

Releasing children from poverty  
**Compassion**<sup>®</sup>  
in Jesus' name

  
**UKaid**  
from the British people

*Celebrating a*  
**different**  
**PATH**

Improving maternal  
and newborn child  
health in Togo.

**This work has been made possible by the generous support of Compassion UK supporters and UK aid which matched public donations to the ‘Different Path’ Appeal. This enabled Compassion to improve pregnant women’s access to antenatal check-ups and trained birth attendants, offer life-saving assistance including basic healthcare, hygiene, nutritious food and safe water, as well as providing mentoring and support for families.**

## Executive SUMMARY

New motherhood is usually expected to be a positive and joy-filled experience, but for many women in poverty, having a baby is synonymous with suffering, illness and even death.

### **The statistics are startling.**

In sub-Saharan Africa, in 2020, there were 545 maternal deaths per 100,000 live births.<sup>1</sup> In fact, sub-Saharan Africa alone counted for 70% of global maternal deaths in 2020.<sup>1</sup> The region’s infant mortality rate is 72 per 1,000 live births.<sup>2</sup> In comparison, the UK numbers are 9.6 per 100,000 live births and 3.7 deaths per 1,000 live births,<sup>4</sup> respectively.

Togo, a small country in West Africa, is currently expected to miss 14 of the 17 Sustainable Development Goals. This is why, in partnership with the Foreign, Commonwealth & Development Office (FCDO), Compassion launched a project in Togo to increase survival rates of children in the first year of their life. For three years, 23 Survival projects have brought the knowledge and funding of the FCDO together with the contextualised experience of Compassion in Togo to serve pregnant mothers and their babies when they’re born.

### **The results are equally as startling.**

Births attended by a health professional were 28% above the national average.

Exclusive breastfeeding in the first six months was 31% above the national average.

With an approach focused on maternal education and support in accessing health care, as well as providing a skilled Child Survival Implementer in each community, the project has shown how local knowledge and educated parents can play a pivotal role in saving the lives of children.

See page 22 for number references.

In 2015, UN world leaders set a transformational course for the future of human development by creating the 17 Sustainable Development Goals.

Compassion puts these goals at the heart of our work, to combat poverty and inequality and transform our world. As a leading children's charity with 70 years of unwavering integrity and depth of professional experience, we're passionate about protecting and empowering every child left vulnerable by poverty.



**END POVERTY IN ALL ITS FORMS EVERYWHERE**



**END HUNGER, ACHIEVE FOOD SECURITY AND IMPROVED NUTRITION AND PROMOTE SUSTAINABLE AGRICULTURE**



**ENSURE HEALTHY LIVES AND PROMOTE WELL-BEING FOR ALL AT ALL AGES**



**ACHIEVE GENDER EQUALITY AND EMPOWER ALL WOMEN AND GIRLS**



**REDUCE INEQUALITIES WITHIN AND AMONG COUNTRIES**

Abandoned by her husband and pregnant with her second child, Ama was supported by a Survival intervention.



# Understanding the challenge

## TOGO

Togo is facing immense challenges related to poverty. According to the World Bank, 55% of the population lives below the poverty line,<sup>5</sup> and the country ranks 165th out of 189 countries on the UN's Human Development Index.<sup>6</sup> Unfortunately, Togo's population also lacks access to quality education and health care, which exacerbates the existing issues of poverty. In addition, a lack of infrastructure has contributed to difficulties in achieving economic growth and progress. As a result, Togo continues to struggle with providing its citizens with basic necessities and a better quality of life.

The COVID-19 pandemic has underscored the importance of food security in countries around the world, including Togo. As the war on Ukraine worsens food security in Togo, the development of sustainable food systems is paramount to improving the livelihoods of its citizens. In response, the government of Togo has introduced several initiatives aimed at increasing food security and providing relief to those affected by the pandemic. These efforts include agricultural development projects, nutrition awareness campaigns, and support for local farmers and fishermen. In doing so, Togo is working to ensure that its citizens have access to safe and nutritious food, a goal that will benefit the entire nation for years to come.

Togo is making a concerted effort to strengthen its national health policy, with the aim of providing accessible and affordable health services for all. The Togolese government introduced the Programme National de Développement Sanitaire (PNDS)<sup>7</sup> in 2017, a plan designed to create a well-functioning health system. Through the PNDS, Togo seeks to provide access to quality health services, increase public spending on health, reduce the out-of-pocket expenditure for citizens, and develop a comprehensive and inclusive national health insurance system.



Children sleeping at a Survival intervention.

Population:  
**8.7**  
million <sup>8</sup>

Population under 15:  
**40%** <sup>8</sup>

**92** out of **117**  
in the Global  
Hunger Index <sup>9</sup>

Primary school completion:  
**91%** <sup>5</sup>

Adult literacy rate:  
**67%** <sup>5</sup>

# Understanding the challenge

## SURVIVAL

The first 1,000 days of a child's life, from conception to aged two, are integral for building the foundations to thrive in the future. It's a time of unparalleled potential and vast vulnerability - when a child's brain begins to grow and develop and sets the basis for future health.

Nutrition, in particular, plays a foundational role in a child's development. Poor nutrition can cause irreversible damage to a child's growing brain, affecting their ability to do well in school and earn a good living - and making it harder for a child and their family to rise out of poverty.<sup>10</sup> According to the WHO, around 45% of deaths among children under five years of age are linked to undernutrition.<sup>11</sup>

By failing to invest in women and children in the first 1,000 days of life, countries lose billions of pounds to lower economic productivity and higher health costs.<sup>12</sup>

Pregnant women living in poverty often lack access to much-needed nutritional food, healthcare and environments vital to the well-being of their unborn child. This results in alarming levels of maternal and child mortality. Children don't get the opportunity to thrive as their very survival is so precarious.

Progress is being made - between 2000 and 2020, the maternal mortality rate dropped by 34%.<sup>13</sup> But it's not being made quick enough to reach the target set in the Sustainable Development Goals.

Adjowa, with baby Eyram on her back, going to fetch water.



**MATERNAL MORTALITY RATE GLOBALLY**  
**223**  
per  
100,000  
live births <sup>1</sup>

**MATERNAL MORTALITY RATE IN TOGO**  
**396**  
per  
100,000  
live births <sup>14</sup>

**CHILD MORTALITY RATE GLOBALLY**  
**37**  
per  
1,000  
live births <sup>15</sup>

**CHILD MORTALITY RATE IN TOGO**  
**63**  
per  
1,000  
live births <sup>16</sup>

# Implementing a SOLUTION

In light of the overwhelming evidence and in support of the Togolese government's strategy, Compassion and the Foreign, Commonwealth and Development Office partnered together on a three-year, £1 million project to increase the survival rates of children from birth and in the first year of life in three regions in Togo.

Global health expert Hans Rosling argues that child survival is achieved not solely through hospitals, but primarily through preventative measures by local nurses, midwives and educated parents.<sup>17</sup> As a result, Compassion's approach to tackling the challenge is built upon strong partnerships with the local church. Compassion partners with 23 local churches based in the communities where mothers need support, education and access to healthcare. By using this approach, sustainability and long-term change were ensured as the local church is a central part of the community and there to stay.

Focusing on maternal, newborn and child health (MNCH), and using UNICEF and WHO's joint initiative GOBI-FFF and CIMCI, the project built the capacity of local church partners to deliver the following:

- Workshops on nutrition, health and child development milestones
- Home visits to ensure the teaching was being embedded in the family
- Malaria net distribution
- Nutritional food supplements
- Financial support to access and attend:
  - ante-natal classes
  - health check-ups
  - medication
  - surgery if required
- A medical professional in attendance at the birth
- Post-natal follow-up
- Vaccinations for the newborns

These were achieved through the hard work of a Child Survival Implementer in each community. Funded by the project, the implementer lived in the community and often came from a medical background. They played a pivotal role in the success of the project.

After Marie's husband died, she found herself unable to feed her children. Then the local Survival intervention stepped in.



Over the three years of the project, which finished at the end of 2022, there have been great successes:

**2,339**  
mothers and babies  
have been part of the project

**653**  
babies have been born

IN THE PROJECT

NATIONALLY



**613**  
of them at  
full-term



**633**  
of them in the  
presence of a  
trained medical  
professional



**610**  
with a healthy  
birthweight



**621**  
mothers  
exclusively  
breastfed for the  
first six months



**65**  
teenage  
mothers have  
been supported

**8**  
mothers with  
disabilities have  
been supported

See page 22 for number references.



Baby Jeanette is part of a Survival intervention in Togo.

The project exceeded every one of its targets: \*

**21%**  
more births have been attended by a skilled health professional

**23%**  
more newborns and mothers received postnatal care within 48 hours of delivery

**17%**  
more women, with their children, slept under mosquito nets for the first year after pregnancy

**9%**  
more women participated in health workshops and nutritional counselling

\* The logframe for the project is available upon request.

## How the Different Path Appeal brought life and hope for **ADJOWA AND HER BABY**

### Struggling to survive

Adjowa was just one month pregnant when her husband, Antoine, was involved in a car accident which left him seriously injured. Soon after, Adjowa was laid off from her job as a cleaner. The family had no income—and no prospects for earning. They were forced to make the heart-breaking decision to send their two older children to stay with relatives.

Eating became a luxury they could only afford every few days. Unable to pay their rent, they were evicted. Antoine's sister welcomed them into her already-crowded home, but having enough food remained a struggle. "When my sister-in-law gave us a meal one afternoon, Antoine told me to save his share so I could eat it the next day. He went several days without food to provide for me," Adjowa says.

During the first seven months of her pregnancy, Adjowa didn't have a single prenatal consultation. "I feared neither I nor the baby would survive because I was so undernourished."

### Hope thanks to the Different Path Appeal

Adjowa's sister-in-law heard that a Compassion project at the local church was helping pregnant women and encouraged Adjowa to register. "The first support I received was a food kit. I'll never forget it. For the first time in months, we ate normally—we weren't having to skip meals for days on end."

Adjowa also received medical care, starting with a prenatal check. The project paid for all her medical fees and supplied her with clothes and hygiene items. "I didn't expect them to be so supportive. They gave me hope," she says.

However, after receiving so much, Adjowa worried the project would grow tired of assisting her. So, when she went into labour, she kept it to herself and prepared to deliver the baby at home. Thankfully, her sister-in-law realised and informed the project staff who immediately took Adjowa to hospital.

### "I will never forget what they have done for us."

When Adjowa's tiny baby was born, she wasn't breathing. The midwives rushed the newborn away for treatment. The project took care of every expense and baby Eyram's life was saved by the quick treatment of hospital staff. Two weeks later, mother and daughter were discharged in good health.

"I still can't believe the project paid for all our medical expenses! What I was going through was so difficult, I thought my life was over. I will never forget what they've done for us. Without the Compassion project my daughter and I would not have made it. The project staff and the other mothers in the programme have become like my family. I'm so grateful to have their support."

Adjowa holding her baby, Eyram.





# Mothers' STORIES

## Feedback from participants

In order to ensure the project was meeting the needs of the mothers and their children appropriately, a new feedback mechanism was created for them and other community members to share their anonymous experiences and suggestions.

“We now know how to take care of our children, we know how to do it. Before, there was tension between ourselves and our husbands when the child is sick because there is no money to go to the hospital. A quarrel arose between us, simply because of a medicine on display for one hundred francs to buy for the child. But with ‘Survival’, there are no longer these tensions and we understand each other now.”

“What I appreciated is that without the centre, maybe my child and I could not exist! To see how the pregnancy bothered me, I was there doing nothing, and the facilitator referred me to the Vogan hospital, without them, I don't know if me and my child would be alive today.”

“Yes, I would say there has been a change, following the adage of ‘healthy body in a healthy environment’, women will regularly clean the centre and its surroundings as well as schoolyards where their children will study, especially when they come from home with the tools they have used.”

“It is now with the arrival of Compassion that everyone knows that when we are pregnant we go to the prenatal consultation, if your child is sick we take him to the hospital, you the pregnant woman when you are sick we should take you to the hospital. These changes have totally come to the community. If the establishment of the birth certificate of the child lasts we are obliged to go and declare the child. The Survival staff take care of everything and there are no more children in the street without a birth certificate.”

“Before I felt bad in my body, but now that Compassion has made me do the check-up and treated the diseases identified, I want to say thank you. Now if I find myself in bad shape, it's only fatigue. The way I have benefited from Compassion is, I thank you; right now, if someone tells you my HIV status, you will not believe it. If you saw me before, compared to where I am now, you would be amazed.”



**I am Prénom.  
Victory is my child's name**

I gave birth three months ago. In fact, I was 3 months pregnant when my husband left me with the pregnancy, and I went to a lady to seek help for abortion. And this same lady told me that there is a programme which helps pregnant women. She said she was enrolled at four months of pregnancy in the Survival programme. It is with the Survival project that I was able to start doing my antenatal consultation. They supported me until my delivery. This centre paid the medical expenses and gave the midwife my delivery kit on the day of my delivery and continues to support me. Every month we have food kits at our reach. All that I can say is that God blesses the centre. I thank God for all these actions in my favour.

**I am Abia, mother of Claire, a participant in the Survival project**

Before being enrolled in the project, I had already given birth to a premature child who just lived a few days and died. I was registered with a pregnancy and the same problems came back already in the fifth month. I often got sick, but my husband did not take anything seriously, especially relying on his mother who says usually that she has ten children but has never been to the hospital with either the pregnancies or the children. For her, one does not need to be consulted by a so-called health professional to carry a pregnancy to term. When I was enrolled in the Survival project, I was consulted by a midwife of the local health centre, who after the examinations diagnosed me with severe malaria, which can easily cause my pregnancy to fail or make me give birth prematurely. They referred me to a bigger hospital for better care. I gave birth to a beautiful girl whom we named Claire. The Survival Implementer and the volunteer visit me every month and the lessons that they deliver help me to take good care of my baby, myself, and my husband. I



don't know how to express my gratitude to God and to the workers, but I believe that it is because of me and my family that God has allowed this project to be implemented in our community. May God bless especially the Survival Implementer and her volunteer. May there be a rain of blessings on the lives of donors and Compassion.

# Evaluators' COMMENTS

As with all FCDO grants, an external consultant undertook a completion report of the project. Their feedback included:

The counterfactual analysis showed that the project had an impact on the prevention of maternal and infant mortality and therefore the survival of co-beneficiaries. Indeed, the data showed a positive effect of the project on:

- The perception of the future of the beneficiaries and their children;
- The availability of mosquito nets in households;
- The number of prenatal care sessions received by beneficiaries; and
- Exclusive breastfeeding of children by beneficiary mothers.

The most substantial effects were noted on the number of prenatal consultations and the positive perception of the future of the beneficiaries and their children.

Also, the data showed that 61.7% of respondents believe that these project activities have led to less violence and conflict in their household.

The women have shown themselves to be more involved in the community than before thanks to the Survival project. They are more involved in the management of community assets compared to other women. They participate more in community meetings and take part in public sanitation activities.

The project objectives align perfectly with the objectives and priorities of Togo's national development policies and health sector plans.

In the opinion of the participants in the study, before the arrival of the Survival project, the financial difficulties of access to health care, the lack of information on the practices of well-being and good health, the problems of health, nutrition and hygiene in general were the characteristic bottlenecks of the populations in their living environment.

Mothers meet at a local church partner.



## What's NEXT?

Compassion continues to work with experts in maternal, newborn and child health including those in each of the countries where the programme is delivered, to improve the Survival projects and ensure they are meeting the contextual needs of the mothers and babies they are serving.

There are currently 2,094 Survival projects, across 26 countries, serving 61,458 mothers and babies. But there are many more mothers without the support they need. Compassion is committed to reaching as many as possible, by:

- **Creating Survival projects with each of the local church partners that have identified the need in their community. There are currently over 8,195 local churches partnering with Compassion.**
- **Implementing a new curriculum which supports more contextualisation and gives Survival Implementers greater resources and opportunities to meet more need.**
- **Continuing to engage with other NGOs on partnering to serve more mothers.**
- **Exploring other interventions to maximise the impact of the Survival projects – creating safe water sources, income-generation and livelihood opportunities and climate-change-resistant farming methods.**



Survival mothers meet to eat a nutritious meal together.

# End NOTES

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A building housing the stimulation room where mothers and children can come and play with toys to stimulate child development.



*Celebrating a*  
**different**  
**PATH**

Improving maternal  
and newborn child  
health in Togo.



[compassionuk.org/child-survival](https://compassionuk.org/child-survival)

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