizations and cooperatives, and community health workers. Distribution networks already established were used to get non-food items, food, shelter and water and sanitation and agricultural assistance to target populations in the floods.

(d) Prioritization process:

Nutrition: Prioritization was based on agreed needs for the nutritional response, using MICS and food security data and the input from the Nutritional Service of the Ministry of Health. Donors and partners were consulted.

Floods: Prioritization was based on immediate on the spot assessments in the first place and on the results of interagency assessments in the following weeks. In Maritime the priorities were determined by inter agency assessments and appeals for assistance from the armed forces who were engaged in evacuation from flood lands.

III. Implementation and Results

Rapid Response projects

1. Nutrition and supplementary feeding

This CERF Rapid Response grant served as a kick-start to the response to the acute malnutrition problem. Programme activity and strategy was elaborated together with UNICEF, WFP, the Nutrition service within Ministry of Health and other implementing partners.

United Nations Children's Fund (UNICEF)

UNICEF's objectives were to save the lives of malnourished children through adequate community and centre-based therapeutic care and prevent malnutrition in children under five.

Project achievements

Caring for and preventing severe malnutrition among children under the age of five:

- Opening and equipping of 84 nutritional rehabilitation centers; treatment of 7,104 children;
- Systems to detect, refer and treat malnourished children to collect and analyze data;
- Distribution of therapeutic food (60,000 bags of therapeutic milk (F75/F100) 60,000 bags of Plumpy Nut) and other supplies (1,275 bednets, vitamin A supplementation and deworming);
- Partnership with NGOs to screen and refer malnourished children to rehabilitation centers;
- Supply management of therapeutic foods and medicines and organized warehousing system;
- High level buy-in for project approach and roll out.

Capacity building for national health staff:

- Training of community health workers. Training of 50 trainers, 255 health professional and 1,151 community health workers for screening and referral of malnourished children;
- Elaboration and training on national protocol for the management of moderate acute malnutrition;
- Communication: A KAP study carried out. The elaboration of messages and a comprehensive communication plan on the basis of the study is underway.

World Food Programme (WFP)

WFP's supplementary feeding program targeted 70,000 children under five suffering from moderate acute malnutrition.

Project achievements

- Partnerships with Caritas and PROSEM for logistics put in place. Logistics training was provided to strengthen warehouse manager's capacity.
- Commodities loan arrangements were made to ensure a rapid response in the north. Health centers in the south were provided with food when international purchases arrived in Lomé.
- Identification of beneficiaries was done through regular nutritional activities carried out by health centers employees and the same local NGOs partnerships used UNICEF for under five screening were used for continuity.
- Results from the supplementary feeding program are far below target: 33 sites were supplied with commodities; 212 tons were distributed to approximately 7,000 children suffering from moderate acute malnutrition. Good results were obtained at sites managed by church groups already offering nutritional rehabilitation programme.

General conclusions on the CERF-funded nutrition response

During 2007, the CERF funds kick started the response to the nutrition crisis allowing interventions to begin during the rainy season and by default putting systems in place to address distribution needs during subsequent flooding. Training of health agents and provision of therapeutic feeding, drugs and anthropometric materials have increased the access to adequate care of malnourished children and the improvement of the nutritional status of children under five.

2. Flooding

United Nations Children's Fund (UNICEF)

UNICEF's objectives included addressing urgent health, water and sanitation and shelter needs of flood affected vulnerable population and capacity building, using existing structures through collaboration, training and on going support rather than establishing parallel systems.

Project achievements

- A total of 36,000 people benefited from the emergency response. Beneficiaries divided into 30,000 people in Savanes and 6,503 in Maritimes (1,163 men, 1,641 women and 3,700 children)
- In Savanes emergency supplies were delivered in September. In total, approximately 30,000 people benefited out of which 11,000 were initially Internally Displaced Persons (IDPs), some 19,000 people in flood affected areas who had not been displaced benefited from water and sanitation interventions and supplies, and 2,500 children under five years old benefited from the emergency intervention.
- Safe drinking water was made available to those people whose water sources have been contaminated. Local capacity built to test and monitor water sources and to use emergency water purification supplies. In Savanes, 11,000 IDPS had access to safe drinking water in September and October, later in the year 65 pumps and wells were tested, 40 contaminated and treated.
- In total, 36,000 poor villagers (including host families and subsistence farmers and rural unemployed) affected by the floods in Togo benefited from measures to prevent health problems.
 In 21,000 bed nets were distributed, ten health kits and four cholera kits procured for both regions.
- UNICEF emergency coordination: UNICEF provided supplies and supervised the management of supplies while partners were responsible for the implementation of the project.
- Coordination with Ministry of Social Affairs, Ministries of Health, Agriculture, Rural, Water and the regional Planning Directorate as the focal point of coordination in this emergency.

World Food Programme (WFP)

Project achievements

- WFP concluded a partnership with OCDI (Caritas) and Togolese Red Cross and was able to launch operations with a second CERF grant and assist 56,612 beneficiaries in November and December with a total of 871 MT of assorted commodities. General food shortage and high market prices resulted in delays in procurement process thus forcing NGOs to postpone distribution schedule of second ration for several months. At time of writing, this operation was scheduled to resume ahead of the lean season;
- In parallel, WFP and FAO carried out an emergency food security needs assessment. This study will allow WFP and its partners to ensure effective and most adapted responses in order to mitigate effects of food insecurity in most affected areas during the lean season.

Food and Agriculture Organization of the United Nations (FAO)

The objective was to improve the revenue and situation of 2,000 flood affected rural families (estimated at average size of six household members) through the provision of seeds and tools for local production, training and support for the organization of production and marketing of produce.

Project achievements

- A partnership with RAFIA (Recherche Appui et formation aux Initiatives d'Autopromotion) to provide logistic support and technical supervision of the beneficiary farmers in Savanes;
- RAFIA provided cascade training to other agricultural NGOs and cooperatives including ICAT,
 JARC and CARTO and to the Ministry of Social Affairs staff. Training included management of cooperatives;
- The identification of the 2,000 beneficiaries was completed;
- Seedlings were prepared on all the production sites concerned by the project. A poor germination rate of "short" pepper seeds was observed on some sites, however, the situation improved significantly on all the sites where the germination rate that was barely 40 percent three weeks subsequent to the planting improved to be estimated at over 90 percent five to six weeks after planting. For the other tomato, okra, and onion seeds the germination rate on all the sites attained 80 and 100 percent;
- Planting of tomato and 'finger' pepper (red pepper) took place by December 2007 while those of
 onion took place only from the second week of January 2008. In the case of okra, it was planted
 directly together with tomato or alone. The seedlings did so well and by the second week of 2008,
 a great number of the vegetable farmers planted their parcels of land particularly with tomato and
 onion.
- Visit to the various sites in January and February to ascertain the development of the vegetable farming activities made it possible to observe that the planted parcels of land were doing well.

General conclusions on the CERF-funded floods response

The response enabled those most vulnerable to access medical supplies, food and shelter and have access to clean water. Initial responses were possible in a matter of just ten days (though this has to be improved upon greatly) contributing to the limitation of mosquito, water and respiratory-bourne illness and protecting young children and their families from exposure and starvation. Efforts will contribute to lessons learned for emergency monitoring to improve the coordination between UN agencies and national authority in case of floods or others disasters in 2008.

The CERF financing was a quick and very favorable response to support as far as agriculture is concerned and through vegetable farming. An assessment of the activities makes it possible to affirm that the project is properly being carried out and promises very encouraging results. Activities already carried out were done in very good conditions to the satisfaction of the beneficiaries and their supervising technicians. Even beyond the 2,000 vegetable farmers who benefited from the project, this project also provided seedlings and equipments to other vegetable producers in the spirit of co-operation and solidarity among the producers on the sites.

(a) Monitoring and Evaluation

Nutrition programmes were monitored through the submission of weekly statistics by implementing partners and the Ministry of Health to its Nutrition Section and UN agencies. Field visits were made to the project sites regularly by UNICEF, WFP and local authorities to ensure the progressive implementation of the work and the adherence to protocols. Planning missions were undertaken by national authorities as each stage of the programme is rolled out in new areas.

Flood response: Response to the floods was monitoring in different phases. FAO has made regular visits to vegetable production sites to assess impact with national and local partners. Water and sanitation responses were monitored in the emergency phase by international experts from UNICEF and the Red Cross as were non-food item (NFI) distributions. An initial evaluation of the use of emergency water and sanitation distributions showed a high level of utilization using correct methods in both Savanes and Maritimes. All NFI distributions were made by local implementing partners supervised by the French Red

Cross and the local Ministry of Social Affairs and lists submitted to regional authorities and UNICEF for follow up. Food items and distribution were monitored by WFP staff, Caritas and the Togolese Red Cross.

An inter-agency evaluation mission lead by the Ministry of Social Affairs in February 2008 showed that not all affected communities had received assistance and that the longer term impact of flooding had not been addressed in the emergency response making families and communities vulnerable.

(b) Initiatives that complemented CERF-funded projects

Funds were received for the implementation of Nutrition programming by the European Commision Humanitarian Aid Office (ECHO). This allowed for the development of a phased approach to malnutrition in children under five which will focus on parent and community knowledge and education as well as response, and will address the problems of accessibility of health services to the very poorest in the short term (twelve to eighteen months).

For those affected by floods food and non-food items (NFI) distributions were essential to the well being and health of victims. Supplies of agricultural inputs were timely in providing income generation to affected families. Lessons have been learned for future climatic problems around coordination and management of responses and funds have been allocated from UN agencies in Togo to address these in 2008. In addition funds have been sought to ensure pre-positioning of supplies in case of flooding in 2008.

Medium and longer-term solutions to the chronic poverty of the communities most affected by nutritional and climatic emergencies are being reviewed in UNCT planning with the government.

IV. Lessons learned

1. Nutrition:

- The lack of available health staff in the nutritional rehabilitation centers underlines how training staff to prevent malnutrition is important;
- Statistics need to improved on nutritional levels;
- Nutritional programmes for children need to cover food and care of mothers for those children who need to be treated in therapeutic centers;
- Mothers do not attend public health centers on a regular basis because of lack of services and traditional beliefs. Mothers' poor knowledge of malnutrition and cultural beliefs mean there is no understanding of the causes of malnutrition. The social communication should be considered as a key activity;
- Beneficiary identification process suffered from coordination problems between NGOs and local health centers;
- Poor education and cultural habits have also to be taken into account for moderate nutritional problems in communities as well as severe ones;
- Globally, many obstacles made it difficult for all protagonists to respond with swiftness in this
 particular situation. Nevertheless, WFP, UNICEF and Health Ministry are looking at new
 approaches to reach beneficiaries, in particular a community-based screening program that will
 be implemented closely with regional health management and community health agents in
 remote areas.

2. Floods emergency:

- Importance to have propositioned emergency non-food items and water and sanitation supplies and medical material;
- Necessity to work closely with government to revitalize national emergency preparedness and response planning and surveillance structures;
- UN system should coordinate activities and maintain regular meeting in case of emergency in the absence of government capacity;
- It should be stressed that FAO Togo's request for the CERF was quickly granted and the financial resources allocated in accordance with the CERF procedures;

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V. Results

Contoni	CERF	Amount	Number of	landon en tin a	Famoustad	A construction and immediately for
Sector/ Cluster	projects per sector	disbursed (\$)	Beneficiaries (by sex/age)	Implementing Partners	Expected Results/Outcomes	Actual results and improvements for the target beneficiaries
Nutrition (WFP)	07-WFP-039	\$1,055,622	Planned:70,000 Actual: 7,000 children under five suffering from moderate acute malnutrition	UNICEF, Togolese Ministry of health and OCDI- Caritas	Reinforce and/or enhance the capacity of health centers and support supplementary feeding program in order to address severe and moderate acute malnutrition (children under five) in the region of Kara, Savanes and Maritime. Complement current WFP intervention in Maritime region in communities of origin of most refugees.	 15 health care centers were provided with food for distribution in Kara and Savanes. An advanced strategy identification process will take place early 2008. 18 health centers in districts of origin of refugees in the Maritimes region were integrated in the project. (Five more to come). 7,000 beneficiaries
Nutrition (UNICEF)	07-CEF-046	\$1,310,750	7,104 children under 5 1,406 health centre workers an outreach workers	WFP, Togolese Ministry of health, OCDI- Caritas, Togolese Red Cross.	 Caring for and preventing severe malnutrition among children under the age of five Capacity building for national health staff 	 Opening and equipping of 84 nutritional rehabilitation centers Admission and treatment of 7,104 children Training of community health workers in partnership with the Togolese Red Cross and 3ASC: Training of 50 trainers, 255 health professional and 1,151 community health workers for screening and referral of malnourished children. Elaboration and training on national protocol for the management of moderate acute malnutrition: training of 50 trainers
Floods: Food security (WFP)	07-WFP-063	\$1,000,000	Planned: 60,000 Actual: 56,612 (25,476 male, 31,136 female or 11,322 families)	UNICEF, FAO, Togolese Red Cross, OCDI- Caritas and Togolese authorities	 Reinstitute a "relative" food security situation in affected areas Provide 2 months food aid rations to 60,000 floods victims 	 Immediate food assistance was provided to 56,612 beneficiaries in Maritimes and Savanes. Despite a shortage in maïze in Savanes, most affected areas of Oti and Kpandjal were prioritized. 871 tons of commodities distributed. The operation will continue early 2008 and 1,220 tons will be distributed to cover the immediate needs of 64,000 beneficiaries in the region of Savanes.

						•	Perspective of new joint assessment will help adapt response for the lean season which is expected to be earlier in 2008.
Floods: Water and Sanitation and Shelter (UNICEF)	07-CEF-077	\$225,770	36,000 including 6,200 children who benefited directly	OCDI, Togolese Red Cross, Ministry of Social Affairs as Coordinator in Lomé, Ministries of Health, Agriculture, Rural, Water. And Sar-Afrique.	Address urgent health, water and sanitation and shelter needs of flood affected vulnerable population in flood affected areas of Togo an access and high coverage: using a decentralized distribution system by the Togolese Red Cross, with local Social Affairs agents. Provide services and supplies before there are serious health repercussions from the flooding. The program aims to preposition medical supplies and provide mosquito nets for the most vulnerable. Address needs without damaging existing coping mechanisms: support will be short tem and integrated with the food and re stocking activities of other agencies to prevent development of dependence on external assistance. Capacity building: building on existing structures through collaboration, training, and ongoing support, rather than establishing parallel systems.		36,000 people affected by the floods benefited from emergency medical treatment and the distribution of impregnated bed nets, anti-cholera and anti-malaria kits, water analysis equipment, chlorine tablets and essential medicines.

Floods: Food security (FAO)	07-FAO-051	\$210,790	2,000 households / farmers	Local NGOs: RAFIA, Jeunes et Adultes Ruraux Catholiques, CARTO, rural flood teams and ICAT and the Min of Action Social	 Identification of sites and choice of the beneficiary farmers. Reception and distribution of inputs (vegetable seeds, fertilizer) and farming tools Provision of seedlings and pricking out Supervision of the parcels of land Training on management of cooperative farming leads to marketability of crops 	•	2,000 farmers given training in management of seeds, cooperative small hold farming and marketing of produce. 2,000 farmers (with average of six members per household) each received a hoe, a cutlass, an onion hoe, watering can and a wheel-barrow. The 2,000 beneficiaries shared seeds for 50,000 tomatoes, 100,000 onions, 15,000 okra and 10,000 peppers among themselves. 80 to 100 percent germination and crops produced
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List of Acronyms

CARTO- Cartographic Information Division

CERF- Central Emergency Response Fund

EPR- Emergency Preparedness and Response

ECHO- European Commission Humanitarian Aid Office

FAO- Food and Agriculture Organization of the United Nations

NFI- Non-food items

NGO- Non-governmental organization

RAFIA - Recherche Appui et formation aux Initiatives d'Autopromotion

RC- Resident Coordinator

UNCT- United Nations Country Team

UNDP- United Nations Development Programme

UNHCR- United Nations High Commissioner for Refugees

UNICEF- United Nations Children's Fund

WFP- World Food Programme

WHO- World Health Organization