



TOGO

2025 IFRC network annual report, Jan-Dec



13 July 2026

IN SUPPORT OF THE TOGOLESE RED CROSS



5

National Society
branches



311

National Society
local units



92

National Society
volunteers



46,937

National Society
staff

PEOPLE REACHED

Emergency
Operations



905

Climate and
environment



7,775

Disasters
and crises



7,775

Health and
wellbeing



50,475

Migration and
displacement



905

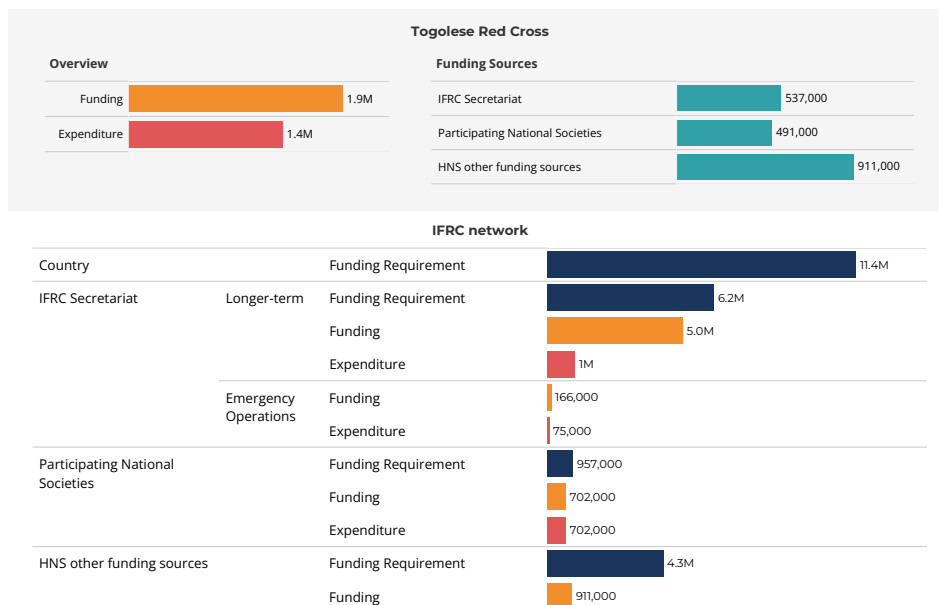
Values, power
and inclusion



3,803

FINANCIAL OVERVIEW

in Swiss francs (CHF)



Appeal number **MAATG002**

*Information on data scope and limitations is available on the back page

ONGOING EMERGENCY INDICATORS

MDRTG010 / *Togo Population Movement*

Migration and displacement

Number of migrants and displaced persons reached with services for assistance and protection



STRATEGIC PRIORITIES

Climate and environment

Number of people reached with activities to address environmental problems

8,000

Number of people reached with activities to address rising climate risks

8,000

Disasters and crises

Number of people reached with disaster risk reduction

8,000

Health and wellbeing

Number of people donating blood

20,000

Number of people reached by the National Society with contextually appropriate water, sanitation and hygiene services

84,000

Migration and displacement

Number of Humanitarian Service Points (HSPs) providing assistance and/or protection to people on the move along migration routes

1

Number of migrants and displaced persons reached with services for assistance and protection

905

Values, power and inclusion

National Society has a Community Engagement and Accountability policy, strategy or plan

Yes

Number of people reached by protection, gender and inclusion programming

4,000

ENABLING FUNCTIONS

Accountability and agility	National Society has a Protection of Sexual Exploitation and Abuse (PSEA) policy to enforce prevention and support survivors	Yes
	National Society is implementing a digital transformation roadmap in line with the IFRC strategy	Yes

IFRC NETWORK BILATERAL-SUPPORTED ACTIVITIES

National Society	Funding Reported	Climate and environment	Disasters and crises	Health and wellbeing	Migration and displacement	Values, power and inclusion	Enabling Functions
French Red Cross							
German Red Cross							
Italian Red Cross							
Swiss Red Cross	702,000						

Total Funding Reported **CHF 702,000**

Q1. OVERALL PERFORMANCE

Context

The year 2025 saw significant political transition and continued humanitarian challenges for Togo. The country completed its shift from a presidential to a parliamentary system of governance, with the new Constitution entering into force on 5 May 2025. The first senatorial elections in the country's history were held in February 2025, marking a further milestone in this institutional transformation. The political landscape continued to be dominated by the ruling party UNIR, and the government, led by the Prime Minister as Head of Government, remained focused on consolidating the new constitutional framework across the country's five regions.

On the health front, Togo continued to face epidemic threats. Measles cases were reported, particularly in the Savanes region, while Dengue fever cases were also recorded in various parts of the country. The Ministry of Health maintained its response efforts through capacity building of health workers and community relays, while the Universal Health Insurance scheme (AMU) continued efforts to extend coverage and awareness among the population.

The economic situation remained challenging, with inflation continuing to erode household purchasing power. Against this backdrop, the government set ambitious national budget goals aimed at sustaining public services and development priorities.

The security situation in the northern Savanes region remained a serious concern, with the state of emergency extended as terrorist threats persisted. Ongoing attacks resulted in loss of lives and continued to drive population displacement toward the southern regions of the country, placing additional pressure on host communities and public services.

Key achievements

Climate and environment

In 2025, the Togolese Red Cross strengthened its implementation of the Resilience Building through Multi-Stakeholder Engagement in Anticipatory Action for Climate-Induced Disasters (REBUMAA) project. This included the development of an action plan, workshops on governance and flood management, protection, gender, and inclusion (PGI) initiatives, creation of community early action committees, and preparation for unconditional cash assistance through the training and registration of data collectors. The National Society also held workshops on the 121 cash transfer platform to encourage the use of forecast-based financing. The forum provided a dynamic platform for collaboration and reinforced collective commitment to climate resilience.

Disasters and crises

As part of the emergency response, a joint needs assessment was conducted by the Togolese Red Cross. It supported local authorities, registered affected households, and provided 3,251 food parcels to households in need across three prefectures such as Nassablé, Carnaval, and Korbongou (Tône), Mandouri and Gnalé (Kpendjal), and Ponio and Tamboaga (Kpendjal-Ouest). Each parcel contained 26 kg of maize, 16.7 kg of rice, and 6.6 kg of lentils/beans, providing essential food assistance to the most affected families.

Health and wellbeing

Health was one of the largest areas of intervention for the Togolese Red Cross. Under the GC7 PALU Malaria and Tuberculosis Prevention Project, the National Society supported 7,500 community health workers (CHWs) in delivering their activity packages. On tuberculosis, the National Society ensured active case finding, referral and follow-up of confirmed cases, supported by regional performance-sharing meetings and large-scale community sensitization. The Saving Lives and Livelihoods Programme (SLL) Phase II furthered adult vaccination. As part of Health Emergency Preparedness an enhanced vulnerability and capacity assessment (eVCA) was conducted to promote community-based risk reduction and first aid. The project also advanced water, sanitation, and hygiene (WASH) infrastructure by designing latrines in collaboration with the Ministry of Water and conducting joint site assessments. As part of the

emergency appeal, the National Society provided insecticide-treated nets, sensitization sessions, and [mental health and psychosocial support](#).

Migration and displacement

In 2025, the Togolese Red Cross continued to respond to the [population movement emergency](#). As part of the efforts, the Savanes region received regular field visits with the support of community leaders who facilitated access to displaced populations. A needs and feasibility assessment for the establishment of [humanitarian service points](#) (HSPs) identified the priorities of people on the move including health, food, shelter and protection (including psychosocial support and sexual and gender-based violence) as priority needs. The HSP particularly assisted in the areas of [Restoring Family Links](#) (RFL) and [psychosocial support](#).

Values, power and inclusion

The Togolese Red Cross strengthened its approach to [community engagement and accountability](#) (CEA) by developing dedicated tools to enhance participation, transparency, and feedback mechanisms across programmes and responses. As part of project implementation, CEA was institutionalised through the establishment of 10 Community Feedback and Early Action Committees (CRIAP-C) across the Maritime, Plateaux, and Kara regions. Under [protection, gender, and inclusion](#) (PGI) efforts, volunteer training incorporated modules on [Protection from Sexual Exploitation and Abuse](#) (PSEA) and [Sexual and Gender-Based Violence](#) (SGBV). Mothers and fathers clubs were also supported through training on sexual misconduct, reporting, and victim support.

Enabling local actors

In 2025, The revision of Togolese Red Cross Statutes moved forward significantly with the integration of recommendations from the ICRC, IFRC, the Management Committee, and the Joint Revision Commission. A key objective of the REBUMAA project is to strengthen multi-stakeholder governance in disaster preparedness. To this end, several advocacy and humanitarian diplomacy actions have been undertaken. Key activities that the Togolese Red Cross carried out included updating the National Society's Strategic Development Plan, launching the external audit, reviewing the human resources management policy ahead of implementation.

Q2. CHANGES AND AMENDMENTS

Nothing to report.

Q3. MEASURING RESULTS OF THE IFRC NETWORK ACTION

ONGOING EMERGENCY RESPONSE

For real-time information on emergencies, visit IFRC GO page: [Togo](#)

Emergency Appeal Name	Population Movement Savannah region
Emergency Appeal number	MDRTG010
People affected	171,728
Duration	14 March 2023 to 30 June 2025
Funding requirements	Funding requirement through the IFRC Appeal: CHF 4 million Total Federation-wide funding requirement: CHF 6 million
Link to Emergency Appeal	Emergency appeal
Link to Latest Operational Strategy	Operational Strategy
Latest Operations Update	Operational update

The Sahel conflict has triggered a major displacement crisis, with nearly 60,000 people seeking refuge in Togo's Savanes region by September 2023 due to escalating violence, attacks on civilians, and the destruction of infrastructure. This influx has strained already limited resources, exacerbating food insecurity, malnutrition and disease among both the displaced and host communities, who are already coping with poverty and climate change impacts. Women and girls face heightened risks of gender-based violence.

Short description of the emergency operational strategy

The operation combines emergency relief, recovery and resilience-building to support affected communities. During the initial phase, the Togolese Red Cross provided critical aid, including food, water, and healthcare. The highlights of the assistance are as follows:

Shelter, housing and settlements: Essential items like blankets, bedding, kitchen sets, and cleaning materials were distributed to households.

Livelihoods: Essential food assistance, through cash and in-kind transfers, was provided to the most vulnerable households arriving in Togo.

Health and care including water, sanitation and hygiene (WASH): Community-based mental health and psychosocial support (MHPSS) services were provided through peer support groups, recreational activities and counselling, while psychological first aid training was provided to responders. First aid posts were established, sanitation gaps were identified and addressed, and WASH communities were formed to improve hygiene and strengthen emergency response capabilities.

Protection, gender, and inclusion (PGI): Training provided on prevention and response to sexual exploitation and abuse (PSEA) and child safeguarding policies to staff and volunteers. Specialized protection measures implemented for vulnerable groups, including children, pregnant women and minorities.

Community engagement and accountability (CEA): Training was provided on feedback mechanisms, and staff was equipped with tools for effective feedback management. Coordination included participation in AAP/CEA working groups, integrating CEA across sectors, and developing SOPs for handling sensitive feedback.

Migration: Humanitarian Service Points (HSPs) along migration routes were established, essential services such as emergency health care, first aid, food, water and psychosocial support was provided along with safe referrals for displaced persons and migrants.

STRATEGIC PRIORITIES



Climate and environment

Progress by the National Society against objectives

In 2025, the Togolese Red Cross significantly strengthened its disaster preparedness and response capacity through the implementation of the Resilience Building through Multi-Stakeholder Engagement in Anticipatory Action for Climate-Induced Disasters (REBUMAA) project.

The project was implemented in Benin, Nigeria, and Togo. It combines a community component, driven by national Red Cross societies, and a research component, led by partner universities. In Togo, activities with WASCAL/University of Lomé and national/regional stakeholders included the development of an action plan, workshops on governance and flood management, protection, gender, and inclusion (PGI) initiatives, creation of community early action committees, and preparation for unconditional cash assistance through the training and registration of data collectors.

In April, the REBUMAA project teams from Togo and Benin participated in a workshop on the 121 cash transfer platform. The training strengthened participants' capacity to use the system for forecast-based financing, from beneficiary registration to contracting with financial service providers. By the end of the workshop, teams had mastered the platform's tools, verified system parameters, and initiated steps for digital cash transfer management, ensuring timely support to beneficiaries once early warning triggers are activated.

From May 2025, in Lusaka (Zambia), the CLAR Exchange Forum brought together over 200 participants from 35 countries. The REBUMAA project was represented by coordinators from Togo, Benin, Nigeria, and the IFRC Abuja cluster. Under the theme 'Co-Creating the CLARE Narrative', the event fostered experience-sharing and strategy development on climate change adaptation, gender and inclusion, communication, capacity building, best-practice dissemination, and resource mobilization. The forum provided a dynamic platform for collaboration and reinforced collective commitment to climate resilience.

Other key achievements include training of volunteers on early warning systems and beneficiary registration, establishment of community early action committees in high-risk areas, and enhancement of the monitoring and evaluation system through the use of digital tools such as KoboCollect.

IFRC network joint support

The IFRC supported the National Society through technical and financial support.

The **German Red Cross** provided financial support for the implementation of the third phase of the project 'Institutional Capacity Building in the Areas of Disaster Preparedness and Climate Change Adaptation in Togo'. The main objective of the project was to identify the obstacles and limitations to organizational and structural capacities for the implementation of proactive disaster management, with a view to developing best practices in multi-stakeholder governance for proactive and inclusive action within a harmonized framework.



Disasters and crises

For real-time information on emergencies, visit IFRC GO page: [Togo](#).

Progress by the National Society against objectives

As part of the emergency response, a joint needs assessment was conducted by the Togolese Red Cross. It supported local authorities, registered affected households, and provided 3,251 [food parcels](#) to households in need across three prefectures such as Nassablé, Carnaval, and Korbongou (Tône), Mandouri and Gnalé (Kpendjal), and Ponio and Tamboaga (Kpendjal-Ouest). Each parcel contained 26 kg of maize, 16.7 kg of rice, and 6.6 kg of lentils/beans, providing essential food assistance to the most affected families.

Prior to distributions, a structured registration process was conducted to identify and verify household heads eligible to receive the assistance, ensuring targeted and accountable delivery of food parcels.

IFRC network joint support

The IFRC supported the National Society through technical and financial support.



Health and wellbeing

Progress by the National Society against objectives

In 2025, health was one of the largest areas of intervention for the Togolese Red Cross. Projects spanned disease control, community health, blood transfusion, vaccination, and reproductive health. The National Society leveraged its auxiliary role to ensure its positioning on the relevant platforms and mechanisms of strategy, advocacy, and public health policy.

With regard to the Malaria and Tuberculosis Prevention as part of the GC7 PALU Project (Global Fund), the National Society covered 39 health districts of Togo, supporting 7,500 community health workers (CHWs) in delivering their activity packages. Seasonal malaria chemoprevention campaigns were conducted alongside insecticide-treated bed net distribution and community-level case management. Severe cases were referred to health facilities. On tuberculosis, the Togolese Red Cross ensured active case finding, referral and follow-up of confirmed cases, supported by regional performance-sharing meetings and large-scale community sensitization.

It also supported the National Blood Transfusion System by implementing the Centrale and Kara regions with support from Africa Centre for Disease Control. The project launched with a 75-participant kick-off workshop. Four training sessions, a harmonization workshop on communication tools, and a capacity-building session were organized. Twelve local radio managers were also engaged to support donor mobilization.

The National Society also continued its [Saving Lives and Livelihoods Programme](#) (SLL) Phase II. It was implemented in the Agoè and Golfe districts and strengthened Risk Communication and Community Engagement (RCCE) in support of adult vaccination. A KAP survey assessed vaccine acceptance, door-to-door sensitization reached households, and mass campaigns targeted priority groups. Practitioners and volunteers were trained in communication techniques for routine and Covid-19 vaccination promotion.

Community Mobilization for Vaccination through GAVI Grants was carried out in the Kozah district, six community dialogues were organized in partnership with the POSCVI Togo platform to strengthen community commitment to routine vaccination and address hesitancy in target localities.

Health Emergency Preparedness was also strengthened through the Pandemic Fund in partnership with the World Health Organization in three districts of the Savanes region. An [enhanced vulnerability and capacity assessment](#) (eVCA) was conducted in Kpendjal-Ouest, Kpendjal and Tône. Volunteers were trained in [community-based risk reduction](#) and [first aid](#), nine emergency committees were established, and a community feedback mechanism was deployed.

The Water Supply and Sanitation Project in Four Prefectures, supported by the Islamic Development Bank, aimed to improve living conditions by reducing water-borne diseases and supporting poverty alleviation. The project also

expanded access to safe and sustainable water, sanitation, and hygiene (WASH) services while creating jobs for youth, women, and men in Afagnan, Adeta, Kougnohou, and Djarkpanga. The National Society implemented the sanitation component including institutional and public latrines, and hygiene promotion through Community-led Total Sanitation and behaviour change approaches.

The project advanced WASH infrastructure by designing latrines in collaboration with the Ministry of Water and conducting joint site assessments. A total of 56 institutional latrine blocks (4 cabins each, gender-segregated, and disability-accessible) were planned for health facilities, with 42 completed, certified, and in use, and 14 still under construction. Preparations also progressed for 80 public latrine/shower blocks in 32 localities, including forming local monitoring committees, revising plans with relevant ministries, securing 55 land donation agreements, and conducting assessments to ensure facilities are built in viable community-identified locations.

As part of its population movement emergency appeal, the Togolese Red Cross distributed 3,000 insecticide-treated nets (ITNs) to 1,500 households. All recipients received sensitization sessions on covering proper net hanging techniques and correct usage practices, with particular emphasis on protecting the most vulnerable household members, including children under five years of age, pregnant women, and the elderly.

At the community level, 100 volunteers conducted community-based disease surveillance to monitor the incidence of communicable diseases among refugee and internally displaced populations, enabling early detection and timely referral where required.

In parallel, mental health and psychosocial support (MHPSS) services were extended to 2,500 individuals, with a focus on those affected by violence or bereavement resulting from the ongoing insurgency. To deliver this assistance, 100 volunteers were trained in psychosocial support methodologies, equipping them to provide structured and compassionate care to the most affected community members.

IFRC network joint support

The IFRC supported the Togolese Red Cross with its multiple health interventions. It also assisted with the implementation of sanitation during the planning of institutional and public latrines, and hygiene promotion through Community-led Total Sanitation (CLTS) and behaviour change approaches.

The **Swiss Red Cross** supported the National Society with strengthening community health resilience in the Plateaux and Centrale regions with a project focused on community health, climate change and WASH interventions.



The Togolese Red Cross organised nighttime first aid class to give people who acquire training through the day. (Photo: The IFRC)



Migration and displacement

Progress by the National Society against objectives

In 2025, the Togolese Red Cross's efforts were aimed at responding to the Population Movement emergency. The Savanes region received regular field visits with the support of community leaders who facilitated access to displaced populations. It is worth noting that most displaced persons were accommodated with host families or in the homes of local chiefs.

A needs and feasibility assessment for the establishment of Humanitarian Service Points (HSPs) was conducted to identify the priorities of people on the move. An assessment protocol and data collection tools were developed, and a two-day training was delivered. Data was collected from 250 households in Tône and Mandouri including 100 IDPs, 100 displaced persons and 50 host families complemented by interviews with authorities and humanitarian actors. The assessment confirmed the relevance of HSPs and identified health, food, shelter and protection (including psychosocial support and sexual and gender based violence) as priority needs.

Following consultations with stakeholders, including the National Civil Protection Agency (ANPC), the Togolese Red Cross established a fixed HSP at its branch headquarters in Dapaong. The HSP has been instrumental in providing assistance to refugees and IDPs, particularly in the areas of Restoring Family Links (RFL) and psychosocial support (PSS), given the significant protection concerns around unaccompanied minors and women in the operation. The TRC also reviewed

Additionally, the Togolese Red Cross provided assistance to newly arrived populations and host communities in the prefectures of Kpendjal, Kpendjal-Ouest and Tône. Interventions included shelter and settlement support, distribution of food and non-food items (NFI) kits to targeted households, and livelihood activities. Activities completed under the emergency appeal are outlined in the section above.

With support from the World Food Program, as part of a food assistance intervention through electronic vouchers, the Togolese Red Cross delivered food assistance to vulnerable households and families affected by the Sahel crisis across four prefectures of the Savanes region (Oti, Kpendjal, Tône and Cinkassé). Electronic vouchers (SCOP cards) were also distributed to targeted households, enabling beneficiaries to purchase approved food items from partner retailers. Transaction and retail price monitoring was conducted throughout implementation.

IFRC network joint support

The IFRC supported the Togolese Red Cross with technical and financial assistance through IFRC mechanisms such as the IFRC emergency appeal.

The ICRC supported the National Society with its Restoring Family Links (RFL) programme.



Values, power and inclusion

Progress by the National Society against objectives

The Togolese Red Cross strengthened its approach to community engagement and accountability (CEA) by developing dedicated tools to enhance participation, transparency, and feedback mechanisms. To further institutionalize CEA, a training workshop was organized in Kpalimé in March, equipping staff and volunteers with the skills to integrate CEA practices across programmes.

The institutionalization of CEA was achieved through a workshop that brought together National Society components and operational partners. During this workshop, CEA was formally adopted by stakeholders and has since been effectively integrated into the organization's operations.

As part of project implementation, particularly under the REBUMAA project, CEA was systematically applied through the establishment of 10 Community Feedback and Early Action Committees (CRIAP-C) across the Maritime, Plateaux, and Kara regions. Each committee is composed of seven members representing diverse social groups, ensuring inclusiveness and community ownership.

Under protection, gender, and inclusion (PGI) efforts, volunteer training incorporated modules on Protection from Sexual Exploitation and Abuse (PSEA) and Sexual and Gender-Based Violence (SGBV). Persons with specific vulnerabilities including unaccompanied minors, elderly women, and persons living with disabilities were accorded priority both in registration processes and in the receipt of distributed items, ensuring that the most at-risk individuals received timely assistance.

Volunteers were deployed across IDP sites, humanitarian service points, and refugee communities, where they conducted sensitization activities on violence prevention, anti-trafficking, and the prevention of sexual exploitation and abuse. These efforts contributed to raising community awareness and reinforcing protective norms among the affected populations.

Additionally, through the Fathers' Clubs Strategy with UNFPA, the National Society reached the Maritime and Savanes regions, to strengthen mothers' clubs and papa champions in Sexual Gender-Based Violence prevention. Activities included briefings on sexual exploitation and abuse prevention, sensitization campaigns on pregnancy danger signs, and community dialogues on GBV and positive masculinity. Nine field monitors ensured coordination and follow-up throughout the year.

Additionally, the training of mothers' clubs on reproductive health projects created and revitalized mothers' clubs around fifteen health facilities. Members were trained in reproductive health, sexual rights, nutrition and GBV prevention, contributing to increased attendance at health facilities for antenatal care, assisted deliveries and family planning. In total, 84 sessions trained over 420 Papas Champions and 1,600 Mothers' Club members on sexual misconduct, reporting, and victim support. Prior to this, 27 CRT members (9 monitoring officers and 18 national/regional staff) were trained online in PSEA by the Gender Programme Officer, UNFPA PSEA focal point, and the UNCT national PSEA coordinator.

Across the Savanes region, more than 200 religious leaders were also trained, while 100 sensitization sessions, 24 market activities, and 15 radio broadcasts reached thousands with messages on pregnancy danger signs, safe childbirth, and family planning.

IFRC network joint support

The IFRC supported the Togolese Red Crescent in strengthening Community Engagement and Accountability (CEA) mechanisms and the integration of Protection, Gender and Inclusion (PGI) minimum standards across operations.

ENABLING LOCAL ACTORS



Strategic and operational coordination

IFRC membership coordination

The IFRC works closely with member National Societies to assess the humanitarian context, humanitarian situations and needs; agreeing common priorities; co-developing common strategies to address issues such as obtaining greater humanitarian access, acceptance and space; mobilizing funding and other resources; clarifying consistent public messaging; and monitoring progress. This also means ensuring that strategies and programmes in support of people in need incorporate clarity of humanitarian action, of links with development assistance, and of efforts to reinforce National Societies in their respective countries, including through their auxiliary role.

The Togolese Red Cross is part of the four [IFRC Pan-African initiatives](#) focusing on Tree Planting and Care; Zero Hunger; Red Ready and National Society Development. The following National Societies work with the Togolese Red Cross Society for various long-term and short-term programmes:

The **French Red Cross** has supported the construction of the Voga Reception Centre for trainee nurses in the Maritime district, and it continues to support the project by training young nurses.

The **German Red Cross** is present in Togo with two delegates and 16 national staff. It supports activities in climate change adaptation and disaster risk reduction in two regions.

The **Italian Red Cross** supports the construction of the Ona (Plateaux) Health Centre and its effective functioning. Medical personnel and Italian Red Cross volunteers visit the health centre whenever possible, to provide specialist care and equipment and build the capacities of permanent staff members. The Italian Red Cross has recently granted a support fund for building the capacity of Mothers' Clubs the Kara Region.

The **Swiss Red Cross** is present in Togo with one delegate and 26 staff. It supports activities in health, WASH, climate change adaptation, disaster management and National Society development.

The **Qatar Red Crescent Society** and the **Turkish Red Crescent** have provided ad hoc support to the Togolese Red Cross.

Movement coordination

The Togolese Red Cross ensures regular exchanges with the IFRC, the International Committee of the Red Cross and participating National Societies, for the alignment of support and action between Movement partners. In times of emergencies, closer coordination is organized. This is carried out in line with the Strengthening Movement Coordination and Cooperation ([SMCC](#)) principles and the newly adopted [Seville Agreement 2.0](#).

The ICRC supports the National Society in the areas of restoring family links and communications, and training in disaster relief and management. The ICRC also works to disseminate information on the principles of intervention in emergency situations, the Fundamental Principles, international humanitarian law, and security and safety.

External coordination

In line with its auxiliary role, the Togolese Red Cross coordinates closely with the public authorities. It benefits from the support of different national consultation councils, and various networks and platforms in Togo such as the Conseil de Concertation pour l'Eau et l'Assainissement de Base au Togo, civil society organizations, the HIV Platform, WILDAF Togo, and many others.

The Togolese Red Cross is engaged and involved in the existing national coordination and communication mechanisms in the country. These include government institutions namely (ANPC, ANAMED, ANADEB), platforms working on Disaster Risk Reduction, health and WASH, research institutions such as WASCAL, and the [IFRC Climate Centre](#).

Other partners include UN agencies comprising the IOM, FAO, UNDP, UNFPA, UNHCR, UNICEF, WFP, as well as international NGOs such as The Global Fund, Plan International Togo, CRS, GIZ, Compassion International, Malaria Consortium, REDISSE and BM. Areas of partnership include:

- The Global Fund works with the National Society in the fight against malaria through communication actions, the management of simple malaria (with rapid malaria tests and distributions of malaria tablets), and building the capacity of grassroots organizations
- With UNHCR and IOM, the National Society is sometimes asked to facilitate the re-establishment of family ties, support relief distributions, and organize refugee awareness sessions on community health
- The partnership with FAO focuses on empowering people in rural areas to reduce poverty through improved livelihoods for women and men, for example supporting Mothers' Clubs to strengthen the resilience of flood-affected households in the Savanes region
- UNFPA works with the National Society to tackle gender-based violence. It also contributes to raising the rate of attendance at health centres by taking a community approach, working with Papas Champions (men's committees) and Mothers' Clubs

- UNICEF and the National Society have collaborated on the prevention of and response to health emergencies and development projects in maternal and child health, particularly the promotion of essential family practices.



National Society development

Progress by the National Society against objectives

The revision of Togolese Red Cross Statutes moved forward significantly with the integration of recommendations from the ICRC, IFRC, the Management Committee, and the Joint Revision Commission. The latest draft was validated and transmitted to joint ICRC/IFRC commission for final review. In parallel, the new Internal Regulations were approved during a workshop held in July. An Extraordinary General Assembly will soon be convened to vote on and adopt the revised Statutes.

IFRC network joint support

The IFRC provided technical support to the National Society.

The **Italian Red Cross** supported the National Society financially with the external audit of all accounts for the 2024 period.



Humanitarian diplomacy

Progress by the National Society against objectives

A key objective of the REBUMAA project is to strengthen multi-stakeholder governance in disaster preparedness. To this end, several advocacy and humanitarian diplomacy actions have been undertaken. In collaboration with the University of Lomé through WASCAL, awareness-raising missions were conducted targeting local, municipal, prefectural, and regional authorities in the three project regions, as well as key stakeholders including ANPC, ANAMET, the Department of the Environment, the Department of Water Resources, the Nangbéto hydroelectric power plant, and the SINTO sugar company. Furthermore, all stakeholders were engaged in a dedicated workshop to promote their active participation in the research activities led by WASCAL under the project

Since 2006, the National Society has been implementing structured actions in Disaster Risk Reduction and Climate Change Adaptation (DRR-CCA). These interventions cover multiple areas: flood damage reduction, food and nutrition security, strengthening community resilience, integrated rehabilitation of disaster-affected populations, climate risk management and anticipatory action, community early warning systems, and institutional capacity building.

All these experiences have made the Togolese Red Cross a leading humanitarian organization in DRR-CCA in Togo. In recognition of this role, it has been a member of the Board of Directors of the National Civil Protection Agency (ANPC) since 2017, and a member of the National Platform for Disaster Risk Reduction since 2008.

IFRC network joint support

The IFRC provided technical support to the National Society.



Accountability and agility (cross-cutting)

Progress by the National Society against objectives

Key activities that the Togolese Red Cross carried out included updating the National Society's Strategic Development Plan, launching the external audit, reviewing the human resources management policy ahead of implementation. It also developed and rolled out a digital system for managing individual staff performance plans.

With regard to the community engagement and accountability (CEA) tools, the National Society strengthened its approach by developing dedicated tools to enhance participation, transparency, and feedback mechanisms. To further institutionalize CEA, a training workshop was organized in Kpalimé in March, equipping staff and volunteers with the skills to integrate CEA practices across programmes.

IFRC network joint support

The IFRC provided technical support to the National Society.

Q4. AFFECTED PERSONS (PEOPLE REACHED)

See cover pages

Q5. PARTICIPATION AND ACCOUNTABILITY FOR AFFECTED PEOPLE – COMMUNITY ENGAGEMENT AND ACCOUNTABILITY

See Strategic Priority on 'Values, power and inclusion' under Q3: MEASURING RESULTS OF THE IFRC NETWORK ACTION

Q6. RISK MANAGEMENT

This information is not available in Annual Reports

Q7. EXIT STRATEGY AND SUSTAINABILITY

See Strategic Priorities or Enabling Local Actors, where relevant under Q3: MEASURING RESULTS OF THE IFRC NETWORK ACTION

Q8. LESSONS LEARNED

- Women with strengthened knowledge of the danger signs of pregnancy and childbirth not only take preventive measures and seek medical consultation early when these signs appear but also raise awareness among their peers. This indicates that complications related to pregnancy and childbirth danger signs in the 100 localities may soon disappear or at least be significantly reduced.
- The involvement of religious leaders, the selection of strategic sites (such as religious venues and district markets), and collaboration with health personnel at different levels make awareness-raising activities more effective.
- Combining multiple strategies facilitates the mobilization of all age groups and social categories to ensure knowledge transfer.
- Sexual violence (rape, molestation, harassment, abuse, and other forms of sexual misconduct) is a lived reality in communities; however, victims often remain silent due to barriers to reporting and the lack of adequate reporting mechanisms.

ANNEX 1. IFRC APPLICATION OF THE 8+3 REPORTING TEMPLATE

The IFRC network structures its result-based management along five Strategic priorities and four Enabling functions, developed based on the IFRC network's [Strategy 2030](#):

IFRC network Strategic Priorities	IFRC network Enabling Functions
SP 1 - Climate and environment	EF 1- Strategic and operational coordination
SP 2 - Disasters and crises	EF 2 - National Society development
SP 3 - Health and wellbeing	EF 3 - Humanitarian diplomacy
SP 4 - Migration and displacement	EF 4 - Accountability and agility
SP 5 - Values, power and inclusion	

The Federation-wide results matrix provides a standard way for the IFRC network to measure its progress towards Strategy 2030 implementation and supports consistent quality of the IFRC network planning, monitoring and reporting. To further advance coherence in monitoring across the IFRC network, a [Federation-wide Indicator Bank](#) has been developed and integrated into the Federation-wide monitoring systems for emergencies and longer-term work, structured along the Federation-wide results matrix as well. Signatory of the Grand Bargain Agreement, the IFRC has committed to its monitoring and reporting standards through integration of the 8+3 reporting template contents into its results-based management approach. The following mapping demonstrate the way in which this report aligns with 8+3 reporting:

8+3 template	IFRC network Annual Report (with variance in structure in red)
Core Questions	
1. Overall Performance	Overall Performance
2. Changes and Amendments	Changes and amendments
3. Measuring Results	Measuring Results
4. Affected Persons	Cover pages with indicators values
5. Participation & AAP	Under Q3 Strategic Priority 5: Values, power and inclusion – Community Engagement and Accountability
6. Risk management	Risk management
7. Exit Strategy and Sustainability	Under Q3 sub-sections by Strategic Priority/Enabling Function where relevant
8. Lessons Learned	Lessons learned
Additional Questions	
1. Value for Money/ Cost Effectiveness	Not included in annual reports
2. Visibility	Not included in annual reports
3. Coordination	Under Q3 Enabling Function 1: Strategic and operational coordination
4. Implementing Partners	Cross-cutting, with a focus on support to localization through the Q3 Enabling Functions 1 to 4
5. Activities or Steps Towards implementation	Cross-cutting in Q3 Strategic Priorities and Enabling Functions
6. Environment	Under Q3 Strategic Priority 1: Climate and environment



The International Federation of Red Cross and Red Crescent Societies (IFRC)

is the world's largest humanitarian network, with 191 National Red Cross and Red Crescent Societies and around 15 million volunteers. Our volunteers are present in communities before, during and after a crisis or disaster. We work in the most hard to reach and complex settings in the world, saving lives and promoting human dignity. We support communities to become stronger and more resilient places where people can live safe and healthy lives, and have opportunities to thrive.

DATA SCOPE AND LIMITATIONS

- **Timeframe and alignment:** The reporting timeframe for this overview is covering the period from 1 January to 31 December 2025. However, due to the diversity of the IFRC and differences in fiscal years, this coverage may not fully align for some National Societies.
- **Financial overview:** This overview consolidates data reported by the National Society and its IFRC network partners, as well as data extracted from IFRC's financial systems. All reported figures should include the administrative and operational costs of the different entities. The financial data with a grey background is solely reported by the National Society, including the funding sources. Financial reporting is often times estimated depending on availability of financial figures, closing of financial periods, and may be incomplete. 'Not reported' could sometimes mean 'not applicable'. Also note that funding requirements are already reflected in the published 2025 IFRC network country plan. The total funding requirements show what the IFRC network has sought to raise for the given year through different channels: funding through the IFRC, through participating National Societies as bilateral support, and through the host National Society from non-IFRC network sources. All figures should include the administrative and operational costs of the different entities.
 - » Host National Society funding requirements not coming from IFRC network sources can comprise a variety of sources, as demonstrated when reporting on income in the IFRC Federation-wide Databank and Reporting System
 - » Participating National Society funding requirements for bilateral support are those validated by respective headquarters, and often represent mainly secured funding
 - » IFRC funding requirements comprise both what is sourced from the IFRC core budget and what is sought through emergency and thematic funding. This includes participating National Societies' multilateral support through IFRC, and all other IFRC sources of funding
- **Missing data and breakdowns:** National Societies have diverse data collection systems and processes that may not align with the standardized indicators. Data may not be available for some indicators, for some National Societies. This may lead to inconsistencies across different reporting tools as well as potential under or over-estimation of the efforts led by all.
- **Reporting bias:** The data informing this Federation-wide overview is self-reported by each National Society (or its designated support entity) which is the owner and gatekeeper, and responsible for accuracy and updating. IFRC tries to triangulate the data provided by the National Societies with previous data and other data in the public domain.
- **Definitions:**
 - » **Local units:** ALL subdivisions of a National Society that coordinate and deliver services to people. These include ALL levels (provincial, state, city, district branches, sections or chapters, headquarters, and regional and intermediate offices, as well as community-based units)
 - » **Branches:** A Branch has its roles, responsibilities and relationship with the National Headquarters defined through the National Society's Statutes, including the level of autonomy given, especially in the area of its legal status, mobilising local resources and building local partnerships, and the decisions it makes. It has a local-level decision-making mechanism through its Branch members, board and volunteers, equally defined through the National Society's Statutes

ADDITIONAL INFORMATION

- [TG_Togo AR Financials.pdf](#) (Note: For emergencies for which a financial report is not yet available, see [MDRTG010](#))
- [IFRC network country plans](#)
- [Subscribe for updates](#)
- [Live Disaster Response Emergency Fund \(DREF\) data](#)
- Operational information: [IFRC GO platform](#)
- National Society data: [IFRC Federation-wide Databank and Reporting System](#)
- [Evaluations database](#)

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