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FINAL REPORT
HEALTH SECTOR SUPPORT
FOR CHILD SURVIVAL
IN TOGO

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To all of you,

THANK YOU.

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ABBREVIATIONS AND ACRONYMS

ATBEF	Association Togolaise pour le Bien-Etre Familial
BIE	National Investment Budget
CCCD	Combatting Childhood Communicable Diseases Project
CCSE	Child Survival Advisory Board
CMO	Chief Medical Officer
CNSE	National Commission for Child Survival
CS	Child Survival
DAC	Development Assistance Corporation
DEFP	Division of Teaching and Professional Training
DGAS	General Directorate of Social Affairs
DGSP	General Directorate of Public Health
DME	Division of Maternal and Child Health
DPFR	Directorate of Planning, Training and Research
EPI	Expanded Program for Immunization
GOT	Government of Togo
HE	Health Education
HIID	Harvard Institute for International Development
HSSCS	Health Sector Support for Child Survival
IEC	Information, Education and Communication
MCDI	Medical Care Development International
MCH/FP	Mother and Child Health Care/Family Planning
MHP	Ministry of Health and Population
MOH	Ministry of Health, Public Affairs and Women's Condition
MOP	Ministry of Plan
MPM	Ministry of Planning and Mines
MSAWC	Ministry of Social Affairs and Women's Condition
MSW	Ministry of Social Welfare and National Solidarity
NGO	Non-Governmental Organization
ORT	Oral Rehydration Therapy
PA	Physician's Assistant
PACD	Project Activity Completion Date
PCU	Planning and Coordination Unit
PSC	Private Service Contractor
PTDS	Triennial Health Development Plan
RWSS	Rural Water Supply and Sanitation Project
SNES	National Health Education Service
TOT	Training of Trainers
VDC	Village Development Committee

I EXECUTIVE SUMMARY

The following report describes the implementation of the Togo Health Sector Support for Child Survival Project, which began in September 1988 and ran until January 1993. Over that period of time, the project achieved the following:

A. Planning and Coordination of Programs

- o Semi-annual Child Survival Programming meetings were institutionalized;
- o A National Child Survival Commission was institutionalized; this commission is composed of all key Ministry of Health Directors and other actors, and is further broken down into working groups on specific topics (i.e. IEC, Family Planning, etc.);
- o A Child Survival Inventory was developed that is periodically updated; this inventory lists all child survival related activities and programs throughout the country.

B. Planning and Budgeting

- o A major seminar series on how to prioritize activities and develop plans and budgets was completed;
- o Chief medical officers were assisted in preparing prefectoral plans and budgets for the Annual Budget Submission of the GOT.

C. Management Information Systems

- o The first comprehensive study of MIS in the Ministry of Health was completed. This study placed an accent on management needs, as opposed to the simple computerization of functions.

D. Health Financing/Cost Recovery

- o A vast survey of 1,200 households was undertaken to determine health costs, income and willingness to pay. A survey of actual health center costs was also undertaken;
- o Workshops on health financing were organized, including reviews of pilot programs undertaken by UNICEF, GTZ, etc.; initial work on tariff structures; review of pharmaceutical distribution systems, etc.

E. IEC/Training

- o A nationwide training system based on multidisciplinary teams in each prefecture was established;
- o Educational materials were developed and training was provided to 750 front line public health personnel in such areas as Malaria, ORT, Vaccination, Family Planning and Nutrition.

F. Health Extension Services

- o An intersectoral Village Development Committee policy document was elaborated;
- o Provision of training was established in the technical areas listed under "IEC/Training."

G. Commodities

- o 162 motorcycles were provided to the Ministries of Health and Social Welfare;
- o Logistical support at the central level of the MOH supervisory functions (i.e., per diem, gas, transport) was provided;
- o State-of-the-art computer and office equipment was provided to the MOH.

In light of these achievements, this report offers the following recommendations:

A. Project Management

- o One of the first activities of future project implementation should be to quickly draw up a procurement plan for approval by USAID and the GOT. This plan should include a realistic time table that contains procurement amounts linked to key events.

B. Planning and Coordination Component**1. Planning and Coordination for Child Survival**

- o The planning framework developed by the MHP for the last few years, which includes Triennial Health Development Plans and Annual Action Plans, should be reinforced by both the MHP and the donor community.

- o The organization of well prepared and timely planning meetings is a key element of this planning process. In addition to the ones held at the central level, similar meetings should be organized at the prefectural and/or regional level.
- o At the central level, two annual meetings are necessary. One has to be held in June or July, and the other in January or February.
- o Meetings at the regional and prefectural levels should be organized in order to have the appropriate information ready for the central level meetings.
- o The workload that these activities represents should not be underestimated, and should be recognized as necessary to the implementation of a sound planning and coordination process.

2. Planning and Budgeting Training Seminars

- o The Ministry should encourage the use of these techniques and reference documents for its actual planning activities. One common reference will help establish standards for planning within the MOH.
- o Small training seminars could be organized once a year by the Ministry for those newly appointed personnel with no experience in health planning.

3. Cost Recovery

- o A committee on cost-recovery and a national coordinator should be appointed by the Ministry. Working groups should be set up under the guidance of this committee, and the following issues should be addressed in the near future:

Finalization of the accounting systems and procedures for the sale of essential drugs and user fees.

Elaboration of point-of-sale procedures to be used to sell essential drugs at all levels of the health care system.

Elaboration of financial control and audit procedures.

Finalization of the drug pricing system.

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4. Management and Information Systems

- o The Ministry should recognize information and management as a function within the MSP, assign responsibility for this function to some office, and give it the resources it needs. The office responsible should have the following terms of reference:

Maintain and update functional analysis of the Ministry.

Assist users of existing systems to get full benefit from them.

Analyze, assess requirements for, and design all new application systems.

Set standards for system software, hardware, application languages, and data base systems.

- o This Information and Management function could be attached either to Direction of Planning and Training or to the Direction of Common Affairs.
- o To fulfill its functions, the office will need a high-level manager, with status and credibility within the Ministry.

5. Policy and Strategy for Child Survival

- o The final draft of a Policy and Strategy for Child Survival document is now ready to be criticized and complemented by Ministry decision-makers, program managers and other experts. Such work could be conducted independently, or as a side activity of the annual planning meetings.

C. IEC/Training Component

1. Supervision

- o The time has come to focus on the on-site supervisory training that usually complements the short term training sessions.
- o Set supervision priorities for the prefectures in order to reinforce specific health centers, health programs, or categories of personnel.
- o Design supervisory mechanisms to ensure that supervision is efficiently conducted.

2. Quality of Services

- o Monitor the use of standardized CS IEC manuals and visual aids, especially

the utilization of the Family Planning-Child Survival IEC kit (Trousse PF-Survie de l'Enfant) which is still to be distributed.

- o Authorize the health workers to modify the format and presentation of the standardized key messages.
- o Set performance standards for each activity - managerial, clinical and IEC at every level of the health system.

3. Decentralized Services

- o Empower the prefectural level and permit its evolution according to a locally defined work plan. Allow it to institute its own mechanism to handle the logistics aspects of management.

4. Future Training Sessions

- o Plan the workshop for the preparation of curricula revision.
- o Update and improve the Ministry five-year training plan.
- o The number of training days or training sessions that each agent will be allowed to attend should be specified.

II. PROJECT SUMMARY**A. Project Name**

Health Sector Support for Child Survival (HSSCS)
USAID Togo Project n° 693-0228

B. Project Purpose

To assist the Government of Togo (GOT) to plan, manage and coordinate the delivery of child survival (CS) services in a rational, cost-effective way through:

- (1) a planning and coordination unit (PCU) to develop the Togolese government's capacity to plan, budget and coordinate CS activities both at the central level and between the central, regional and county levels;
- (2) a health centers support component to train health education teams in communication and health education techniques, and to provide them with means of transport, so they in turn can train rural public health personnel; and
- (3) a community outreach component to train community agents and village development committees (VDCs) in community mobilization techniques and CS topics, and to provide the agents with means of transport.

C. Executing Agencies

Ministry of Health and Population (MHP),
Ministry of Social Welfare and National Solidarity (MSW).

D. Technical Assistance Firms**(1) Prime Contractor**

Development Assistance Corporation (DAC)

(2) Subcontractors

Medical Care Development International (MCDI)
Harvard Institute for International Development
(HIID)

III. ACCOMPLISHMENTS AND LESSONS LEARNED

A. Project Management

1. Transition from the Rural Water Project

At the time of the transition from the Rural Water Project (RWSS) to the Health Sector Support for Child Survival Project (HSSCS), both the RWSS and the HSSCS were located within the same executing agency - the Ministry of Public Health and Social Affairs (MOPHSA). In practice, however, this agency represented an uneasy marriage between two previously separate Ministries - the Ministry of Social Affairs (which operated the RWSS), and the Ministry of Public Health (which was to operate the HSSCS project).

Thus, while USAID assumed the transition from RWSS to HSSCS would be a fairly simple administrative matter, since it was to be undertaken within the same executing agency, it was in fact viewed by the GOT partners as a major shift in resources between competing institutions. This ultimately resulted in a fair amount of infighting among project leaders who represented both "sides" of the MOPHSA. In hindsight, it would have been preferable to close out the RWSS entirely and clearly establish the HSSCS as a new project, rather than a "follow-on" to RWSS.

Furthermore, many of the conditions precedent (CPs) to the disbursement of funds by USAID which were established as part of the grant agreement with the GOT were in many cases not respected. For instance, a full-time director for the project was not available. Assuring that conditions precedent are met and respected is key to the success of any project.

As in all USAID development projects, the Chief-of-Party of the HSSCS project was tasked with a variety of technical and administrative responsibilities. During approximately the first two years of the project, the COP was engaged in a host of managerial, financial and personnel-related items. The COP was also required to coordinate donors, contractors, a large number of GOT ministries and services, and establish programs dealing with a wide range of health sector issues (such as national planning, IEC programming, community outreach, etc.).

The sheer number of these activities proved to be a great challenge to the project's first COP and led to unfocused and largely ineffectual programming, not to mention a great deal of frustration within and outside the project. After this initial experience, the contractor received approval to essentially divide the position into two: a financial manager was hired to deal with the administrative tasks, and a senior health planner was engaged to oversee the project's technical areas. This approach greatly facilitated project management and implementation, and a marked improvement was registered.

2. Procurement

One of the first tasks undertaken by the HSSCS was the development of a procurement plan for the purchase of all the major equipment to be financed by the project. For reasons unknown to the authors of this report, the necessary actions were not taken in a timely manner. One of the causes appears to have been an incomplete understanding of the procurement procedures involving USAID funding. Once the procurement plan was accepted there should have no longer been any need to seek, except for modifications, approval for the preparation of the individual tenders for bids or competitive procurement documents.

One of the first activities of future project implementation should be to quickly draw up a procurement plan for approval by USAID and the GOT. This plan should include a realistic time table that contains procurement amounts linked to key events. Effective project implementation will be better served by such a plan, if completed and approved in advance. This would also result in an efficient use of personnel that would otherwise have to devote time and effort to seeking waivers to prescribed procedures.

B. Planning and Coordination Component

1. Accomplishments

a) Annual Planning Workshops for Child Survival Activities

One of the main tasks assigned to the PCU was to introduce and institutionalize a standard, nation-wide Child Survival planning and budgeting exercise for the MOH. It was to involve officials from the central as well as the prefectural level, be carried out annually, and include five-year plans with detailed budgets for the first three years.

In December 1988, a first meeting to coordinate Child Survival activities took place under the auspices of UNICEF at Faza. The PCU then organized five meetings of this kind, holding them twice a year. The planning and coordination mechanisms improved gradually over time. The main results of each of these meetings are described below:

Kara Workshop, February 5-9, 1990. Organized jointly by the PCU and the CCCD Project, fifty participants met for five days. The participants came from the General Directorates of the Ministry of Health, Social Affairs and Women's Condition; the Ministry of Rural Development and the Ministry of Information, as well as the principal cooperating agencies involved in Child Survival. Each program presented an overview of activities carried out in 1989. Work groups were organized to update the programs of activities for 1990 and present them in the common framework proposed by the PCU.

The workshop report was finalized and distributed in August 1990. It contained the "National Action Plan for Child Survival 1990," as well as the model of a report for

monitoring of activities, and the announcement of several similar meetings during the coming year.

At the request of several representatives of cooperating agencies, the PCU organized a "Child Survival Activities Coordination Workshop" at Bethania, January 17-19, 1991: This workshop brought together 13 representatives of the central departments of the MHP and MSAWC, and 9 representatives of cooperating organizations. The meeting was held too late to carry out real joint planning for 1991, so the work focused on the finalization of mechanisms of coordination for the activities programmed by the different actors.

During this workshop, the action plans presented by the different actors were put together and a framework for presenting an "Action Plan 1991 for Child Survival" was developed. The PCU then pulled together the individual actions plans into an integrated "Action Plan 1991 for Child Survival" which was distributed to the workshop participants and submitted to the Consultative Committee for Child Survival in March 1991.

In addition, an inventory and critical review of the IEC material available in Togo was made during the same workshop, and recommendations about the (re)production of the material as well as about Health Education activities in general were formulated. Finally, a critical review of programs of in-service training allowed the identification of conflicts of date, themes or target groups. This exercise led to the proposal of criteria for effective coordination.

In January 1991, after the meeting in Bethania, a workshop for programming of 1992 Child Survival activities was scheduled by the PCU for July 1991. A month before the meeting, a large number of invitations were sent to the main actors, and instructions for the presentation of 1992 action plans were sent to the Directors and Heads of Services involved.

Using the general framework adopted at Bethania, and within which the 1991 Action Plan was developed, two innovations were introduced: a special form was proposed for the presentation of activities without financing, and the programming period was extended to three year, in order to establish the use of a sliding three-year plan.

During the week before the meeting, the PCU systematically contacted each service in order to encourage and assist them in the preparation of their own action plan for 1992. The working documents for the meeting were prepared on the basis of these preparatory documents: a revised version of the 1991 Action Plan and an initial draft of the 1992 Action Plan were constituted, and forty forms presenting activities which the services wished to carry out but for which they had not yet found funding, were assembled.

Holding this meeting in October, three months before the beginning of 1992, showed definite progress in the process of planning and coordinating Child Survival activities.

After the meeting, the PCU synthesized all the information in the working group reports. The final report, with the updated tables for 1991 activities and the tables of projected activities for 1992, was completed in December 1991. The report was distributed to all the participants, but also to numerous other people and organizations involved in Child Survival activities in Togo for their information.

One of the workshop recommendations was that the PCU organize at least one follow-up meeting before the next workshop, scheduled for July 1992. This meeting was held April 23, 1992, and a rapid exchange of specific information was made between the participants. This success is due to an increasingly better participation by the directors of Child Survival activities in the coordination efforts made by the PCU. The higher quality of the written documents supporting this process also contributed to this improvement.

The second meeting for programming Child Survival activities for 1992 was held in Kpalimé February 5, 6 and 7, 1992. Two weeks before the date announced for the workshop, detailed explanations of the information to be furnished to the PCU for preparation of the workshop were sent out to all the services involved. Finally, the principal heads of departments and representatives of cooperating organizations were invited to a working session with the PCU held one week before the workshop.

About forty people total participated in this workshop. About half represented the principal international and non-governmental organizations involved in Child Survival activities.

At the end of the workshop, the PCU was able to put together and distribute 75 copies of a synthesis report which included:

- o The 1991 Child Survival Action Plan, February 1992 version, a report of the activities actually carried out in 1991;
- o the 1992 Child Survival Action Plan, February 1992 version, in which were presented all the activities programmed for 1992 and which had funding at the time of the meeting;
- o a group of activities considered priorities by the working groups but which had not yet received financing by the end of the workshop;
- o an analysis of the results of the workshop and the limits of the current process for the programming and coordination of Child Survival activities;
- o the list of recommendations formulated by the working groups or during the plenary sessions;
- o recommendations from the workshop organizers (PCU).

The planning and coordination meeting for 1993, organized by the PCU and the Direction of Planning, Training and Research (DPFR) assembled almost 50 people in Kpalimé from August 18-21, 1992. Holding the meeting for the first time at such an early date was in itself a success.

The HSSCS Project was to end in December 1992, so this was the last meeting organized within this project by the PCU. Thus, the DPFR was closely involved in the preparation, organization and report-writing for this meeting, to maximize the transfer of the experience acquired by the PCU. Preparations for this meeting began in June and a "technical note" on the work to prepare before the workshop was sent out at the end of July to all the planned participants.

After the launching workshop for the Health and Population Sector Support Program held from July 27-30, 1992, the DPFR asked that the programming meeting organized by the PCU be extended to other MHP programs in addition to those relating to Child Survival activities. This was done, and it was thus possible to develop in more detail the programming and budgeting of 1993 activities in several programs contained in the Triennial Health Development Plan (PTDS).

The 1992-1993 Action Plan and the synthesis report of the meeting were finalized and 100 copies distributed near the end of September, about a month after the end of the seminar.

Because this workshop was held well in advance of 1993, particular attention was given during the meeting to the activities planned by the services for the coming year but which had not yet been funded. The 1993 Plan of Action, by presenting in a standardized form all the activities planned by the services, facilitated the seeking of funds for these activities.

The synthesis report analyses the institutionalization of the planning and coordination process progressively developed by the MHP. Like the 1992 Action Plan, it highlights the recommendations made during the workshop as well as those made by the workshop organizers, the PCU/DPFR. The continuation of these planning and coordination meetings as a central element of the planning process is one of the major recommendations.

b) Planning and Coordination in the MHP

The planning of health sector activities has developed substantially in the last few years. The Health and Population Policy of the MHP was formulated, and different programs of implementation of this policy were defined and budgeted in the Triennial Health Development Plan. This level of work has been carried out since 1988 with the preparation of the Health and Population Sector Program, with the support of the World Bank.

At another level of planning, there has been detailed annual planning of activities leading to annual Action Plans. The work is done most often within each service or program, or for a meeting with donors. It is this level of the MHP planning process which the PCU developed from 1990-1992 by organizing semi-annual planning and coordination meetings, and by adopting the most appropriate tools and procedures.

The Health Sector Support for Child Survival project got the DPFR to work closely with them on the last workshop. Thanks to that collaboration, this semi-annual meeting was explicitly included in the more general framework for preparation of the Triennial Plan of Health Development. This permitted the DPFR to use the information in the workshop report during their budget preparations and also during their interactions with donor agencies.

It was thus that for the first time, two distinct but complementary levels of planning were explicitly integrated. The detailed annual programming of Child Survival activities, which results in an annual Action Plan, was accomplished on the basis of more long-term planning work.

Different tools for the annual planning of activities were developed during these meetings, and are now well-accepted. The Action Plans resulting from these meetings are used more and more as a common reference by numerous national and international partners. The model tables and forms have been used in numerous contexts other than the PCU meetings.

c) Training in Planning and Budgeting

The need for training in planning and budgeting of the officials of the Ministry of Public Health, Social Affairs and Women's Condition (MOH) was identified as a priority of the Health Sector Support for Child Survival Project. This seemed absolutely necessary to assure the success of the project itself, as well as to permit the long term institutionalization and the sustainability of the systems and procedures put in place.

Besides several scholarships in public health planned in the project, a series of local training seminars for more than 100 people were proposed as a priority activity for the PCU. These seminars would also be the occasion for developing substantial training materials and reference documents which could then be reproduced and made available for wide use.

A first series of three one-week seminars was organized between May and August 1990. Three different consultants came to help PCU in the conception and execution of the program, and a total of 67 officials were trained. The methodology and the training materials introduced were well-received, but no follow-up of these seminars was able to be carried out, and the need to reinforce and deepen this first training became apparent.

Based on this first experience, a second training program was organized with the technical assistance of Harvard Institute for International Development (HIID), and took place from March to June 1991. A representative of HIID came to Togo in December 1990 for the finalization of this program. This representative had also conceived the previous seminars.

Just before the first seminar of this second series, the objectives of the program were reformulated in the following manner:

- o Develop a common methodology for project planning in both the MHP and the MSAWC.
- o Develop a technical reference manual in the planning of social and health projects
- o Create in the MHP and the MSAWC a critical mass of personnel trained in planning and budgeting.
- o Through the development of social and health projects by the seminar participants, promote the decentralization of planning in the MHP and the MSAWC.

Two successive sessions of three days each were organized for 15 participants each. The content addressed problem identification, objectives, activities and indicators. Following this seminar, the PCU carried out several follow-up missions to the participants in their work places. The second seminar was held in May 1991, in two sessions of 3 days for the same participants.

During the second seminar, budgeting techniques were taught, and an exercise was carried out to transfer the information contained in the training module forms onto the official Project Proposal Forms of the Ministry of Planning and Mines (MPM). The final part of the seminar was devoted to individual work on the projects prepared by the participants for funding. Two follow-up missions were carried out to help the most advanced participants finalize their projects for submission.

For the extension period 1991/92 of the HSSCS project, a new program of seminars and follow-up in the field was conceived to help the Chief Medical Officers (CMOs) develop a 1993 Plan of Action before the end of July 1992. Several contacts and work sessions were held with officials from the MHP and UNICEF and WHO representatives to try to harmonize the activities planned in this area by the different actors. Despite a consensus, finally attained during May, on the program and content of such a seminar, it was not possible to carry out these plans.

While continuing the planning methods taught during the preceding seminars, a practical and concrete approach was adopted for the second round of seminars, based on the

development by the participants of projects for their own prefecture. The local training team should follow-up on the development of these projects during visits to the participants in their work places, and should ensure that the proposals thus developed are submitted to the MPM. The principal target of this training program were the CMOs of the health subdivisions. The innovative aspect was to assist, as part of the decentralization process, the CMOs to submit to the DGSP projects which could be directly sent for funding to the MPM.

The project planning methods taught during the two series of seminars were similar. They permitted a rapid and simple approach to following the principal steps of the "Project Planning by Objectives" process. Problems encountered during the training led to the improvement of the initial training modules, and all the modifications were incorporated in the final "Training Manual."

The training consisted in the directed application of simple principles contained in the reference documents distributed to the participants. The exercises were carried out in small groups on the basis of a "case study" which presented a realistic data base about an imaginary health subdivision. All the group work was presented and discussed in plenary sessions.

After the selection of "priority problems," an analysis of their causes permitted an initial formulation of objectives, on the basis of which the activities to be carried out as well as the necessary resources were listed. Monitoring and evaluation indicators were established next. The rapid passage from one step to another permitted an overview of the proposed solutions once a problem was identified. As activities, resources and indicators were successively defined, the previous steps could be refined. By this iterative process, the unrealistic solutions were eliminated, and the objectives, activities and indicators were quantified.

The teaching of the principles and techniques of budgeting were conducted using a fictitious project based on the above-mentioned case study. Each group thus established a budget for a certain period, then projected the recurrent costs for the five years following the end of the project. The Project Forms of the Ministry of Planning and Mines (MPM) were then explained, and an exercise on how to transfer the information from the practice form onto these official forms was carried out.

Finally, after each seminar, all the teaching material and the techniques taught were used by the participants who developed individual project proposals. The small number of participants who really threw themselves into the work benefitted the most from this training, particularly from the follow-up visits that they received to help them finalize their proposals.

During the first series of seminars (3 similar sessions), a total of 66 people were trained during five-day sessions. Among them, 37 participants (of whom 20 CMOs) came from

the MHP, 20 from the MSAWC, and 9 from MPM. Finally, 49 participants occupied a peripheral, prefectural, or regional position.

Almost all the participants in the second series of seminars occupied peripheral positions. In total, 34 officials of the MHP/MSAWC participated in at least one seminar, and 24 attended the two complementary seminars. In accordance with the goals of the training, about two-thirds of the participants in each of the seminars were CMOs.

Eleven finalized proposals were submitted by the PCU to the MHP/MSAWC, out of a total of 24 officials who participated in both of the seminars. Ten projects developed by *médecins-chefs* were submitted to the MHP, and in the letter of submission to the General Directorate of Public Health, the PCU proposed to participate in the selection of the projects. Unfortunately no follow-up of these projects was able to be carried out within the MHP by the PCU.

The final version of the "Training Manual in Planning and Budgeting of Social and Health Projects" was completed in September 1990. This document includes the training modules themselves, a case study, a budgeting exercise, as well as explanatory notes on the Project Forms of the MPM and an example of one. Eighty copies of the manual were distributed to the participants in the final seminars, to the programs and cooperating agencies involved in planning training, as well as to all the CMOs and Regional Directors. Twenty copies have been reserved by the PCU for future use.

d) Cost Recovery

To ensure sustainability for the MHP of the system and activities developed under the project, the PCU was to monitor all recurrent expenditures incurred on an annual basis, and by project component. In addition, a study was planned to assess the feasibility of user fees for health services as an option for financing service delivery.

In March 1990, during a consultancy of a health economist, a survey was proposed of recurrent costs in the health centers, and on the willingness and ability of the population to pay for health care. The protocol for this study was then established in December 1990. During this time, numerous contacts were made with the majority of services and cooperating agencies, public and private, who had put in place cost-recovery mechanisms, or who had carried out studies in this area. The information gathered was very influential in the later development of the study protocol, which was widely circulated to the other actors after it was finalized.

The study was carried out in one prefecture (Kloto), but was conceived to permit an extrapolation of the results to the whole country. The study included a household study of willingness and ability to pay for health care, and a study of recurrent costs in health structures. The questionnaires were tested in several villages before finalization, and contacts with the MPM (Directorate of Statistics-Budget and Consumption Study)

allowed rapid recruitment of an experienced field team (17 researchers, 3 controllers, and one supervisor). A local economist was also recruited to collect the data in the health facilities.

The two studies, household and health facility, both took place between January 25 and March 22, 1991, during which time the PCU provided continuous technical, logistic and financial support. The household study on the willingness and capacity to pay for health care consisted of questioning 1,344 households in 66 villages and urban neighborhoods (in Kpalimé) in the prefecture of Kloto.

The health facility study collected information on the capacities, activities and recurrent costs in 25 health facilities in the prefecture (3 hospitals, 3 health centers, 12 dispensaries, and 7 MCH centers). Once the data was collected, it was entered by the PCU and sent in mid-March to the MCDI office. During the month of April, the PCU assisted the supervisor of household data collection and the local economist to finalize and print their reports.

The second mission of the economist responsible for the analysis of the study was scheduled for April, but was postponed until the end of June, so the PCU began an initial data analysis using DBase-Stats. While awaiting authorization for his second mission, the economist tested different statistical software, and had the data analysis begun by MCDI/Boston using SPSS-PC.

The economist came to Togo from June 30 till July 25 for a second mission to refine the data needed for the calculation of revenues and unitary costs of medical interventions by category of facility. From this data, a program was written to create several new variables totaling the different sources of household revenue, the amount spent by households for health care, the number of people having received health care, etc.

In addition, numerous contacts were made with national researchers were made in order to evaluate the validity of the data and to finalize the analysis method to be adopted. On the basis of this work and complementary data sent later by the PCU, the statistical analyses were carried out by MCDI in the U.S.

The first report of the study analysis was received by the PCU in April 1992. The results and conclusions presented were reviewed and discussed at the PCU, as well as with the new health economist consultant who took over. The final version of the analysis report in English and in French, was received in May. Only a limited distribution was made given the technical nature of the document and the additional analyses which were already being done when the report was received.

The organization by the PCU of a seminar to bring together all the studies and experiences in cost-recovery was discussed with the DGSP beginning at the end of 1990 as the logical follow-on to the Kloto study. The PCU began preparatory work in August

for the seminar, making preliminary contacts with the DGSP. An initial agreement was obtained to hold the seminar during the last quarter of 1991, but this was not able to take place.

During the new health economist's first mission to Togo, from March 27 to April 10, a new analysis of the different studies and experiments with cost-recovery was carried out. A substantial documentation had been prepared for the consultant, and numerous interviews and field visits were done with him. Before his departure, the main features of the current MHP policy on cost-recovery were outlined, and a proposal for a uniform system of health care and medication payments in the peripheral health facilities was defined. The results were presented during a meeting with 15 officials from the MHP and representatives of cooperating agencies.

After the mission, a preliminary report was distributed for the information of those mainly responsible for the development of a system of health care cost-recovery in Togo. The report was also sent to the Preparatory Committee of the National General Assembly on Health. Finally, before the departure of the consultant, a second mission was planned for the month of June. After having further developed the work done during this mission, as well as the analysis of the Kloto study data, a national workshop would be organized on the "Health Care Cost-recovery Policy in Togo."

This workshop was held in Lomé June 9 and 10, 1992, with fifty participants representing the relevant services of the MHP as well as the cooperating agencies involved in this area. The workshop focused principally on the presentation by the consultant of the results of his analyses. A few other speakers discussed different aspects of health financing in Togo. All the presentations were followed by question/answer periods. Finally, working groups were formed which gathered the opinions and recommendations of the participants on several questions pre-selected by the workshop organizers.

A report on the workshop proceedings was prepared by the PCU. This took the principal elements of the presentations and the working group reports, and tried to synthesize the debates and reactions encountered. The consultant economist prepared a final report on the analyses and recommendations developed since his first mission in March/April. The report particularly develops an analysis of the demand for curative care in Kloto; some simulations of the possibility of cost-recovery in Togo in the short and medium-term; and the description of the proposed model for pricing curative care in the peripheral health centers. Both of these reports were distributed in September 1992.

One of the key elements of the user fee system for health services as proposed and discussed during the workshop was the sale of Essential Drugs. As several projects have already implemented different pricing systems, the MHP requested that a uniform system be adopted nation-wide. A third mission of the health economist was thus planned for October 1992.

A detailed analysis of all the projected costs of the Essential Drugs Supply System to be established by the MHP was performed, including the cost of all the drugs necessary to treat all cases coming to public facilities. Although this analysis will have to be further developed, it was shown that the objective of recovering all the costs of the envisioned supply system was quite unlikely to be met.

A one-day workshop was proposed to present these findings and try to work out a short-term plan of action to implement cost-recovery procedures in public health facilities. Although the meeting was successfully organized and attended by nearly fifty MHP and donor representatives, it was interrupted due to political unrest. A list of recommendations for further action was developed, however, by the consultant, and sent to key officials in the MHP.

e) Development of a Management Information System

Terms of reference for a short-term consultancy to develop an "Integrated Information Systems Development Plan" for the Togolese Ministry of Health were prepared in February, 1992. This assignment was in response to a need by the MHP to rapidly develop a Management Information System (MIS). DAC obtained approval for the proposed consultant and the assignment was executed during the period April 20 through May 29, 1992.

After reading the background documentation on the subject assembled by the PCU staff, the consultant conducted numerous site visits and fact-finding interviews within each of the divisions of the MHP, and within many of the cooperating agencies working in the area.

Following the review of background material, site-visits and interviews, the consultant prepared a final report including a background analysis of existing equipment, documentation of existing applications, a functional analysis of existing systems and recommendations for an "Integrated Management Information Systems Development Plan."

The analysis of the existing equipment included an inventory of existing hardware and software, an evaluation of its present capacity, and an assessment of its potential for expansion for additional users and/or applications. In addition, the consultant completed the documentation of existing systems applications within the MHP which included the following functions:

- o Health Statistics
- o Personnel Management
- o Financial Management and Accounting
- o Inventory Control and Stock Management
- o Office Automation

- o Desk-Top Publishing
- o Project Management
- o Patient Admissions

The organizational functional analyses included a description of the various operational activities in which the Ministry engages to carry out its mission. It should be noted that this section of the analysis was based upon the Ministry's listing of functions in the 1991 draft Arrêté titled "Portant Organisation des Services, etc." and on interviews with the responsible directors of the MHP. Graphic illustrations, charts and matrixes were prepared to illustrate the interrelationships of each function and provide a descriptive structure for the MHP information flow.

The final two sections of the consultant's report presented Findings and Conclusions and Recommendations and Action Plans. Taken together, the final two sections described the present status of management information processes and detailed action steps required to plan and implement a management information system for the Ministry of Health MHP division.

The French version of Information Systems Specialist Thomas Balderston's report is entitled "Plan for Information and Management for the Ministry of Health and Population." Fifty copies were distributed to the parties involved in the development of the Management Information System for the MHP.

f) Policy and Strategy Document for Child Survival

Since the conception of the Child Survival project, the lack of a clear Child Survival policy within the MHP had been underlined. Such a reference is an indispensable complement to the implementation of effective planning and coordination procedures, and should allow the government to make budgetary allocations on the basis of foreseeable impact of the interventions and on the basis of needs identified for their implementation.

Although presented as a priority in the project document, the work was not able to be completed as such during the start-up period of the project. The members of the PCU staff did however participate in the work going on in the area of policy development. The main Child Survival programs which received PCU support in their policy development are the following: Diarrhea, Family Planning, GM/Nutrition, Malaria, and Safe Motherhood. The PCU also originated the work which resulted in the definition of a national Health Education Policy.

During 1990, following the transition of the technical assistance team, work on a national Child Survival Policy and Strategy document was taken up. This effort initially involved accumulating a concrete knowledge of the activities carried out by the different services.

At the end of 1991, a draft document was presented to the Child Survival Advisory Board (CCSE). They gave their agreement for the continuation of this work, as well as the authorization to contact the services responsible for the execution of Child Survival programs to obtain their opinion and contribution.

Further work was carried out to establish the content and presentation which would be the most effective, useful and acceptable reference for planning within different services. The simple definition of what Child Survival means seemed of primary importance, as well as the necessity of a standardized presentation.

Given the slow process of reflection on the nature of the Child Survival Policy and Strategy Document, the final editing was not undertaken until the end of the project, and at the time of summing-up, rather than at the beginning of the project. This delay, and a period of political unrest, did not unfortunately permit a wide participation in the development of this document.

g) Documentation Center

The PCU receives a large flow of information from the exterior as well as from its staff. A system of centralization and classification of the available documentation was begun at the end of 1990, in addition to the already functioning administrative system. This was also one of the recommendations from the project mid-term evaluation.

Although it has progressively acquired numerous technical and scientific reference documents, it is particularly the documents and reports on Togo's health sector on which the organizational efforts focused. Numerous documents are regularly produced by or for the MHP, but are then hardly used because they are not known, or easily found when needed.

A first list of available documents at the PCU was established, and then regularly updated as new works are received or collected by members of the PCU. It was rapidly seen that this documentation center could serve a wider circle than the PCU, and a check-out system was established. Its use allows access to these documents by people exterior to the PCU.

After about six months of functioning, the management system seemed sufficiently functional to contemplate expansion. A total of 250 documents were by then catalogued and made easily accessible. Contacts were made for the choice of a simple software to permit the computerization of the cataloguing and search for documents. Finally, arrangements were made to assure that the documents, the management system and the experience acquired by the PCU in this area were taken over by another service of the MHP before the end of the project.

h) Creation of a Data Base

Besides the creation of a documentation center in the PCU, the mid-term evaluation also recommended that a systematic collection of background data for planning purposes. During the training sessions, an inventory of all training received by the participants for the last two years was completed by distributing a questionnaire to each trainee. At the end of 1992, the data base contained about 1200 people's names, professions, Ministry of affiliation, work assignment, as well as the dates of the training received, by theme. This data base was conceived and developed to permit the continual updating of this type of data by the new Directorate of Planning and Training, and would be handed over to this service at the end of the project.

The PCU also worked on the adaptation of a software program in DBase IV for personnel management. Several trials of the program were carried out to see if this software could be adapted to the immediate needs of the MHP in this area. This work was abandoned when the MHP hired a consultant to develop a computerized personnel management system.

Within the inventory of health infrastructure initiated by the CCCD Project, the PCU contacted the Division of Health Statistics to include in this work a census of personnel working in the field. The information gathered included the name, function, matriculation number, marital situation, grade and class, place and date of assignment, date of hiring, date of last promotion and budget from which they are paid. The data were made available to the personnel service of the MHP. They constitute a basis for a computerized data base on the existing health personnel.

Finally, a study of the Village Development Committees (VDCs) in the Plateaux and Savanes regions was carried out by the PCU at the beginning of 1991. This was completed by information sent by the Regional Directors of Social Affairs to the Division of Community Development during the preparation of the "Intersectoral Workshop on VDCs." A data base with summary information on around 1,700 VDCs was thus constituted and presented in the working document of the workshop.

i) Collaborative Protocols

As the main coordination unit within the MOH, the PCU was to assume day-to-day monitoring of various agencies interventions in Child Survival, and assure constant collaboration and interchange among them. It was also envisioned that the PCU would initiate Collaborative Protocols between agencies and MOH services as a more formal way to ensure coordination.

Once established as an operational entity, the PCU has been able to provide numerous informal information, advice and support to MOH services and other organizations involved in Child Survival. This was possible mainly because of the openness of the staff and the logistics available to the project. However, these activities were performed only on an ad hoc basis as the PCU was geographically isolated from the other MOH services,

and had no direct relationship any of them.

In addition to these informal coordinating activities, the PCU managed to established several Collaborative Protocols, as described below:

A collaborative protocol between the PCU and the Division of Teaching and Professional Training (DEFP) of the MHP was established for the publication of a special issue of the MHP's magazine, "Echoes of Public Health" devoted to Child Survival. According to this protocol, the total production costs of the special issue, produces in 1800 copies, would be covered by the PCU, and the organization and monitoring of the publication itself would be ensured by the DEFP. Twenty authors or groups were invited to submit an article on a particular theme, according to a framework established by the DEFP and the PCU. The members of the PCU participated in the review of articles as part of the Editorial Committee, and also wrote several articles. 1,200 copies of this special issue were published on time, and the copies were distributed on the central and prefectoral levels, as well as to international organizations.

A protocol of collaboration was established between the PCU and the project of Reinforcement of Primary Health Care/Bamako Initiative and UNICEF for the joint organization of two successive training seminars of six days each. This collaboration was justified by the complementary natures of the themes discussed by the two groups, who addressed the same target groups (CMOs, principally) and which were scheduled for the same periods.

The inter-sectorial workshop on VDCs in Kara from the 24-27 of September 1991 was jointly organized by the PCU with the General Directorate of Social Affairs (DGAS). The PCU agreed more than a year before to support the organisation and the financing of this priority workshop, and in August 1991, a protocol of collaboration was signed with the DGAS to this effect.

After the workshop, the DGAS wrote a report of the results of the group work, and PCU's assistance was requested for the typing, finalization, and dissemination of the report.

j) Logistical Support

The Togolese government BIE counterpart fund was intended to provide logistic support, gasoline and maintenance costs for the field agents carrying out the village based health education programs. As these activities were not well defined at the onset of the project, the 1988 BIE funds were used mostly to equip the PCU and to a certain extent the DME.

A lack of coordination in the utilization of these funds in 1989 resulted in only salaries being paid while the remainder of the funds went unused. In 1991 and 1992, the project

planned the use of the BIE funds in direct support of the field-based extension activities and provided in-kind gasoline coupons and credit for follow-up to the two regional social affairs offices.

Over the life of the project no reports or justifications as to the utilization of either the funds or the gas coupons were furnished to the PCU-SE either by the directors of the regional social affairs offices or by the chief medical officers of the prefectures. In 1992 serious delays in approval of the BIE financing, coupled with work stoppages and strikes, prevented the distribution of the gas coupons before the last month of the project.

The project provided all the logistic support for the training of trainers and the cascade training programs from the verification of participant lists and budget requests, the publication of training documents, the delivery of training materials, the distribution of training funds, through the collection of training data and documentation following the event.

The project's chief accountant made regular trips to all thirty prefectures to drop off the training materials, advance the chief medical officers the training funds, initially in cash and later through certified check, and to set up a schedule for collection of training documents immediately following each session. Over the course of the project the PCU made a special effort to deliver the training materials in a timely manner so as to allow the trainers time to prepare for the sessions. Often these efforts went unnoticed by the prefecture health education teams as the project delivered the participant lists, training funds and materials to the chief medical officers who were frequently absent from their posts.

2. Lessons Learned

a) The Village Development Committees

The Village Development Committees (VDCs) were used extensively under the HSSCS as principle channels for organizing community outreach programs. Although the extent to which VDCs were effective varied greatly among communities, in general, these local structures provided a framework, where often none other existed, from which to develop outreach programs. This increased the ability of the project to design and implement large scale outreach programs, and provided for a degree of sustainability. The VDCs should be used and promoted in outreach campaigns.

b) The MOPH Budgeting Exercises

Before initiating any activity such as the MOPH budgeting exercises, the highest levels in the budget decision-making process (i.e. the Ministers of Public Health and Plan) must be committed to increasing the transparency of the process, and the involvement of the traditional stakeholders (i.e. the prefectural Chief Medical Officers). Those charged with

undertaking the decentralized budgeting exercises must be inculcated with a sense that what they produce will be taken seriously.

C. Child Survival/IEC Training Component

1. Accomplishments

a) National Policy for Child Survival Health Education

With technical and financial assistance from the HSSCS project, the National Health Education Service (SNES) organized the training of the prefectural teams for health education. During a five-day workshop in February 1990, the Diagnostic du SNES was made, followed by the design of decentralized health education for child survival.

Although it does not overlook the importance of coordinating key messages disseminated by the mass media, the primary focus of the policy document is the reinforcement of the "supply side" through training (or human resources development). The policy aims to empower, to build HE and training skills, at the prefectural level.

Specialized prefectural health and social workers trained the qualified agents, those who provide IEC with health services, along with their subordinates, the village volunteers. According to the policy document, the start up of prefectural teams would improve HE activities at the community level. However, the content does not seem to relate to the general health policy, nor does it describe clearly the norms and standards for HE. Funding levels and sources are not mentioned, and a strategy that to attain the expected outcomes, has yet to be designed.

Under the guidance of the Prefectural Medical Officer, each prefectural team comprehends:

- o -1-Physician's Assistant (usually the PA assigned at the Polyclinic);
- o 2 Health Education Coordinators;
- o 1 Prefectural Head of Social Services;
- o 1 Social worker;
- o 1 NGO Prefectural Representative (ATBEF Motivator, or Peace Corps Volunteer).

b) Implementation Strategy for Child Survival IEC

After the February National Workshop, an information tour was conducted to further explain the outline of the new health education policy to the prefectural teams. Most of the central level chiefs of programs attended the workshop. There was no individual information or follow up on the HE policy. At the start of the project, the consensus was

to coordinate the training component with the Ministry of Health's "Plan for Decentralization." Thus, cascade training would have started with training in Planning and Budgeting. However, the design stage lasted longer than originally planned. The HSSCS project inputs were no longer in balance with the obtained results. The HAHO pilot project, initiated to test the cascade approach, lost its high priority. Decentralized training was immediately started with the Health Education for the Enlarged Immunization Program (EPS pour le PEV).

The annual programming meeting held in Kara in February 1990 defined the interpersonal techniques adapted to each theme. When the CS IEC training started in February 1990, at least three original members attended the training of trainers for some other Maternal and Child Health programs. The curriculum for each CS theme was practical and simple. Although there were lectures, the training methods were practical, inspired by the experiential learning process. The training sessions were held in regional and prefectural towns, with site visits to the nearest MCH center. The CS IEC training did not include training in animation villageoise; sociopolitical unrest did not allow the necessary practice with the communities.

c) Standardization of IEC and Training Materials

A preliminary inventory of in-country IEC experience and existing materials includes those already used by the Ministry of Health in collaboration with agencies such as UNICEF, CATHWEL, ATBEF, INTRAH, and the CCCD Project. Those existing materials were updated and simplified. Various and correlated supports were used to convey the essential information for CS IEC: flip charts, laminated drawings, fliers, pamphlets (aide mémoire), and manuals. Key messages were gathered on the "yellow flyer" which serves as a true desk reference for Child Survival. The standardized materials were disseminated to the 30 prefectural teams of trainers, as well as to the MCH National Programs and the Health and Training Schools.

d) Personnel Trained for Child Survival IEC

Table I below shows that 25.2 % of the prefectural trainers were specialized personnel such as physicians assistants or sanitation technicians, whereas the qualified personnel counts for about a third of the teams: 32.2 % of nurses, midwives and sanitation agents. Regarding the sector of origin of the prefectural trainers, for each of the three series - IEC for EPI, for diarrhea and malaria, for growth monitoring and family planning, the Social Sector Personnel was respectively 37.8 %, 35.1 % and 33 %, whereas the Health Sector Personnel represented more than half of the teams: respectively 60.9 %, 57.5 %, and 57.6 %.

Table I Members of Prefectoral Teams by Category and Type of Training, July 1992.

Professional Category	IEC CHILD SURVIVAL SERIES		
	EPI	ORT/MALA	PLAN/GROW
Physicians' Assistants/ Sanitation Technicians	36 (25.2%)	43 (22.9%)	38 (21.5%)
Nurses/Midwives/ Sanitation Agents	46 (32.2%)	60 (31.9%)	54 (30.5%)
Pref. Head Social Services/ Pref. Health Services	54 (37.8%)	66 (35.1%)	59 (33.3%)
Other Health	5 (3.5%)	5 (2.7%)	10 (5.6%)
Other NGO/Social Workers	2 (1.4%)	6 (3.2%)	16 (9.0%)
TOTAL (%)	143 (100%)	188 (100%)	177 (100%)

Table II below shows the health and social workers trained by the prefectoral teams for Child Survival IEC. Overall, the participants had the required profile to fully utilize the training manuals and visual aids that had been provided to each trainee. For each series, such participants represented respectively a total of 70 %, 67 % and 63 % (Physician's Assistants, Sanitation Technician, Nurses, Midwives, Sanitation Agents, Prefectoral Heads of Social Services, Social Workers, etc., in Table VII). However, as the training series went on, the number of unqualified personnel, who were trained on-the-job (Other Health in Table VII), had increased from 29.5 % for EPI to 36.1 % for Family Planning/Growth.

Table II Agents Trained by Category in the Three Series, July 1992.

Professional Category	IEC CHILD SURVIVAL SERIES		
	EPI	ORT/MALA	PLAN/GROW
Phys. Assistants/ Sanitation Technicians	18 (2.3%)	13 (1.8%)	8 (1.0%)
Nurses/Midwives/ Sanitation Agents	282 (36.8%)	261 (35.2%)	273 (32.8%)
Auxiliaries/Nurses	132 (17.2%)	132 (17.8%)	174 (20.9%)
Social Workers	105 (13.7%)	89 (12.0%)	70 (8.4%)
Other Health	226 (29.5%)	245 (33.1%)	300 (36.1%)
Other NGO/Social Workers	4 (0.05%)	1 (0.01%)	7 (0.08%)
TOTAL (%)	767 (100%)	741 (100%)	832 (100%)

e) **Organization of Field Training**

The process of putting together a standardized and summarily field-tested cascade training package took the project approximately six to nine months from start to finish. The initial phase of document preparation depended on the complexity and extent of training aids to be developed, and were estimated at three months. Once the basic documents and aids were ready, the training of trainers programs began and ran for approximately two months. The field testing phase of the package revealed the key errors and missing items of information. At a minimum three months are required to edit and print the final package of materials. In the case of a nationwide training program of public health workers consisting of two participants per health center and 800 CVDs, 1500 copies of all training materials are required.

One difficulty experienced at the end of each of the training of trainers (TOT) programs was in correctly estimating the time required for the editing, publishing and printing of the training materials. Most of the teams were anxious to follow up immediately with the training of the health personnel and would send funding requests and propose dates within one or two months after the TOT. As communication between the project and the prefecture health education teams was sporadic and sketchy, by the time the project was prepared to continue the cascade program the team's projected dates had often lapsed.

Even though the project provided instructions to the teams as to the number and qualifications of participants and standardized forms for budget estimations, few teams correctly completed their requests. Following receipt of the request, the project frequently had to revise the budget estimates and modify the participant lists. Unfortunately these revised lists were not returned until the delivery of the training materials.

Except for the last series of training programs, the project provided cash advances, delivered directly to the Chief Medical Officer by a member of the project staff, prior to each training event. Although this procedure posed a certain amount of risk, and required substantial logistics to get the funds to the prefecture on time, field staff were extremely diligent in carrying out this effort.

In the case of the HSSCS project one of the project's objectives was to produce standardized materials so as to assure a minimum quality throughout the country for the participants receiving training. Should the GOT now decentralize materials development? There are numerous subjects for which the GOT still is lacking in standardized training modules. Existing materials should be reviewed and revised periodically, it is likely that the major work involved in materials development will remain centralized.

Another objective of the project was to produce the standardized training materials and training aids in sufficient numbers so that all participants receive reference copies and usable aids in order to conduct the client training. Is it cost effective and does each prefecture have the means to reproduce their training materials?

Once each prefecture has the ability to reproduce documents, after the purchase of photocopy machines for each prefecture by the new USAID project, it makes sense to provide each prefecture with high quality originals of the standardized materials for local reproduction. One of the pitfalls to such a procedure is that the credit necessary and access to repair facilities to keep such equipment functional will be problematic. For example, the maintenance cost per 40000 copies of the HSSCS photocopy machine runs \$1000 and is repaired on average once every three months.

The reproduction of materials that can not be photocopied, such as flipcharts and other training aids, as well as the cost effectiveness of printing on large scale could be lost if each prefecture attempts its own reproduction. Centralized production might be more desirable, but distribution in a timely manner will once again come into play.

Transfer of funds to the prefectures for conducting training should, in the interest of safety, security and speed, be deposited to a local financial institution. It is possible to establish letters of credit for the use by the prefectures through the regional administration, but the option of a bank account would provide a type of record that could be audited.

As the project never had the benefit of the team's assistant nor the agent's assistant it is only speculation that their presence would have significantly improved the communications, coordination or organization of the training. On the other hand the coordinator's field visits were not frequent enough to assure more decentralization than was the case for the HSSCS. In fact the project accountant probably had the most frequent contact with the prefecture health education teams.

What appears to be decentralizable in the process of training, is the development and implementation of a annual training plan for the prefecture health personnel. Once a minimum quantity of training materials are on hand in the prefecture, the regional directors, chief medical officers and prefecture training teams could organize an annual training plan similar to the annual planning and coordination workshops organized by the HSSCS project.

f) Supervision of Prefectoral Trainers

The central level trainers and heads of programs have conducted three supervisory reviews of the prefectoral teams. In April-May 1991 and in July-September 1992, the prefectoral teams were supervised while conducting the training sessions themselves. In September-October 1992, the prefectoral trainers were supervised when there was no training session.

The results of the three reviews of prefectoral teams of IEC trainers can be summarized as follows:

- o About a year after their last training, prefectoral trainers who took the tests had high scores based upon child survival knowledge.
- o They had extensively used the trainers/facilitator guides provided for each series. It was found to be very useful; "un bon système qu'il faut maintenir."
- o The prefectoral trainers are highly motivated and skilled in general adult education methods and participatory methods. They asked participants to provide examples from their personal experiences. They used practical training methods, such as role playing with observation guides, demonstrations with checklists, followed by feedback from the class.
- o During the sessions, most of the trainees were able to summarize in their own words the contents. The tests given at the beginning and at the end, of each session showed substantial improvements of knowledge levels.
- o The trainers demonstrated problem solving capabilities. For instance, when the participant's profiles were too diverse, the working groups were

organized in a way that allowed skilled participants to help those with less formal health training.

- o Four months after the last sessions conducted by the prefectural trainers, the utilization of Child Survival IEC visual aids by the health workers was still low. The trainers did not have the means to carry out periodic follow ups. Outreach IEC activities did not occur because of the sociopolitical unrest and the consequent reassignments of health and social workers to their native prefectures.

g) **Mobility of the Prefectural Teams**

At the end of the project's third year, each prefectural team was provided with 5 motorcycles, but due to the delays in dispatching the prefectural budget and gasoline allowance, they were not entirely used by the teams.

g) **Assistance to the Training Division**

The national eight-year training plan did not rank high on the priority list of the Ministry because a five-year training plan for all the departments was already implemented under the IDA/World Bank funding. However, the project provided assistance in the curricula revision and the design of instruments for the assessment of training needs for the health personnel.

A special issue on Child Survival in Togo was published by the Division in June 1991. Using other sources of funding, the Division has since published two additional special issues on AIDS and on maternal and child health epidemiology.

2. Lessons Learned

The project lost two and half years while trying to contribute and to coordinate with the General Plan of Decentralization. Meanwhile, the working conditions were changed by the socio-political context; as of October 1991, IEC with the full participation of the villagers was no longer an option. The project could not innovate and settled for the improvements of existing materials. In addition, the training in planning and budgeting was limited to the 30 Prefectural Medical Officers who were assumed to organize the supervision of prefectural activities. The last supervision of trainers showed that they did have enough opportunities to work with their respective Medical Officers and thus improve their planning capabilities. Fortunately, the short term IEC training is an on-going process, the central level can assist the teams to set up integrated supervisory training for MCH/FP. The outlines for such supervision are provided in the recommendations section.

Collaboration is a prerequisite for coordination. Child Survival IEC intends to

standardize the visual aids and key messages, and yet should simultaneously allow local, customized adaptations of key messages. The project should collaborate with the prefectural literacy agents as well as the mothers of children under five years of age. Translations of key messages in local dialects should be recorded on tapes. The prefectural teams and the health workers should become familiar with those standardized oral translations during the training sessions.

A review of the annual programming document and observation of local activities indicate that Short Term Training (séminaires) - an input to Program, a support activity for health services - took more time and resources than the services and other management activities combined together. One possible explanation was that most programs and agencies work with the same prefectural personnel. There is a necessity for all to collaborate, to coordinate the training sessions that took away the personnel from their usual tasks. But all programs and agencies are compelled to follow their agendas. There is no appointed, official coordinating body, no "traffic cop" that would officially coordinate the training sessions within a specific period of time each year.

c) Participant profiles - Materials - Methods.

Any health care provider and social worker in regular contact with the mothers and caregivers of children less than five years old, should be trained in CS IEC. Nonetheless, priorities should be set and the project should select one person per health center. That person must have some sort of supervisory position, so he/she will be able to provide on-the-job training to the health center staff.

During the first quarter of 1990, a phone call from the Minister requested TWO trained persons per health center. Few health centers had two qualified personnel, such as Nurses and Midwives, but rather have a nurse and an auxiliary midwife. In the Savanes Region, there were centers run by unqualified health workers.

Some nurses and midwives did not want to attend the IEC training with their subordinates. Whenever possible, the prefectural teams divided the trainees into two sessions according to their qualification. They were trained with the same methods and received the same set of training materials. Manuals were even given to trainees who could not fully utilize them. Apparently there was other selection criteria; too often the attendance to a training workshop seemed to be a reward, instead of an opportunity to acquire or to improve needed skills.

d) Follow-up with on-site supervisory training.

Follow-up should have been organized in a more systematic way. The prefectural teams did not feel it was necessary because the project did not provide forms to be filled and sent back to the central level. Also, on-site supervisory training - the complement of short term training sessions, should have the resources for its implementation. A much

needed resource is transportation to the health centers. The HSSCS made an important effort and provided about 120 motorcycles to the Health Sector. Commercial and shipping difficulties postponed the grant. Once the motorcycles were made available to the prefectural teams, other issues emerged, such as gasoline allowances, payments for motorcycle maintenance, permission to keep the bike at home after work, authorization to buy the motorcycles through direct withdrawal from salaries etc. These problems illustrate the need for the integration of Public Health, Primary Health Care into the schools' curricula.

The ultimate goal of Information, Education and Communication (IEC) is behavioral change in health care practices and habits. The main lessons learned from decentralized IEC training for child survival, the first such attempt ever undertaken in Togo, can be summarized as follows:

- o Adequate preparation is required for the decentralized training program, including planning ways and means of monitoring on-site supervisory training.
- o The implementation strategy must be flexible enough to allow mid-course modifications in light of the expected outcomes of IEC training.

Can one replicate decentralized training in Togo?

The answer is "Yes." With minor modifications of the process, the decentralized approach has been adopted by other projects and programs, such as the National AIDS Prevention Program, which has a three member training team. CARE INTERNATIONAL's Project "Drivers Against AIDS" also uses the cascade approach.

Is decentralized training sustainable?

It is sustainable if the quality of training and services is ensured by better monitoring and supervisory training and if the living allowances (per diem) for short term training are reviewed and revised towards cost containment.

IV. RECOMMENDATIONS

A. Project Management

- o One of the first activities of future project implementation should be to quickly draw up a procurement plan for approval by USAID and the GOT. This plan should include a realistic time table that contains procurement amounts linked to key events. Effective project implementation will be better served by such a plan, if completed and approved in advance. This would also result in an efficient use of personnel that would otherwise have to devote time and effort to seeking waivers to prescribed procedures.

B. Planning and coordination component

1. Planning and coordination for Child Survival

- o The planning framework developed by the MHP for the last few years, which includes Triennial Health Development Plans and Annual Action Plans, appeared to be quite appropriate for the current needs and coordinated planning capacity of the Ministry. It should be reinforced by both the MHP and the donor community, and this primarily means that it should be used by all actors as much as possible. Modifications will be necessary for improvement, but changes should be made with consideration of the whole planning system.
- o Organization of well prepared and timely planning meeting is a key element of these planning process. In addition to the ones held at the central level, similar meetings should be organized at the prefectoral and/or regional level. These meeting should provide the basis for planning exercises made at a higher level of the administration.
- o At the central level, two annual meetings are necessary. One has to be held in June or July, and the other in January or February. The first one allows for an update of the current annual plan, and for the preparation of a first draft of the coming year annual plan, with budget and requests for funding. The following meeting, about six months later, allows for a summary of the past year activities, and for the finalization of the annual plan on the basis of actually funded activities. Such a schedule for the central level planning meetings is required for timely preparation of adequate budgets by the MHP and donors. Meetings at the regional and prefectoral levels should be organized in order to have the appropriate information ready for the central level meetings.
- o The workload that these activities represents should not be underestimated, and should be recognized as necessary to the implementation of a sound planning and coordination process. The human, financial and administrative resources used by the UPC were

carefully monitored and can be used as reference for future meetings. For central level meetings for instance, administrative preparation would start two months in advance. Two to three staff members would work full time for a minimum of two weeks before and two weeks after the meetings. A team of six to ten trained coordinators is necessary to conduct and facilitate such a workshop with 50 people, which could last only three days of full-time work if well prepared and organized. Final report of the meeting should be published and disseminated within a month. In addition to staff members, strong secretarial support is necessary at all steps of this process.

- o The Commission Nationale pour la Survie de l'Enfant and the Conseil Consultatif pour la Survie de l'Enfant were created under the HSSCS project and stayed active for the whole duration of the project. The Conseil Consultatif pour la Survie de l'Enfant, however, played its advisory role for project matters only, and was never convened for other Child Survival purposes. Its structure and functions will therefore lose their meaning once the project ends. On the other hand, the Commission Nationale pour la Survie de l'Enfant was more active in the development of a planning and coordination process for Child Survival activities. At the end of the project, however, this commission had stopped to meet by itself, most of its former functions being performed through the two annual planning and coordination meetings. These two structures as they were defined at the beginning of the project should therefore not be encouraged anymore. Other similar structure may have to be created in the future, however, but with new terms of reference.

2. Planning and Budgeting Training Seminars

- o Most of the key personnel in the Ministry, both at central and peripheral levels were trained in basic health planning techniques. The Ministry should encourage the use of these techniques and reference documents for its actual planning activities. One common reference will help establish standards for planning within the MOH.
- o Although eighty copies of the Planning and Budgeting training manuals developed for the seminars were already sent to the trainees and other key personnel in the Ministry, a wider distribution and use should be encouraged by making new copies available upon request, particularly to staff newly involved in planning activities and who have not been trained. Also, small training seminars could be organized once a year by the Ministry for those newly appointed personnel with no experience in health planning. The format used by the UPC for this training would allow two qualified facilitators to train 10 to 15 people. Presentation of the current planning procedures could be included in these seminars.

3. Cost Recovery

- o The principle of a cost-recovery system based on the sale of essential drugs is now well accepted, and the Ministry wants to implement such a system nation wide. Given the high priority of this issue, and the need for a standard national system, a committee on cost-recovery and a national coordinator should be appointed by the Ministry. Working groups should be set up under the guidance of this committee, and the following issues should be addressed in the near future:

Finalization of the accounting systems and procedures for the sale of essential drugs and user fees.

Elaboration of point-of-sale procedures to be used to sell essential drugs at all levels of the health care system.

Elaboration of financial control and audit procedures.

Perform a detailed manpower study to determine total personnel necessary at all level to implement the system (including training needs, total cost, etc...).

Estimation of total annual drug requirements, and cost based on purchase of essential drugs.

Identification of alternative sources for capitalizing the cost-recovery system (i.e. revolving drug funds).

Cost-effectiveness analysis of alternative drug distribution arrangements available to the MOH.

Finalization of the drug pricing system.

The role of the community participation.

4. Management and Information Systems

- o The Ministry should recognize information and management as a function within the MSP, assign responsibility for this function to some office, and give it the resources it needs. The office responsible should have the following terms of reference:

Maintain and update functional analysis of the Ministry, long-term plans for information systems to support the functions, and inventories of equipment.

Assist users of existing systems to get full benefit from them, through training, problem solving, and maintenance of the system hardware and software.

Analyze, assess requirements for, and design all new application systems.

Provide advice and assistance on new systems development, including programming, purchasing, and training services as requested.

Set standards for system software, hardware, application languages, and data base systems.

This Information and Management function could be attached either to Direction of Planning and Training or to the Direction of Common Affairs. It should be at a higher level than the Service National des Statistiques Sanitaires, even though that organization now has the best systems people.

- o To fulfill its functions, the office will need a high-level manager, with status and credibility within the Ministry. He should be a trained professional administrator, knowledgeable of good management practice, familiar with computerization of large application systems, and highly enough placed to direct information and management efforts in the Ministry effectively.
- o The manager should be guided by a steering committee made up of responsible Directors in the Ministry. In this way, information and management would be steered by the users of information services, who would be the most knowledgeable and interested parties possible.
- o Besides the steering committee, the information and management group will need one or two systems analysts, one or two trainers/user assistance agents, and some programmers.

5. Policy and Strategy for Child Survival

- o The final draft of a Policy and Strategy for Child Survival document was prepared at the end of the HSSCS project on the basis of the UPC experience in Togo Child Survival programs and planning system. This first attempt to bring the components of several different programs in one standardized and coherent document is now ready to be criticized and complemented by Ministry decision-makers, program managers and other experts. Such a work could be conducted independently, or as a side activity of the annual planning meetings. It could be used as an entry activity at the beginning of the coming Child Survival and Population project.

6. Documentation Center

- o The 250 documents collected and filed by the PCU should be transferred to the Service de la Documentation of the Direction of Planning and Training as soon as a capacity for its management and

maintenance has been demonstrated. The list of these documents should be distributed and these resources shared with services.

7. Databases

- o The data set on training, personnel, and CVDs constructed by the PCU should be transferred to the relevant services. Copies should also be kept together and given to the person or service who will be in charge of designing the Management Information System for the MOH. Although they have been developed independently, they would constitute a useful start-up resource.

8. Collaborative Protocols

- o Although it was clear through the PCU experience that it is a very difficult task to have different services and organizations to write down explicitly shared responsibilities on activities to be performed in common, this capacity should be developed in the Ministry as a recognized and effective coordination mechanism.

C. IEC/Training Component

1. Supervision

- o The database set by the project shows that the prefectural teams attended a substantial number of short term training workshops for various projects and programs. However, there is no data on the frequency of the follow-up and supervision. The time has come to focus on the on-site supervisory training that usually complements the short term training sessions.
- o Now that the Regional Health Directorates have become operational, the central level personnel would be the resource personnel for the supervision carried out by the Regional Health Directorate. This would provide customized national expertise at the regional level and increase the coordination of activities.
- o Set supervision priorities for the prefectures in order to reinforce specific health centers, health programs, or categories of personnel. Design supervisory mechanisms to ensure that supervision is efficiently conducted.
- o Conduct integrated on-site supervisory training with standardized protocol aimed at improving the quality of services, particularly child survival activities.
- o Monthly meetings organized by the Prefectoral Medical Officers could be the opportunity for local coordination, technical updating, experience

sharing, the distribution of supplies and materials and data analysis.

- o Plan and coordinate the available resources. Increase the multi-sectorial collaboration in the form of common means of transportation for supervision or other mechanisms to be determined at the local level.

2. Quality of Services

- o Ensure an effective and regular presence of supervisors at every level of the health system.
- o Create connections with the management committees of the village pharmacies so they would be part of the Health Education Network.
- o Conduct operations research on the cost effectiveness of resources, particularly the cost effectiveness of short term training, followed by on-site supervisory training.
- o Monitor the use of standardized CS IEC manuals and visual aids, especially the utilization of the Family Planning-Child Survival IEC kit (Trousse PF-Survie de l'Enfant) which is still to be distributed.
- o Authorize the health workers to modify the format and presentation of the standardized key messages.
- o Monitor the regular use of observation guides and checklists provided in the training manuals.
- o Conduct periodic mini-surveys of targeted populations as to adjust key messages in a timely fashion.
- o Monitor the use of visual aids, training manuals and trainer's guides donated to the professional health and social schools (ENAM, ENSF, ENFS).
- o Set performance standards for each activity - managerial, clinical and IEC at every level of the health system.

3. Decentralized Services

- o Rationalize the decentralized training and establish a schedule for field visits. For instance: field visit every six months for the central level, every three months for the regional level and every six or four weeks for the prefectural level.
- o Give an official mandate to train and to supervise the restructured three member prefectural teams.

- o Empower the prefectural level and permit its evolution according to a locally defined work plan. Allow it to institute its own mechanism to handle the logistics aspects of management.

- o Reorganize the communication system. Some examples:

Field visits scheduled by the central and regional levels should be dispatched to the directors and chiefs one or two weeks in advance of the scheduled visit.

Set up a system of mailboxes, so that persons who make the up-country trips can systematically help to deliver the mail and materials for the prefectures.

Edit and circulate a Supervisory Newsletter. The first issue would present the objectives: to ensure and maintain the quality of services that will increase user satisfaction with the health system.

Increase the efficiency of the information system: less reporting forms, easy "fill-in-the-blank" forms. Train the personnel in the analysis and immediate use of data during on-site supervisory training.

Set deadlines for reports. For instance, reports from the health centers should be brought to the March, June, September and December meetings.

Disseminate the abstracts of reports and supervisory training results to the Medical Officers, Chiefs of Prefectoral Services and National Head of Programs.

Plan quarterly meetings for dissemination of Applied
- Research/Operations Research results followed by Annual Awards for the best research.

4. Future Training Sessions

- o Plan the workshop for the preparation of curricula revision.
- o Update the training provided by the schools for Primary Health Care - Bamako Initiative - Child Survival.
- o Update and improve the Ministry five-year training plan.
- o Provide three to four weeks of refresher training for personnel, either at the regional or the prefectural level.
- o Allocate specific times of the year for all the short term in-service training. The number of training days or training sessions that each

agent will be allowed to attend should be specified, especially for the medical officers, physician assistants and sanitation technicians (cadres spécialisés de la Préfecture.)

- o Take into account the training needs of the collaborating international agencies and avoid the 24 hours notice for attendance to a training session.

V. PROJECT DESCRIPTION

A. The Project as Proposed in the Project Paper

1. Child Survival Planning and Coordination Component

A Planning and Coordination Unit (PCU) was to provide guidance and direction to all divisions and donors assisting the Ministry of Public Health, Social Affairs, and Women's Condition (MOH) in child survival interventions. The PCU was to act as the secretariat to all on-going child survival programs, the Advisory Board, and the National Commission for Child Survival. It was also through the PCU that the project would provide support to the other components of the project.

In order to accomplish this, the PCU was to publish a ten year National Child Survival Policy and Strategy paper, implement a model MOH annual planning and budget exercise, conduct up to two in-country management seminars, develop training and reference materials on planning and budgeting, provide for the inclusion of child survival subjects in the curricula of institutes training medical personnel, develop an eight year Child Survival Training Plan and Budget, compile an inventory of ongoing and proposed child survival related activities and arrange for a recurrent cost study and a KAP survey.

The PCU was to be staffed by a Togolese director with extensive experience in planning, budgeting and public administration who was to be seconded from the Ministry of Plan. The unit was to have two MOH coordinators, one from the Directorate of Public Health and the other from the Directorate of Social Affairs. The work of the PCU was to be guided by a Child Survival Advisory Board (CCSE) for the definition and approval of the content of the Policy and Strategy Paper and the Plan and Budget recommendations accruing from annual planning and budgeting exercises. The board was to meet at least twice a quarter.

Under the Advisory Board, the National Commission for Child Survival (CNSE) was to assure that all agencies interested and active in child survival were informed of one another's efforts, facilitate coordination, and avoid duplication and fragmentation of effort. The commission's working group was to be composed of operational-level representatives of the MOH, Plan, Rural Development, Hydraulics, Finance, donors, PVOs and religious organizations. The commission was to meet at least twice a quarter.

2. The Health Centers Component

The Health Centers component was to respond to the need for establishing a systematized liaison between public health personnel and village families. As the project itself could not attempt to reach all rural based public health personnel, a training of trainers (TOT) approach was adopted, relying on twenty one prefecture health education teams composed of two public health personnel named by the chief medical officer with the concurrence of the National Health Education Service (SNES) to carry out the implementation. Prefecture health education teams would

train health center based public health personnel, who would in turn instruct village clients. Training was to focus on interpersonal and community relations skills, adult health education and promotion techniques, and on how to plan and implement local health activities. Supervision of the activities was to be assumed by a Togolese Team's Assistant contracted by USAID.

3. The Community Outreach Component

The activities under the Community Outreach component were to supplement and complement those under the health centers component by reaching beyond the public health personnel to work directly with villagers. The activities were to be undertaken only in the Plateaux and Savanes regions. Once the agents received refresher training in interpersonal and community relations skills, adult health education and promotion techniques, and on how to plan and implement local health activities they were to continue working with some 800 village development committees (VDCs) organized under the Rural Water Supply and Sanitation (RWSS) project. The organization, coordination and monitoring of these activities were to be handled by an expatriate personal services contractor (PSC) under contract to USAID.

B. The Project as Implemented

1. Child Survival Planning and Coordination Component

a) Planning and Coordination Unit (PCU)

Two months after the signing of the project agreement, the MOH created the PCU and named a part-time project director and two national coordinators. The director came from the MOH, Directorate of Public Health, and was at the same time Director of the Division of Maternal and Child Health (DME). The Health Center Support coordinator was seconded from the Ministry of Plan. The former coordinator of the Rural Water Supply and Sanitation project, from the Directorate of Social Affairs, was named as coordinator for the Community Outreach component. It wasn't until August of 1989 that the PCU was organizationally integrated into the ministry organizational chart, when it was attached to the cabinet of the MOH. That same month, a third Togolese cadre from the Directorate of Women's Condition was seconded to the unit.

b) Child Survival Advisory Board (CCSE)

Two years after the signing of the project agreement, on September 26 1989, the Child Survival Advisory Board (CCSE) was created. The board was composed of the director of the cabinet of the MOH as the president of the board, the MOH technical advisor for planning, and the General Directors of the three ministerial directorates. The first meeting of the Advisory Board was held in April 1990. Over the life of the project, from September 1987 through December 1992, the Advisory Board meet a total of four times.

On March 20, 1991, the CCSE met at the request of the PCU. The activity report for

the fourth quarter of 1990 and the work plan for 1991 were presented and discussed. The report of the Workshop for Coordination of Child Survival and the draft of Action Plan 91 for Child Survival were presented. The irregular meetings of the CCSE were addressed, and various recommendations were made.

The third meeting of CCSE took place on January 8, 1992, with the participation of the technical assistants for the first time since the new team's arrival. The report of activities in 1991, and the PCU's action plan for 1992 were presented by the director of the project. A few of the important activities planned by the PCU for 1992 that had not yet been clearly defined were discussed and confirmed in the context of that meeting. The last meeting of CCSE, which was supposed to address the distribution of the project's assets and the future of the contract personnel was originally scheduled for April 11, and then rescheduled for November 11, 1992. However, since no quorum was reached, the meeting was postponed and was later followed by the strike period.

c) National Commission for Child Survival (CNSE)

On September 27, 1989 the Minister of Public Health, Social Affairs and Women's Condition (MOH) signed a decree creating the National Commission for Child Survival and its four subcommittees; Family Planning and Safe Motherhood, Communicable Diseases, IEC, and Nutrition and Growth Monitoring. The National Commission's president and vice-presidents were respectively the Director of the Cabinet of the MOH, the General Director of Public Health, and the Attache of the Cabinet of the Ministry of Plan. The forty seven members of the commission, exclusive of the PCU, were drawn from the Directorate of Public Health (19), Social Affairs (6), Women's Condition (1), the Ministry of Plan (3), National Education (1), Rural Development (1), and international donors and non governmental organizations (NGOs)(16).

The first meeting of the CNSE took place on November 16, 1989. The meeting brought-together 30 participants for the first time to set up the National Commission, determine the composition of the four subcommittees, and establish a schedule of meetings for the subcommittees.

By the end of 1989, each of the four subcommittees had met to work on updating activity calendars for 1989 and to prepare work plans for 1990. The four subcommittees officially met on several occasions later on. However, these subsequent meetings took place in the context of the Planning and Coordination meetings organized by the PCU, and focused on issues related to the PCU.

On October 3, 1990 the CNSE held a meeting concerning the progress of its activities planned for 1990. A report on the planning meeting that was held in Kara in February 1990 was presented and approved.

The four sub-committees of the CNSE met at the end of December 1990 and at the beginning of January. Work centered around the list of activities accomplished in 1990, and the 1991 work plan. The meetings allowed documents to be drafted for the

Workshop for the Coordination of Child Survival which was organized by PCU in January. They also provided the opportunity to observe that most of the sub-committees were not functioning, and that it would be necessary to reevaluate their role, their structure, and their way of working.

At the end of June 1991, the PCU asked the presidents of the four sub-committees of the CNSE to call a meeting in order to operationalize the Child Survival Action Plan for 1991, and to prepare the action plan for 1992 before the annual planning meeting scheduled for August. Only three sub-committees met and only the revival of action plan 1991 was discussed. After this, the PCU no longer prompted any CNSE meetings. It was up to the presidents of the sub-committees to organize the work of the members in their specific units.

d) Long and Short Term Training

As part of the Planning and Coordination component, the project paper provided financing for two US masters degrees (MPH) in public health planning and administration, and up to two in-country management seminars to be given by personnel from a US university specializing in such seminars.

Throughout 1988 and 1989, USAID and the PCU worked on defining the terms of reference for the in-country seminars and negotiating with several state-side universities. By the third quarter of 1989, after repeated delays and postponements in the implementation of the seminars, USAID decided to include these seminar activities in the DAC contract.

In 1990, USAID financed two doctors for MPH training at a state-side university. During the same year, the Health Centers Component Coordinator attended a three month course in health care financing at Boston University. In 1991, the Project Director and the Outreach Component Coordinator attended a two month course in French at Boston University entitled Economie et Gestion des Ressources dans les Programmes de Santé.

2. The Health Centers Component

Over the course of the implementation of the project, several changes were made as to the composition and number prefecture health education teams. The territorial administrators of Togo upgraded the status of several sous-préfectures and created new préfectures bringing the total in the country to thirty. The team composition was also modified to include the Medical Assistant and a backup team of three members. The project trained thirty prefecture teams composed of five public health personnel and a member of a local non-government organization (NGO) or a Peace Corps Volunteer. In addition to the support provided by the PCU, supervision of the activities was to be assumed by a Togolese Team's Assistant to be contracted directly by USAID. This position was never filled during the project implementation.

Both the project paper and correspondence to the Ministry specifically mentioned, that USAID would provide materials and services for construction of two modest

Child Survival demonstration centers as part of the Health Centers component. An estimated \$100,000 was included in the project budget to cover the engineering and construction costs to be handled by USAID. During the mid-term evaluation in 1989, the GOT requested that the construction funds be used to construct headquarters for the Division of Maternal and Child Health Care. As USAID procedures for construction were considered to be too lengthy and complex, it was recommended that the National Investment Budget (BIE) funds allocated to the HSSCS project be used to construct the buildings that the ministry needed and that the construction line item of the USAID budget be used to cover the operational costs guaranteed under the BIE. By the end of the project, no construction had taken place, and the funds earmarked for this activity were reprogrammed into an extension of the technical assistance contract.

3. The Community Outreach Network

The organization, coordination, and monitoring of the activities of this component were to be handled by an expatriate Private Service Contractor (PSC) under contract to USAID. A PSC Project Monitor/Advisor was engaged by USAID at the beginning of the project for an estimated period of three years, but the contract length was later reduced to two years. Although reference is made in the statement of work of a 1989 contract modification that the contractor was to "fulfill the requirements of the agents assistant position as described in the project paper," the scope of these duties was not specifically outlined.

In actuality, the primary responsibility for the implementation of the operational activities under this component fell upon the Regional Directors for Social Affairs in the two project zones. Funds for personnel, training and supervision, and in-kind contributions of gas coupons financed through the BIE were made available to the regions in support of the follow-up activities.

C. Summary Description of the TA Contract

A summary of the long term technical assistance personnel that participated in project implementation under the terms of the contract with Development Assistance Corporation (DAC) is shown in Table I below. DAC provided the long term assistance for the positions of Health Planner and of Administrative and Financial Manager. DAC's subcontractor, MCDI, was responsible for the long term technical assistance for an Information/ Education/Communication (IEC) Training Specialist and for most of the short term technical assistance.

1. Services Initially Envisioned

The contract signed on September 21, 1988 between USAID and DAC was for a total contract amount of \$3,498,300 and a period of three years. The prime contractor, DAC, was to provide 36 person months for a Health Planner and Chief of Party to serve as the principle advisor to the Director of the PCU. DAC's subcontractor, MCDI, was to provide 36 person months for an IEC Training Specialist to provide technical expertise for the health education and training element of the project. Both

the prime and subcontractor were to provide short term assistance for an estimated total of 10 person months. In addition to long and short term personnel recruited and supplied through the contract, DAC was to provide advances for and the management of \$1,300,000 in local costs related to the implementation of the in-country activities and major procurement.

Table III Level of Effort

FUNCTION	PERSON MONTHS	PERIOD(S)
Health Planner	48.00	10/88 to 06/90 10/90 to 12/92
IEC Specialist	46.00	12/88 to 03/90 06/90 to 12/92
Financial/Administrative Manager	28.00	09/90 to 12/92
Short Term Technical Assistance	20.50	Life of Project

2. Justification and Increase in the Level of Effort

Once implementation of the project was underway several joint decisions between USAID and the Ministry resulted in an increase in the level of effort of services from those originally negotiated in the contract between USAID and DAC. To lessen the administrative burden on the USAID/Lome mission staff and to speed up and assure good coordination of the programming, it was decided that a second subcontract should be sought to conduct the in-country planning and budgeting training seminars. USAID had already begun a competitive selection process and the Harvard Institute for International Development (HIID) was retained to design, prepare materials for, and conduct three (3) planning and budgeting seminars in collaboration with the UPC. In November 1990, DAC entered into a subcontract agreement for these services with HIID for a total contract amount of \$109,625 for work to begin in December 1990 and to end about June 1991.

One of the findings of the mid-term evaluation was that the Health Planner/Chief of Party was overburdened with financial and administrative tasks that seriously distracted from the primary function of planning. This combined with poor administrative procedures led to a recommendation by the evaluators that a financial/administrative manager's position be added and that USAID recruit for this position. As the position required management of local and funds being provided by the prime contractor, it was subsequently decided that the post of financial manager/chief of party be added to the prime contractor's services so as to provide better accountability of the contractor's funds. As a result of this decision, the level of effort of the DAC contract was increased to include thirteen additional person months

of services. Following the negotiations on the contract modifications, an amendment was signed that modified the statement of work and increased the total contract costs to \$3,915,872.

3. Contract Extensions

The DAC contract signed on September 21, 1988 was amended nine times. The major modifications resulted in the addition of a third long term position and the inclusion of a second subcontractor (HIID) to carry out a series of in-country planning and budgeting training seminars.

The original contract between USAID and DAC was for a period of three years from September 1988 through July 1991. This period was extended for one year in September 1991, for three months in September 1992 to coincide with the project activity completion date (PACD) of December 1992, and then for three additional months in January 1993 to permit project close-out which had been delayed because of a general strike in Lomé.

The first modification to this contract was issued as a no cost extension of the contract completion date from July 24, 1990 to September 30, 1991. This was necessary to allow DAC to offer long term contracts to the Financial and Administrative manager and to the replacement Health Planner.

A second one year extension, from October 1, 1991 through September 30, 1992, was awarded to DAC in 1991. This extension was granted for several reasons:

- 1) the project implementation had experienced a substantial increase in the pace and quality of it's activities following the personnel changes by DAC;
- 2) USAID's follow-on health project, the Togo Child Survival and Population project, was still in the design phase, and,
- 3) as a result of late start-up and early difficulties in implementation several major project targets had yet to be attained.

Therefore, a twelve month extension of the entire long term staff was negotiated and the contract was amended for a total contract sum of \$5,212,495.

A three month extension, from October 1, 1992 through the project activity completion date (PACD) December 31, 1992, was awarded to allow DAC to complete the project close out in an orderly manner. In the last year of implementation the turbulent political situation had slowed implementation of project activities, necessitating a final amendment extending the project completion date to March 31, 1993. The final amendment brought the total contract value to \$5,412,469. Table II below summarizes the contract amendments.

Table III Contract Amendments DAC/MCDI

#	DATE	\$AMOUNT	COMMENTS
	09/21/88	3,500,000	contract signed
1	09/21/90	0	unfunded extension of estimated completion date to 09/30/91
2	01/28/91	480,000	incremental funding
3	07/03/91	327,000	incremental funding
4	08/26/91	512,872	increased total contract amount to \$3,915,872 and to add HIID subcontract, replace health planner, revise health planner's duties and admin/finance mgr position (COP)
5	09/24/91	0	contract completion date extended to 01/31/92
6	12/27/91	950,000	increase contract total to \$5,212,495 provide incremental funding and define project outputs for the period of extension
7	03/31/92	346,623	full funding of contract amount of \$5,212,495
8	09/30/92	200,000	extension of contract completion date to 12/31/92 and increase contract to \$5,412,469
9	01/28/93	0	extend contract completion date to 3/31/93

4. Technical Assistance Personnel

Staffing of the HSSCS project called for two long term technical assistants, each to serve for a period of thirty six months. DAC was responsible for the recruitment of the Health Planner and MCDI for the IEC Specialist. Two years after the initial contract negotiations, a third long term employee was added under the auspices of DAC, to manage financial operations and local funds. The projected versus actual man months of services provided for both long and short term technical assistance is shown in Table III below.

Table IV Person Months of Technical Services Provided

Position	Original Contract	Amend no. 4	Amend no. 6	Amend no. 8	Total Estimate	Total Provided
DAC						
Project Manager			12.00	3.00		
Clerk			4.00	1.30		
Health Planner	36.00		12.00	3.00	51.00	48.00
Fin./Admin. Manager		13.00	12.00	3.00	28.00	28.00
Consultants	3.50		2.00			3.50
MCDI						
Technical Officer	7.00		2.50	0.68		
Admin. Assistant	4.50		2.75	0.90		
Economist			3.80	1.75		6.00
IEC Specialist	36.00		12.00	3.00	51.00	46.00
Consultants	6.00		2.00			
HIID						
Harvard Faculty			2.34		2.34	1.50
Consultants			2.60		2.60	3.00
Secretarial			1.14		1.14	

Over the life of the project the majority of the short term technical assistance time was devoted to two activities; cost recovery and budget and planning training. Although all three companies, DAC, MCDI and HIID, fielded short term consultants over the life of the project, it was primarily MCDI's responsibility to provide for short term technical assistance. HIID was added as a subcontract for the purpose of conducting a series of in-country training seminars in planning and budgeting. All of the services under this subcontract were provided by short term consultants between December 1990 and May 1991.

DAC provided 2 short term technical assistants, one as an interim chief of party upon the premature departure of the Health Planner and a second for the development of a management information system plan for the Ministry of Health and Population.

MCDI recruited a total of 10 consultants for short term assistance. The major emphasis of the short term assistance centered on health care financing and cost recovery.

D. Project Administration and Financing

1. Total Life of Project Contributions

The total grant amount provided by USAID over the five year life of the HSSCS project was \$6,000,000. The estimated GOT in kind contribution during the project was \$2,000,000 for personnel and facilities. The GOT also provided a total of \$322,883 through the government's national investment budget bringing the total combined life of project financing to \$8,322,883.

Twenty eight percent of the total estimated project cost was provided by the Togolese government. Exclusive of the in kind contribution, the GOT provided 5% of the project funding. The largest sum, a total of \$3,952,944 went to the provision of long and short term technical assistance. This represents a little less than half the combined life of project financing as seen in figure 1.

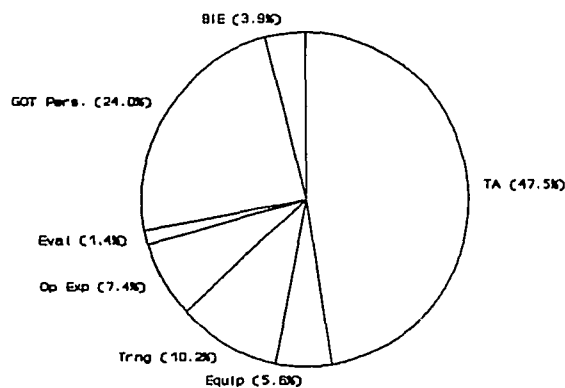


Figure 1
Life of project financing by category

GOT personnel represents 24 % of the project total with training costs, long and short term as well as in-country, accounting for 10% of the overall project total. Operating expenses (7.4%), equipment and vehicle purchases (5.6%), the GOT national investment fund contribution (3.9%), and audit and evaluation of the project (1.4%) follow in descending order.

2. Contribution of the Togolese Government

The Togolese government provided personnel both directly to the project through assignments of senior cadre to the PCU and indirectly for the prefecture health education teams, national level trainers, and prefecture and regional supervisors. The total in kind contribution to the project for the personnel and facilities for the life of the project is estimated at \$2,000,000. The GOT, through its National Investment Budget (BIE), regularly guaranteed the HSSCS project an annual sum of 20,000,000 CFA or approximately \$71,000. Except for 1989, the project used the majority of the financing available to supplement the operating expenses of the HSSCS, primarily for the purchase of gasoline and the payment of salaries.

Starting in 1991, the BIE funds were programmed so as to cover recurrent costs for the outreach component of the project in the Plateaux and Savanes regions. Serious delays in funds being made available in 1992 through the BIE resulted in the project only being able to make funds and gasoline for supervision of project activities available in the last quarter of the year.

Table V BIE Life of Project Financing

Year/ Cat.	1988	1989	1990	1991	1992	LOP
PCU						0
Heal. Cent.						0
Out- reach				2500000	2000000	4500000
Equ.	7218618		4037269	2053925		13309812
Veh.						0
Pers.	8090151	6462695	9616896	9671742	12990681	46832165
Op. Exp.	4156500	3182875	6344470	4676213	3075000	210435058
CFA	19465269	9645570	19998635	18901880	18065681	86077035
US\$	69,519	34,448	71,424	67,507	64,520	307,418

3. Contribution of USAID

The final contract amount for long and short term technical assistance, exclusive of local costs, provided through the contract totaled \$3,828,671. This represents 64% of the total USAID contribution of \$6,000,000 to the life of project finances. USAID for their part contracted for a personal services project advisor, an evaluation and audit to bring the total for this category to \$4,067,627.

Purchases of vehicles, computers, office furnishings and equipment totaled \$468,719 for the life of the project. Apart from the vehicles, all of the equipment purchased under the HSSCS project was transferred to the GOT for use by the new Togo Child Survival and Population project.

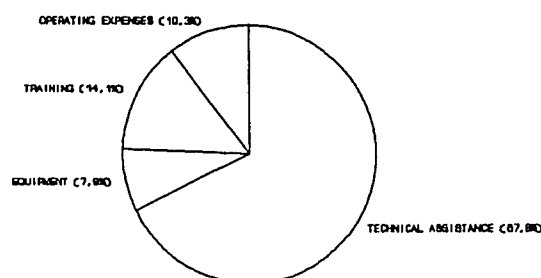


Figure 2
Percentage of USAID project funds spent by category

Commodities purchases totaled \$468,719 for the life of the project. The major categories of commodities were vehicles, computers and office furniture and equipment.

One of the first tasks undertaken by the HSSCS was the development of a procurement plan for the purchase of all the major equipment to be financed by the project but the necessary actions were not taken in a timely manner. One of the causes appears to have been an incomplete understanding of the procurement procedures involving USAID funding. Once the procurement plan was accepted, there should not have been any need to seek, except for modifications, approval for the preparation of the individual tenders for bids or competitive procurement documents.

Table VI Annual USAID Financial Contribution

Year/ Cat.	1988	1989	1990	1991	1992	LOP
Tech. Ass.	237548	686612	864691	949576	1214518	3952944
Equ.	3558	91189	58542	294006	21424	468719
Train.	1454	47024	58542	294006	21424	845537
Op. Exp.	75594	94149	61000	58058	60556	349357
Pers.	29199	35543	77687	65382	60949	268760
Eval.			27481		50000	77481
Audit		37202				37202
Total	347,353	991,719	1,313,783	1,743,707	1,603,439	6,000,000

One of the first activities of future project implementation should be to quickly draw up a procurement plan for approval by USAID and the GOT. This plan should include a realistic time table that contains procurement amounts linked to key events. Effective project implementation will be better served by such a plan, if completed and approved in advance. This would also result in an efficient use of personnel that would otherwise have to devote time and effort to seeking waivers to prescribed procedures.

Project funds under the DAC contract line item of local costs were used to purchase three project vehicles in 1989 to replace the vehicles transferred from the RWSS. A fourth 4-wheel drive pick-up was purchased in 1990 to facilitate travel and deliveries of training materials to the prefectures.

The major equipment procurement undertaken by DAC involved the purchase

through competitive bidding of 162 motorcycles for the prefecture health education teams. The project paper outlined procurement of 42 motorcycles to equip the 21 prefecture health teams and 120 to replace the motorcycles purchased under the RWSS project for the social affairs (72) and public health sanitation (48) agents in the two project regions.

Over the course of the project implementation, this plan was modified as a result of the reconfiguration of the prefecture teams, composed of five government agents in lieu of two, and the restructuring of the prefectures, creation of nine new prefectures for a total of thirty in lieu of twenty one as indicated in the project paper.

The distribution schedule proposed and accepted by the MOH was to create two vehicle pools in each prefecture, one consisting of three motorcycles assigned to the Chief Medical Officer (CMO) for the prefecture team health center personnel, and a second consisting of two motorcycles assigned to the Chief of the Social Center for the prefecture team social affairs personnel. After distribution of a total of 150 motorcycles to the prefecture health education teams, the remaining 12 motorcycles were assigned to the national level services of health education (SNES) and community development.

At project start-up \$185,261 of property was transferred from the RWSS project which consisted mostly of vehicles, 128 motorcycles and five four wheeled vehicles, and a limited quantity of office furniture and equipment.

In 1988 the Togolese counterpart fund was used to purchase office equipment, mostly air conditioners and typewriters for project use. USAID funds complemented these purchases in 1989 with additional office furniture and equipment totaling \$25,000.

In 1989, the Togolese counterpart funds were used to purchase IEC equipment, television, video and camera, but unfortunately only 48% of the available funds were used that year.

The project inherited one computer and printer from the RWSS project. The project's 1989 procurement plan laid out the purchase of six computers, seven back-up power supplies and one printer so as to have computers available to the secretarial pool, the Health Planner, the IEC specialist, the Director, the two Coordinators and the agents' assistants. In 1989, the project purchased three computers, one printer, and three back-up power supplies totalling over \$10,000. Although the project's computer capacity was brought up to four units, the project still only possessed two letter quality dot matrix printers.

The procurement plan for computer equipment was not completed until 1990, when three additional computers and five printers were purchased from the US, for a total purchase cost of approximately \$12,000, to bring the total to seven complete (computer, printer and UPS) computer stations.

The equipment procured from the US consisted of two laser printers, three ink jet printers giving the project high quality output capacity. Of the three computers

purchased, two were portable, allowing the project to easily transport computers to the field for training and workshops. HIID purchased an additional lap-top computer and portable printer that was turned over to the project at the end of their contract.

DAC also purchased several computer software applications over the life of the project. These applications were primarily in French and included dBase IV, Lotus 123, Lotus Allways, Word 5, dBase Stats, and Micro TSP.

At the onset of 1992, the project inventory under the contractor's responsibility totaled \$640,422. Authorization was obtained in April of 1992 to transfer and auction off the vehicles and spare parts inherited from the RWSS project. The sale and transfers were completed by September of the same year.

All of the vehicles, computer equipment, and a portion of the office equipment and furnishings were turned over the ministry. All of the usable household furnishings and a portion of the office furniture and equipment were transferred to USAID for their new project. A detailed listing of the equipment procured and the final arrangement for property transfer/disposal can be found in Annex C.

One of the major activities under the HSSCS project was the financing of in-country training for health and social affairs agents and state-side training for senior level cadre. Three major IEC cascade training programs for approximately 1200 public health workers in child survival subjects were organized. With the assistance of a state-side university a series of planning and budgeting training seminars were organized in-country. USAID financed two long-term masters candidates and several key project personnel for short term training in the United States. A total of \$845,537 was expended on training. Figure 3 shows the dollar amounts expended in-country on the different project activities. The categories PCU, Health Centers and Outreach represent the funds spent on training and workshops.

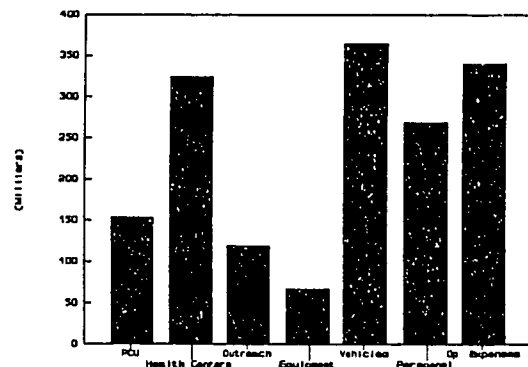


Figure 3
Total local cost expenditures by category
(USAID)

The operating expenses financed through the project grant agreement included vehicle maintenance and operation, per-diem for in country travel, office rental and utilities, supplies and salaries of support personnel. USAID contributed a total of \$618,117 over the life of the project.

E. Local Personnel

1. Government of Togo (GOT)

Government of Togo personnel directly assigned to the PCU from the ministry and

those contracted to staff both the PCU and the two regional bases, totaled more than twenty individuals and more than one thousand person months over the life of the project. Table I of Annex D shows the details of the GOT furnished personnel, their function, period served and number of months with the project.

The PCU was staffed with three, and later four, senior ministry cadre seconded from the Ministry of Public Health, Social Affairs and Women's Condition and the Ministry of Plan. The project's director came from the Directorate of Public Health, the health centers component coordinator from the Ministry of Plan, the community outreach component coordinator from the Directorate of Social Affairs, and the women's condition coordinator from the Directorate of Women's Condition.

2. Personal Services Contractor (PSC)

In February of 1988 USAID/Togo negotiated a personal services contract to provide technical assistance to the Ministry of Health, Social Affairs and Women's Conditions in the implementation of the HSSCS project. The contractor worked as a team member to the host country government officials, a technical assistance contractor and USAID staff under the supervision of the USAID representative.

The Project Monitor/Advisor was assigned to the PCU as a resource person and to provide day-to-day monitoring and assistance in the project implementation and management. The original contract period was for an estimated three years. In July 1989 the contract was modified to shorten the duration of the contract to two years and to modify the contractor's statement of work to; (a) fulfill the requirements of the agents assistant position as described in the project agreement, (b) assist the PCU in the elaboration of budgets, work plans, reports, etc., and (c) participate in the preparation of the PCU's planning and budgeting seminars.

3. Contractual Personnel

In addition to the personnel supplied to the project as part of the counterpart agreement, project funds were also used to engage additional support staff, many of whom had been previously employed by the RWSS project, in particular the accountants and drivers. The details of the persons employed, the position they held and their dates of employment are contained in Table II of Annex D.

F. IEC/TRAINING

Funded by USAID and the Government of Togo, the IEC/Training component of the project was mandated to train 21 prefectoral teams of 3 persons each on Child Survival IEC, who in turn will train 1300 health center workers and 120 social workers. As the training component is part of the institutionalization of a Planning and Coordination Unit (PCU), an eight-year training plan with budget was also among the expected outcomes, as well as the integration of child survival in the curricula of health schools.

In addition, the French version of the project description recommended the use of the

training component as the place to experiment with the planning and budgeting exercises, as well as a way to operationalize the principles of integration, coordination, multi-sectoral collaboration and decentralization. The project was implemented by the Health and Social Sectors, and two distinctive operational components of the PCU were set up: 1) the Health Services Support Component, and 2) the Health Community Component.

In light of this dual mandate, the categories of personnel that would implement the two components of IEC at the prefectoral level were:

- o Personnel who manage the IEC, understood as a support system for services - which includes logistics and a Management Information System. This managerial side of the IEC, especially the planning, budgeting and supervision of IEC activities falls under the responsibility of the specialized prefectoral personnel such as Medical Officers, Prefectoral Physicians' Assistants, Prefectoral Heads of Social Services, and Prefectoral Sanitation Technicians.
- o Personnel who implement the IEC as a liaison between the general population and the Health and Social Sectors. The personnel to be trained would be those who provide the services, mainly the qualified agents assigned to the preventive and curative centers such as Registered Nurses, Registered Midwives, and Registered Sanitation Agents. These are "front line agents" whose responsibilities are to train and supervise their subordinates. Since there are relatively few qualified health workers, trained agents such as Nurses and Auxiliary Nurses carrying on these tasks in remote health centers and in some health services.

In February 1990, a national policy for Child Survival Health Education was defined after the diagnostic du SNES, an evaluation of the National Health Education Service. The objective was to coordinate health education activities and upgrade the health education training skills of the prefectoral personnel. The essential information for Child Survival Promotion was gathered on various and related visual aids: flip charts, drawings, fliers, memory guides and manuals. Health personnel and social workers, as well as village volunteers, were allowed to adapt the standardized content to the local cultural context. The flyer of standardized key messages was used as a "desk reference" by the personnel. It is now a commonly used reference for the oral translation of national languages and dialects.

Going from what was known towards what was less familiar, the training methods were a mixture of lectures and general techniques for adult education - andragogical, participatory, and non-hierarchical. One fourth of the prefectoral team members were qualified health workers such as physician assistants, nurses and midwives. For each of the three series of Child Survival IEC training workshops - EPI, Malaria/ORT, Growth Monitoring and Family Planning, social workers represented 38%, 35% and 33% of class participants respectively; whereas health workers represented more than half of the trainees, 60.9%, 57.5% and 57.6%, respectively.

Among the health care providers and social workers trained by the prefectural teams, more than half of the participants were able to fully utilize the manuals provided, 70%, 67% and 63% for each series. About a third of the participants were less qualified workers such as matrons, birth attendants trained on-the-job, aide-soignantes, manoeuvres médicaux, and community agents.

Decentralized training is an on-going process. Although trainees are now conducting acceptable group education sessions, they are not systematically using the visual aids. As a result, four months after the end of the last training series, the use of IEC material generated by the HSSCS project was still very low. Interpersonal techniques were not used during the individual clinical encounters for children with fever or diarrhea.

The prefectural teams do not have an official mandate to train and supervise. Therefore, once the training sessions were completed, the follow up of the trained zone agents was not conducted on a regular and periodic basis. Subsequently, there were very few team meetings scheduled for review of health education and continued training.

The on-site supervisory training that should normally follow the in-class short-term training was hindered by the lack of means and by poor planning at the central and prefectural levels. At the same time, the annual programming document, as well as the observation of field activities, showed that training - as a program input and support activity - was becoming increasingly important, taking more time and resources than other program activities.

At the community level, the continuation of activities was hindered by the lack of organization and coordination of resources. A sample of mothers living in the 5 km radius around the health centers was surveyed for their knowledge of child survival measures. The mothers' high level of knowledge about child survival measures could be attributed to their proximity to health services and the availability of other sources of information. It is difficult to state whether "cascade training" has had a significant impact on the knowledge and practices of the interviewed mothers.

G. Problems in Project Implementation

1. Delayed Start-up

Late or delayed start-ups of USAID projects are not uncommon. But certainly it was anticipated that as a follow-on to the Rural Water Supply and Sanitation (RWSS) project, the Health Sector Support for Child Survival (HSSCS) project would only experience a minimal transition. Building on the long and rich experience in community development inherited from the RWSS project and to speed implementation, the new project incorporated the project staff and retained the two regions where the RWSS had carried out its activities to serve as the implementation zone of the new community outreach activities.

After the formulation of the HSSCS project along these terms, a project agreement

was signed on September 7, 1987. As previously stated, the personnel transferred from the RWSS project came with considerable experience and an extensive team in place for the implementation of the community outreach activities. Unfortunately, in the beginning stages of the HSSCS project, the other two components were not as well equipped, staffed nor experienced.

Although the project officially began at the end of 1987, the technical assistance contract for the services of the Health Planner, IEC Specialist and management of the local cost funds for the project activities was not signed until one year later.

Throughout 1988 the PCU director was preoccupied with other duties as he was also the Director of the Maternal and Child Health Care Division of the ministry. The coordinator for the Health Center Support component had been sent on training by his ministry and away from the unit during most of the year.

2. Understanding of the PCU Role

An early problem with the incorporation of prior project staff was that they were not promptly inculcated in the objectives of the new project. It was only natural that they found it easier to continue doing what they knew best. Several early activities of the new project were little more than old RWSS activities presented as the new project's undertaking. For example, the project undertook pump maintenance retraining of the village development committees and women responsible for pump monitoring in 350 villages that had received the last installation of pumps under the former project.

With no technical assistance, only a part-time director, and primarily personnel transferred from the old RWSS project at hand, it was no wonder that many people saw the HSSCS project merely as an extension of the former water project. The project paper and project agreement in fact often made references to the "PCU" as the "HSSCS project" and vice-versa. Few people knew much about the PCU, confusing it with the Cellule de Planification of the MOH which was formed to assist the World Bank in the design of their health sector structural readjustment program, entitled Health and Population Project.

The project concept presupposed that the ministry and donors were ready to alter their vertical planning process and the practice of budgeting and planning for CS activities on a program by program basis. The central level was highly resistant to change. Donors and ministry officials alike were puzzled over the PCU's status and purpose. It had no definite position within the ministry hierarchy, it lacked guidance from advisory bodies, and other than participating in CS policy and planning seminars during its first eighteen months, it had not been able to establish a lead in coordinating donors and the GOT activities. It is no wonder that the PCU as a ministerial planning and coordinating unit had little credibility.

Instead of establishing a strong reputation in the areas of budgeting, planning and coordination, the project itself had difficulties preparing its own work plan, coordinating the AID and GOT local cost budgets, and administering its internal operations. It was often misinterpreted by the ministry as another donor to which

impetuous requests could be addressed for financing punctual activities.

A mid-term evaluation, conducted by USAID in July of 1989, highlighted the aforementioned points in its report and set out a series of recommendations that were to be executed and followed up on through a mini-evaluation at the end of 1989. The major recommendations were to (1) attach the PCU to the cabinet of the ministry, (2) name a full-time director, (3) establish a PCU advisory board, (4) create Ad Hoc committees for Child Survival, (5) add a coordinator from the Directorate of Women's Condition, and (6) make the PCU the principle locus of the director, planner and coordinators.

3. Reorganization of Ministry of Health

In February of 1990, the Ministry of Public Health, Social Affairs, and Women's Condition was separated into two ministries; the Ministry of Public Health, later renamed Ministry of Health and Population (MHP), and the Ministry of Social Affairs and Women's Condition (MSAWC). Following the National Conference in the summer of 1991, the Ministry of Health and Population began implementation of their organization chart, under development for several years as a precondition to the World Bank structural readjustment loan. By the end of 1991, the ministry had named directors to all of the directorates and regions. Similarly, the Ministry of Social Affairs and Women's Condition went through several ministers and name changes to end up as the Ministry of Social Welfare and National Solidarity.

4. Local Cost Financing of Project Activities

Throughout 1988, the PCU marginally functioned on a \$155,000 advance from USAID to cover local costs. These funds were used primarily to cover salaries, office modifications and operating expenses for the Lome office. This was an interim measure used by USAID for project start-up while awaiting the selection and negotiation of a contract with a technical assistance firm to assume the technical and administrative management of the project's local cost financing.

5. Personnel Changes

The period following the evaluation of 1989 was notable for two reasons; (1) the implementation of the evaluation recommendations began to have a positive effect on the project's outputs and its status, and (2) major personnel changes took place within both the technical assistance team and the project staff. The GOT acted immediately on the evaluation recommendations namely attaching the PCU to the cabinet of the ministry, naming a coordinator from the Directorate General of Women's Condition, creating an Child Survival Advisory Board (CCSE) and a National Commission for Child Survival (CNSE) and nominating the minister's technical advisor as the new director of the PCU.

Unfortunately, just as the GOT was pulling together the elements for project success, the technical assistance component of the project was undergoing a total personnel turnover. The USAID Project Monitor/Advisor completed his contract in February

1990 and was not replaced. The IEC Specialist left the project in March 1990 after only 16 months on the job. In June the Health Planner/Chief of Party left her job. This series of events left the project with no long term technical assistance 33 months after the signing of the grant agreement and 21 months after the awarding of the TA contract.

6. New Activities Included in the Project

Urgency to get concrete activities going, in particular for the budgeting and planning process, was felt by the PCU after numerous delays and reformulation of the terms of reference for the in-country training seminars. Even though subcontracting negotiations with HIID were underway for staging a series of three in-country training sessions in planning and budgeting, the project organized a series of workshops in planning and budgeting, three in total, held between June and August of 1990 with the assistance of outside consultants.

In June, DAC fielded an interim chief of party to fill in while a new health planner was being recruited for the project. Concurrently, negotiations between DAC and USAID continued to increase the level of effort in their contract. This involved the addition to DAC's original statement of work of a second subcontract with HIID and the addition of a financial administrative manager's position. By the end of September 1990, DAC filled both the Health Planner's and Financial/Administrative Manager's positions with candidates acceptable to USAID and the GOT.

7. Political and Economic Environment

Although the political situation had been quite stable for the previous 25 years, a democratization process started in October 1990 with violent conflicts, strikes of all or parts of the public sector, frequent changes in leadership, and overall insecure working environment. These events have undoubtedly brought major constraints in the implementation of the HSSCS project for the last three years. These were due to the necessity of frequent rescheduling of planned activities, and the difficulties for high level management staff in the Ministry to make decisions in a situation of political uncertainty.

In most cases, however, field activities, once authorized, were performed without major problems. Also, it should be noted that key political decisions were made during that period regarding the health and population sector. In particular, a Family Planning policy document was adopted, and major steps were taken toward a new organizational structure and the decentralization of the ministry.

Starting in November, just before the actual closing down of the PUC, a general strike was launched within the public sector. This had the unfortunate consequence that very little transfer of technical expertise, key information and documents could be done by the technical assistance before its departure. In addition, this delayed and made difficult all procedures regarding property disposal and payment of final bills.

APPENDICES

Logical Framework planned versus actual

<i>OUTPUTS</i>	<i>MAGNITUDE</i>	<i>ACHIEVED</i>
Planning and Coordination		
Ten year National Child Survival Policy and Strategy Paper	one	draft completed and left for approval by follow on project
Annually executed process of five-year Child Survival Plan and Budget	process implemented at least twice	process completed four times but only included annual plan and budget
Inventory of ongoing and proposed Child Survival activities in Togo	one	inventory completed in 1989, not updated since
Eight year Child Survival Training Plan and Budget	one	not developed by mutual agreement with USAID
Study of recurrent costs and sustainability of Child Survival activities	one	one study completed and extensive follow up provided by contractor for the adaptation of a health care financing policy
Child Survival Planning and Coordination Unit	one	one
Child Survival Advisory Board	one, two meeting per quarter	one, met four times during LOP
Commission for Child Survival	one, two meetings per quarter	one, met sporatically
Ministry personnel trained in planning and budgeting		
• directors, division chiefs, senior central staff	20	2
• senior operational central-level staff	20	19
• regional officials	15	15
• chief prefecture doctors, medical assistants, key prefecture-level staff	50	31
Training curricula, field tested instructional aides, training manuals, plan and budget preparation directions, standardized budget formats, and uniform costing indices for planning and budgeting training	one core set with variants as appropriate	one

ANNEX A

<i>OUTPUTS</i>	<i>MAGNITUDE</i>	<i>ACHIEVED</i>
Collaborative protocols with agencies and MOH entities with which coordination is essential for technically sound delivery of Child Survival services	up to 50 over LOP to specify cooperative arrangements and assign responsibilities of participants for activities funded or facilitated by this project	3 - 18
Inclusion of Child Survival subjects in curricula of institutions training medical personnel	5 - 8 institutions	proposal for the inclusion of Child Survival activities prepared by a short term consultant
HEALTH CENTERS SUPPORT		
Mobility of SNES prefecture health education teams	21 teams, 42 individuals	30 teams, 98 individuals
Trained, experienced teams in 1) effective interpersonal approaches; 2) general adult education techniques; and 3) coordinated planning and implementation of health activities.	21 teams, 42 individuals	30 teams, 150 individuals
Trained, experienced teams in 1) the substantive rudiments, underlying rationales, and efficiency of key Child Survival measures; 2) demonstrating and applying home administered Child Survival measures; and 3) the effective publicizing, promotion and demonstration of Child Survival measures	21 teams, 42 individuals	30 teams, 150 individuals
Monitoring and supervision of teams by teams assistant		no assistant either hired or seconded from the GOT
Team instructed health center based public health staff in same subjects as teams training	1300 public health personnel	approximately 1000
Uniform, correlated instructional curricula, manuals, audio-visual aids, demonstration packets, and reference materials for teams training sessions	one set	one set
Consistent, correlated IEC materials on Child Survival topics for distribution to villagers	one set	one set

OUTPUTS	MAGNITUDE	ACHIEVED
Teams' quarterly reports on their instruction and follow-up of health center staff, and other project financed activities	4 per year per in-place team	none received
Teams' assistant's quarterly reports	12	no teams' assistant
Child Survival demonstration centers	2	construction program canceled
OUTREACH NETWORK		
Availability of community agents	120 agents	64 agents
Upgraded community mobilization skills of community agents from fresher courses in this subject	120 agents	120 agents
Trained, experienced teams in 1) the substantive rudiments, delaying rationales, and efficiency of key Child Survival measures; 2) demonstrating and applying home administered Child Survival measures; and 3) the active publicizing, promotion and demonstration of Child Survival measures	21 teams, 42 individuals	30 teams, 150 individuals
Monitoring and supervision of community agents by agents' assistants		no agents' assistant hired by USAID nor seconded from GOT
Community agent conducted field days on Child Survival topics for groups of leaders and VDC delegates	at least 480 during project	2 field days conducted in all villages in the Plateaux and Savanes regions where CVDs were active
Form, correlated instructional material, manuals, audio-visual demonstration packets, and reference materials for community agents' training sessions and for agents' subsequent use in working with and distribution to the clients	one set	one set
Teams' quarterly reports on their project financed activities	at least 15 per agent	none received

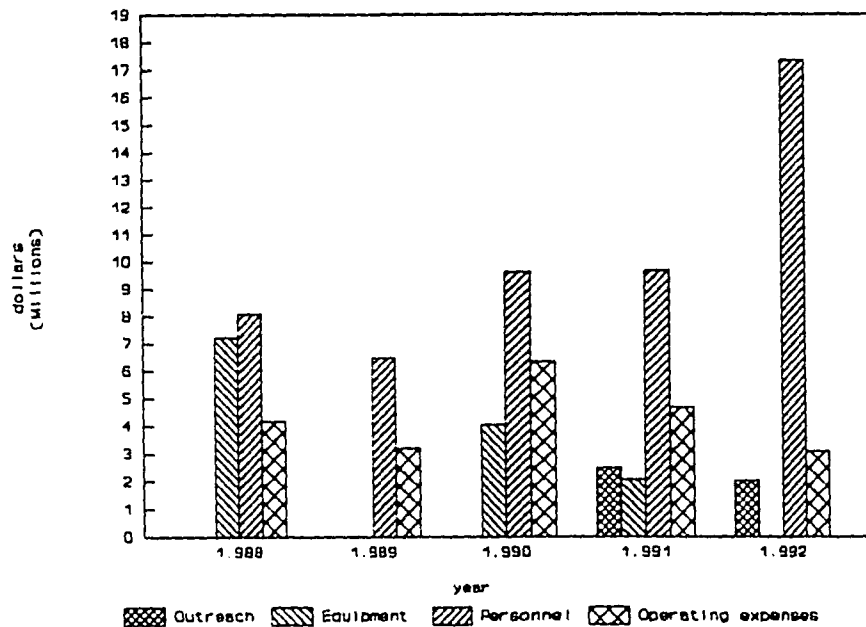
DETAILED FINANCIAL SUMMARY

Togolese government contribution to local costs

A. Detailed annual totals

Togolese National Investment Fund						
Year	1,988	1,989	1,990	1,991	1,992	LOP
CU						0
Health Centers						0
Outreach				2,500,000	2,000,000	4,500,000
Equipment	7,218,618		4,037,269	2,053,925		13,309,812
Personnel	8,090,151	6,462,695	9,616,896	9,671,742	17,320,908	51,162,392
Operating expenses	4,156,500	3,182,875	6,344,470	4,676,213	3,075,000	21,435,058
Total	19,465,269	9,645,570	19,998,635	18,901,880	22,395,908	90,407,262
	69,519	34,448	71,424	67,507	79,985	322,883
funds authorized	71,429	71,429	71,429	71,429	89,286	375,002
percent of funds used	97	48	100	95	90	86

B. Local Cost Summary



1
Totals by category (BIE)

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USAID Contribution to Local Cost Expenditures

A. Detailed annual totals

expense category / year	1988	1989	1990	1991	1992	via du projet	via du projet
Unité de Planif. et Coord.	0	6060	38066	67851	41037	153014	364963
Tournees							67713
Tournees de suivi/supervision		2838	6000	5936		14774	254401
Participation Seminaires				4296	7324	11620	33416
Participation formation				114		114	9433
Seminaires/ateliers						0	268760
Seminaires budget/management			18671	13008	7500	39179	55689
Etudes Coûts Recurrents			1641	25755	3438	30834	100184
Programmation et coordination		2705	11626	9642	12922	36895	20963
Autres					8958	8958	34095
Consultants				8198	798	8906	37947
Réu./Concertation/Plan inter		517	128		97	742	6857
Reproduction documents				277		277	168
Centre de Documentation				625		625	12858
Echange d'Experiences						0	339628
Projet Soutien Centres Santé	0	11274	68231	109089	135527	324121	70615
Tournees							33835
Journées Etudes/programm.						0	29707
Tournees de suivi/supervision			2248	11153	4593	17994	2960
Participation formation		1764				1764	21013
Formation							25940
Formation des formateurs			31584	19140		50724	29810
Form. agents postes fixes		6974	14947	47289	115883	185093	1094
Elaboration materiel IEC							23687
EV			16127	1111		17238	287
VD		2536	3001	5693		11230	20672
ALU			324	4980		5304	23457
SR/PF				11783	1194	12977	50891
PC/NUT				7940	13857	21797	5660
Projet Santé Communautaire	1454	17705	50195	27440	22376	119170	1636542
Tournees							
Participation formation				1213		1213	
Journées de supervision				980	312	1292	
Supervision Régionale						0	
Site Equipe Préfectorale						0	
Seminaires/ateliers							
Relier Intersectoriel				5556		5556	
Agence de Planification			2957			2957	
Formations							
Form. des agents Comm. Plat	1454	5250	4562	6647	8431	26344	
Form. des agents Comm. Sav.		4243	4046	2196	7265	17750	
Form. Villageoises Plat		3497	20220	5424	3514	32655	
Form. Villageoises Sav.		4715	16670	5424	2854	29663	
Form/Formations Equipes Pref.						0	
Evaluation Projet Pilote			1740			1740	
Matériel et Equipement	3558	39139	19151	2010	3028	66886	
Refrigerateur climatiseurs	1223	1342				2565	
Meuble de bureau	983	16492	922			18397	
Equipement de bureau							
Computers	1352	19796	18229	2010	3028	44415	
Equipement audio-visuel		90				90	
Calculatrices		1058				1058	
Tableaux de Conférences		361				361	
Autres appareils						0	
Matériel						0	
Autres						0	

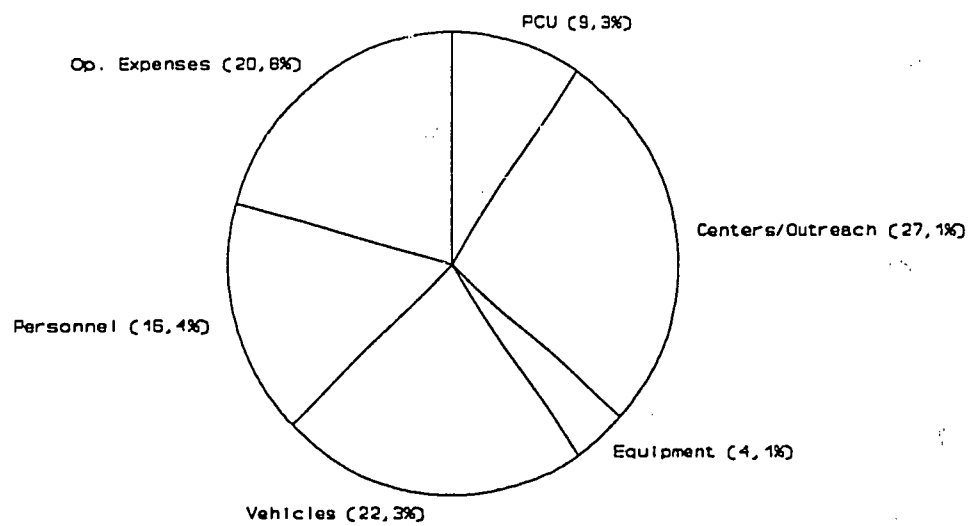


Figure 5
Percentage of total by category (USAID)

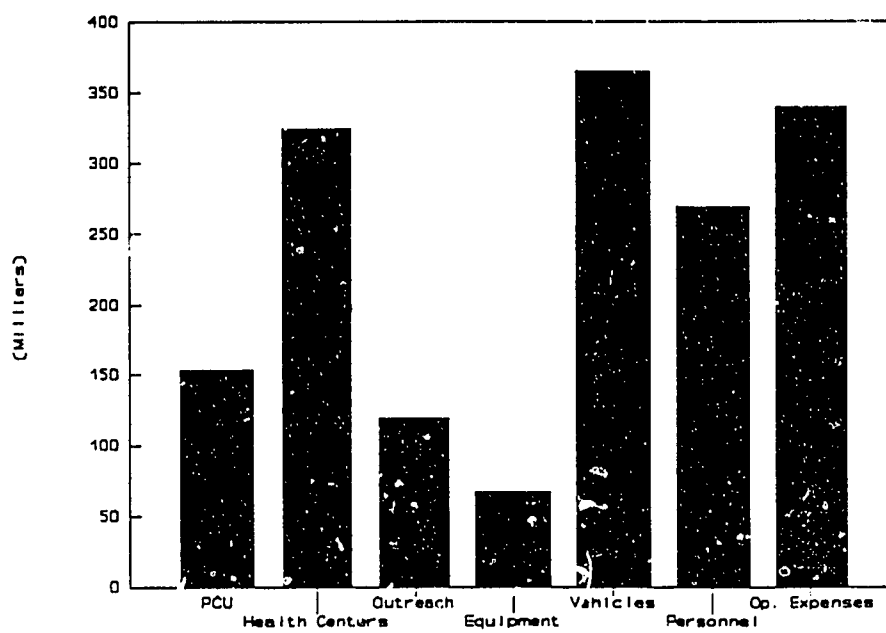


Figure 6
Total dollar expenditures by category (USAID)

III. Overall Local Cost Contribution (USAID & BIE)

A. Detailed Annual Totals

year/ category	1988	1989	1990	1991	1992	life of project
PCU	0	6060	38066	67851	41037	153014
Health Centers	0	11274	68231	109089	135527	324121
Outreach	1454	17705	50195	36369	29519	135241
Equipment	29339	39139	33570	9345	3028	114421
Vehicles	1068	81099	18734	260717	3345	364963
Personnel	58092	58624	112033	99924	122809	451483
Op. Expenses	89371	78452	90202	79040	79117	416182
\$	179324	292353	411031	662335	414382	1959425

B. Summary

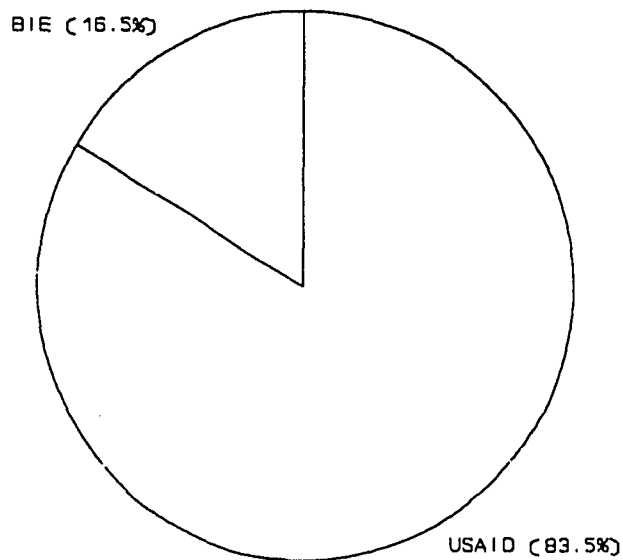


Figure 7
Cummulative percentage
of local cost funding by source

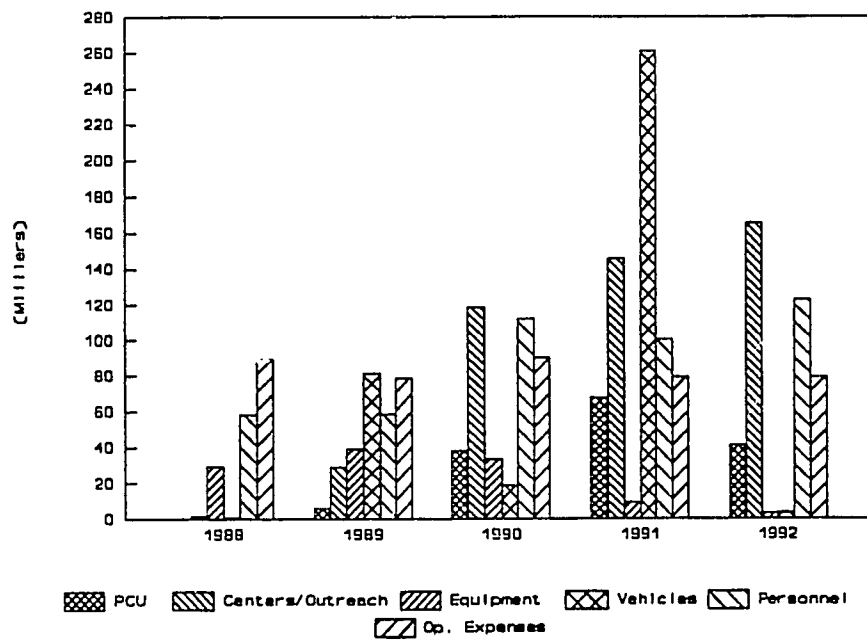


Figure 8
Annual Totals by category (USAID & BIE)

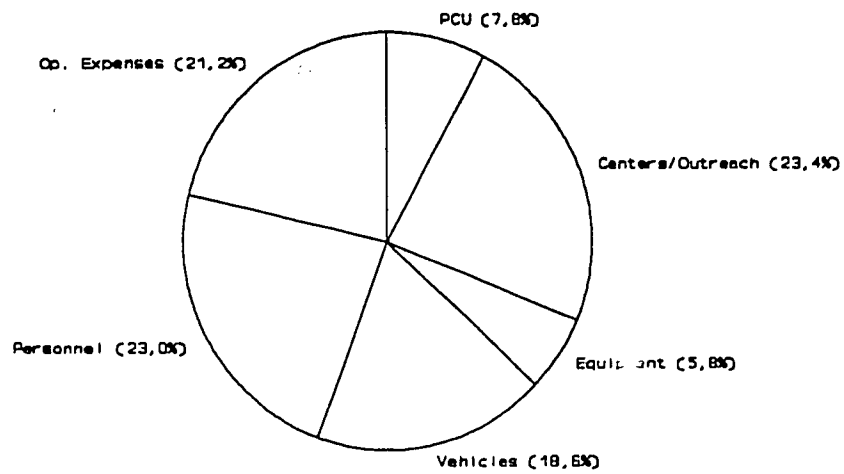


Figure 9
Percentage of total expenditures by category (USAID & BIE)

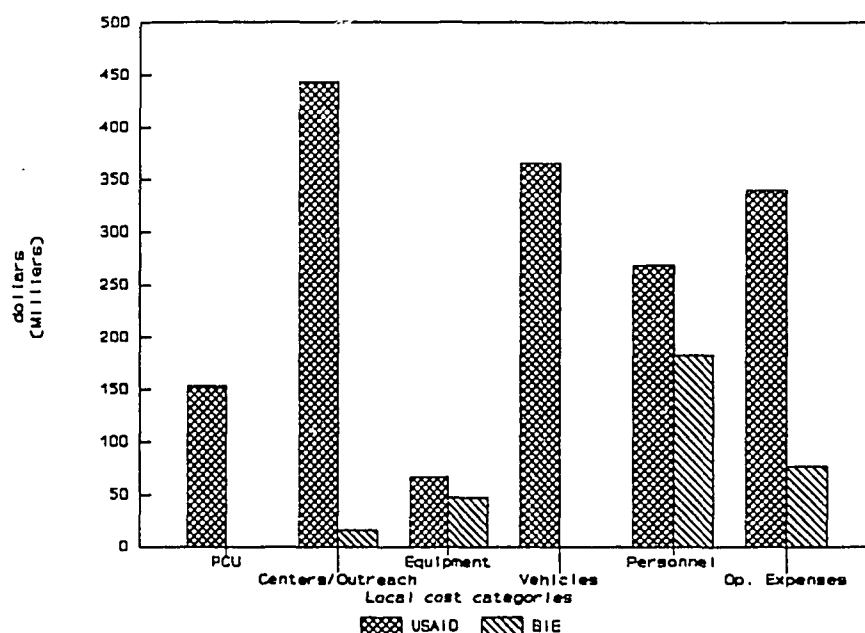


Figure 10
Total expenditures by category (USAID & BIE)

IV. Combined USAID and GOT Project Financing

year	1988	1989	1990	1991	1992	LOP
TECHNICAL ASSISTANCE						
Long Term	175411	609475	834691	909576	1189518	3718671
Short Term		15000	30000	40000	25000	110000
PSC	62137	62137				124273
EQUIPMENT						
Training materials	0	2536	21192	31507	15051	70286
Vehicles	0	49514	32618	0	0	82132
Office	27987	19343	922	7335	0	55587
Motorcycles	0	0	0	260489	3345	263834
Computers	1352	19796	18229	2010	3028	44415
TRAINING						
Planning /coordination	0	3222	32066	57505	33713	126506
Training of trainers	0	0	31584	19140	0	50724
Training of teams per diem	1454	24679	63402	81465	145090	316089
Budgeting /planning	0	9123	15326	28201	24332	76982
				103840		103840
Long Term			67004	67004		134008
Short Term		10000	15000	28459		53459

ANNEX B

year	1988	1989	1990	1991	1992	LOP
OPERATING EXPENSES						
Office	34073	52283	49131	41402	44032	220921
Vehicles	40453	10281	11334	16428	16524	95020
Motorcycles	15913	42952	23194	16929	10982	109970
PERSONNEL						
Accountants	12723	13714	34887	30645	25565	117533
Support personnel	45370	44910	77146	69279	97245	333950
GOT	400000	400000	400000	400000	400000	2000000
EVALUATION			27481		50000	77481
AUDIT		37202				37202
TOTAL	816871	1426167	1785207	2211214	2083424	8322883

LISTE OF COMMODITIES PURCHASED WITH PROJECT FUNDS

Véhicules								
#	qte.	année d'achat	description	prix CFA	prix \$	kilometrage	numéro d'immatriculation	proposition de transfert (Ministère, Direction, Division)
1	1	1989	Peugeot 505 Break	5,330,000	17946.13	97,000	RT 0701 K	MBESSN, Direction de la Planification et de la Coordination
2	64	1991	Yamaha DT100 motocyclette	28,784,384	102801.00		voir liste ci-jointe	MBESSN, deux par prefecture
			total value of vehicles transferred to MBES-SN	34,114,384	120,747			
1	1	1989	Peugeot 505 Berline	4,755,000	16010.00	79,000	RT 0702 K	MSP, Direction de la Planification, de la Formation et de la Recherche
2	1	1989	Peugeot 505 Berline	4,755,000	16010.00	> 100,000	RT 0703 K	MSP, Direction des Affaires Communes
3	1	1990	Toyota pick-up	4,773,750	16691.43	75,000	RT 7041 K	MSP, Direction de la Pharmacie et du Medicament, Division du Medicament, Pharmacie Central d'Approvisionnement (PHARMAPRO)
4	98	1991	Yamaha DT100 motocyclette	44,076,088	157414.00		voir liste ci-jointe	MSP, trois par prefecture (liste c-jointe)
			total value of vehicles transferred to MSP	58,359,838	206,125			

VEHICULES A DEUX ROUES								
NBRE	REGION	PREFECTURE	NOM	FONCTION	MINISTERE	LIEU	RTG	CHASSIS
1	CENTRALE	Blitta	ASSIH Bidjosme	APS	BSSN	Blitta-G	8434	2142
2	CENTRALE	Blitta	BADJALIMBE Mensah	APS	BSSN	Langabou	8433	2138
3	CENTRALE	Sotouboua	BATCHABANI Kossi	APS	BSSN	Sotoubou	8468	2143
4	CENTRALE	Sotouboua	BODJONA Manari	APS	BSSN	Sotoubou	8469	2194
5	CENTRALE	Tchamba	DIGBEREKOU Atcha	APS	BSSN	Tchamba	8472	2165
6	CENTRALE	Tchamba	TCHADJOBO Sadj	APS	BSSN	Kouloumi	8427	2141

VEHICULES A DEUX ROUES

NBRE	REGION	PREFECTURE	NOM	FONCTION	MINISTERE	LIEU	RTG	CHASSIS
7	CENTRALE	Tchaoudjo	TCHA-KOURA K. Souley	APS	BSSN	SOKODE	8426	2149
8	CENTRALE	Tchaoudjo	TITIPO Karfité	APS	BSSN	SOKODE	8425	2139
9	KARA	Assoli	ALEDJI Igbalao Esso	APS	BSSN	Bafilo	8483	2099
10	KARA	Assoli	ESSO DJOBO Komi	APS	BSSN	Bafilo	8484	2098
11	KARA	BINAH	BADJANA Héou Warfei	APS	BSSN	Pagouda	8448	2123
12	KARA	BINAH	BODJONA Nana	APS	BSSN	Pagouda	8445	2118
13	KARA	Bassar	LAROU Tér	APS	BSSN	Bassar	8488	2187
14	KARA	Bassar	TAMANDJA Binalibou	APS	BSSN	Bassar	8487	2208
15	KARA	DANKPEN	ALI Youssaou	APS	BSSN	Guérin-K	8455	2131
16	KARA	DANKPEN	MONSILA N'ghambé	APS	BSSN	Guérin K	8451	2214
17	KARA	Doufeigou	BABALIMA M'bakahèl	AF J	BSSN	Niamtoug	2996	2073
18	KARA	Doufeigou	TKPA Ama épouse DADANEMA	APS	BSSN	Niamtoug	8429	2207
19	KARA	KERAN	KATAKONA Boutoyam	APS	BSSN	KANDE	2967	2151
20	KARA	KERAN	PITCHATOU Pokoyè	APS	BSSN	KANDE	8477	2089
21	KARA	KOZAH	AKATITO Tchaa Ekpai	APS	BSSN	KARA	2978	2080
22	KARA	KOZAH	NABEDE Essozimna	APS	BSSN	Kara	8489	2163
23	Maritime	AVE	AGOUVI Kokou	APS	BSSN	Badja	2971	2166
24	Maritime	AVE	ZOUHOUGBE Edoh	CSS	BSSN	Keve	8530	2181
25	Maritime	GOLFE	Afi Dodji DJABIE	Attaché de Cabinet	BSSN	Lomé	8497	2183
26	Maritime	GOLFE	Afi Dodji DJABIE	ATTACHE DE CABINET	BSSN	Lomé	8441	2067
27	Maritime	GOLFE	Afi Dodji DJABIE	Attaché de Cabinet	BSSN	Lomé	2968	2205

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VEHICULES A DEUX ROUES

NBRE	REGION	PREFECTURE	NOM	FONCTION	MINISTERE	LIEU	RTG	CHASSIS
28	Maritime	GOLFE	Afi-DODJI DJABIE	Attaché de Cabinet	BSSN	Lomé	2999	2112
29	Maritime	Golfe	POKANA Pyalou	APS	BSSN	Agoeve	8528	2170
30	Maritime	Golfe	SIKPA Addjoa	APS	BSSN	Lomé	2970	2168
31	Maritime	Lacs	ASSIGNON Kouassi	APS	BSSN	Anfoin	8431	2147
32	Maritime	Lacs	TENOU Anani Sénam	APS	BSSN	ANEHO	8534	2198
33	Maritime	VO	Mme BEILA LAMBONI	APS	BSSN	Vogan	8515	2137
34	Maritime	VO	Mme TOULAN Deolévi	APS	BSSN	Vogan	8521	2178
35	Maritime	YOTO	GHAZY Alnass Tchadjiroh	APS	BSSN	Tabligbo	8524	2161
36	Maritime	YOTO	VIGLO Kodjo	APS	BSSN	BOTO	8529	2184
37	Maritime	ZIO	AMELA Yaovi	APS	BSSN	Tsévié	8527	2176
38	Maritime	ZIO	KOSSI Eméfa	CSS	BSSN	Tsévié	8522	2175
39	Plateaux	AGOU	SEKONOU Koffi	APS	BSSN	AgouGare	8516	2150
40	Plateaux	AGOU	SUMSA Kossiwa Dzignbodi	APS	BSSN	Amozouco	2981	2167
41	Plateaux	AMOU	AGBO Kéléwugo Aluinou	APS	BSSN	AmouOblo	2973	2144
42	Plateaux	AMOU	DJAGADOU Koffi	APS	BSSN	Amlamé	8494	2192
43	Plateaux	DAYES	BATAHINA Kadaba	APS	BSSN	Elavagno	2982	2145
44	Plateaux	DAYES	DEOGBOEVI Yao Séna	Cadre Technique de Dével.	BSSN	Apéyéme	8495	2186
45	Plateaux	Est-Mono	BANABOKO Sato	APS	BSSN	Anié	8435	2204
46	Plateaux	Est-Mono	BOUARI Soumaila	APS	BSSN		8531	2177
47	Plateaux	Haho	KETOR Kossi	APS	BSSN	Notsé	8478	2216
48	Plateaux	Haho	TSOGBALE Mawouna Stéphan	APS	BSSN	Notsé	8482	2185

VEHICULES A DEUX ROUES

NBRE	REGION	PREFECTURE	NOM	FONCTION	MINISTERE	LIEU	RTG	CHASSIS
49	Plateaux	KLOTO	EDZE Komla Agbessi	APS	BSSN	Kpalimé	8419	2154
50	Plateaux	KLOTO	SOULEYMANE Ramatou	APS	BSSN	Kpalimé	8418	2179
51	Plateaux	Moyen-Mono	DOUMEGNO Kossi Blewusi	APS	BSSN	Tohoum	8479	2171
52	Plateaux	Moyen-Mono	MODJINOUD Kodjokuma N.	APS	BSSN	Tohoum	8480	2218
53	Plateaux	OGOUE	GNAMASSOU Awoukou	APS	BSSN	Atakpamé	8518	2179
54	Plateaux	OGOUE	HESSOU Mawulé	APS	BSSN	Gléi	2972	2157
55	Plateaux	WAWA	AZOLI Kpébou Sénamé	APS	BSSN	Tomégbé	8493	2190
56	Plateaux	WAWA	LANWADAN Koffi	APS	BSSN	Badou	8492	2148
57	SAVANES	Kpendjal	KOSSI Eméfa	Directeur Régional Savane	BSSN	NAKI-EST	8432	2210
58	SAVANES	Kpendjal	TCHOUJAFEI Ekpao	Assistant Social	BSSN	Mandouri	8525	2174
59	SAVANES	OTI	AKOH Nanda	APS	BSSN	MANGO	8491	2155
60	SAVANES	OTI	LAKOUGNON Kossi	APS	BSSN	MANGO	8533	2164
61	SAVANES	TONE	ATAYABA Tasséba	APS	BSSN	Dapaong	2984	2153
62	SAVANES	TONE	SAMBO Préwe	Assistante Sociale	BSSN	Dapaong	8526	2189
63	SAVANES	Tandjouaré	KOKO Ayéna	APS	BSSN	Tandjoua	8459	2199
64	SAVANES	Tandjouaré	OTOYI Kokou	APS	BSSN	NANO	8532	2158

VEHICULES A DEUX ROUES

NBRE	REGION	PREFECTURE	NOM	FONCTION	MINSTERE	LIEU	RTG	CHASSIS
1	CENTRALE	Blitta	AGBODJAVOU Dodji	Médecin-Chef SS Blitta	MSP	Blitta-G	8538	2081
2	CENTRALE	Blitta	AGBODJAVOU Dodji	Médecin-Chef SS Blitta	MSP	Blitta-G	8467	2193
3	CENTRALE	Blitta	AGBODJAVOU Dodji	Médecin-Chef SS Blitta	MSP	Blitta-G	8539	2095
4	CENTRALE	Sotouboua	EL-HADJI Tairou	Médecin-Chef SS/Sotouboua	MSP	Sotoubou	2976	2135
5	CENTRALE	Sotouboua	EL-HADJI Tairou	Médecin-Chef SS/Sotouboua	MSP	Sotoubou	2989	2109
6	CENTRALE	Sotouboua	EL-HADJI Tairou	Médecin-Chef SS/Sotouboua	MSP	Sotouboua	2988	2114
7	CENTRALE	Tchamba	Dr. GABA Dovi Adama	Médecin-Chef SS/Tchamba	MSP	Tchamba	8416	2136
8	CENTRALE	Tchamba	Dr. GABA Dovi Adama	Médecin-Chef SS/Tchamba	MSP	Tchamba	8415	2101
9	CENTRALE	Tchamba	Dr. GABA Dovi Adama	Médecin-Chef SS/Tchamba	MSP	Tchamba	8458	2182
10	CENTRALE	Tchaoudjo	Mme AFELI Abra	Médecin-Chef SS/Tchaoudjo	MSP	SOKODE	8442	2079
11	CENTRALE	Tchaoudjo	Mme AFELI Abra	Médecin-Chef SS/Tchaoudjo	MSP	SOKODE	8461	2116
12	CENTRALE	Tchaoudjo	Mme AFELI Abra	Médecin-Chef SS/Sotouboua	MSP	SOKODE	8443	2126
13	Kara	Assoli	KARABOU K. Potchoziou	Médecin-Chef	MSP	Baflo	8506	2066
14	Kara	Assoli	KARABOU K. Potchoziou	Médecin-Chef	MSP	Baflo	8501	2117
15	Kara	Assoli	KARABOU K. Potchoziou	Médecin-Chef	MSP	Baflo	8507	2082
16	Kara	Bassar	NABILIOU Komlan	Médecin-Chef	MSP	Bassar	8423	2094
17	Kara	Bassar	NABILIOU Komlan	Médecin-Chef	MSP	Bassar	8422	2133
18	Kara	Bassar	NABILIOU Komlan	Médecin-Chef	MSP	Bassar	8446	2078
19	Kara	Binah	DARE Aboudou	Médecin-Chef SS/BINAH	MSP	Pagouda	2995	2105
20	Kara	Binah	DARE Aboudou	Médecin-Chef	MSP	Pagouda	8440	2060
21	Kara	Binah	DARE Aboudou	Médecin-Chef	MSP	Pagouda	8444	2130

VEHICULES A DEUX ROUES

NBRE	REGION	PREFECTURE	NOM	FONCTION	MINISTERE	LIEU	RTG	CHASSIS
22	Kara	DANKPEN	CISSE Cayamaga	Médecin-Chef SS Dankpen	MSP	G-Kouka	2987	2086
23	Kara	DANKPEN	CISSE Cayamaga	Médecin-Chef SS Dankpen	MSP	G-Kouka	2997	2096
24	Kara	DANKPEN	CISSE Cayamaga	Médecin-Chef SS Dankpen	MSP	G-Kouka	8475	2124
25	Kara	Doufelgou	KOMBATE Noudjo Dinnuy	Médecin-Chef	MSP	Niamtoug	2993	2090
26	Kara	Doufelgou	KOMBATE Noudjo Dinnuy	Médecin-Chef	MSP	Niamtoug	8454	2088
27	Kara	Doufelgou	KOMBATE Noudjo Dinnuy	Médecin-Chef	MSP	Niamtoug	8449	2122
28	Kara	Kéran	YAKOUA Yéna	Médecin-Chef	MSP	Kandé	8476	2120
29	Kara	Kéran	YAKOUA Yéna	Médecin-Chef	MSP	Kandé	8456	2077
30	Kara	Kéran	YAKOUA Yéna	Médecin-Chef	MSP	Kandé	8490	2162
31	Kara	Kozah	BATCHASSI E.	Médecin-Chef	MSP	Kara	2991	2084
32	Kara	Kozah	BATCHASSI E.	Médecin-Chef	MSP	Kara	2990	2076
33	Kara	Kozah	BATCHASSI E.	Médecin-Chef	MSP	Kara	2992	2065
34	Maritime	AVE	TOUGNON Kodjo A. Clément	Médecin-Chef SS/AVE	MSP	Assahoun	2966	2203
35	Maritime	AVE	TOUGNON Kodjo A. Clément	Médecin-Chef SS/AVE	MSP	Assahoun	8471	2202
36	Maritime	AVE	TOUGNON Kodjo A. Clément	Médecin-Chef SS/AVE	MSP	Assahoun	8466	2110
37	Maritime	GOLFE	BINI Kilim	Directeur de Cabinet	MSP	Lomé	2977	2102
38	Maritime	GOLFE	BINI Kilim	Directeur de Cabinet	MSP	Lomé	8504	2132
39	Maritime	GOLFE	BINI Kilim	Directeur de Cabinet	MSP	Lomé	8428	2160
40	Maritime	GOLFE	BINI Kilim	Directeur de Cabinet	MSP	Lomé	8496	2169
41	Maritime	GOLFE	BINI Kilim	Directeur de Cabinet	MSP	Lomé	8470	2200
42	Maritime	GOLFE	BINI Kilim	Directeur de Cabinet	MSP	Lomé	8450	2106

VEHICULES A DEUX ROUES

NBRE	REGION	PREFECTURE	NOM	FONCTION	MINSTERE	LIEU	RTG	CHASSIS
43	Maritime	GOLFE	BINI Kilim	Directeur de Cabinet	MSP	Lomé	8500	2191
44	Maritime	GOLFE	BINI Kilim	Directeur de Cabinet	MSP	Lomé	2985	2152
45	Maritime	GOLFE	Dr. AGBEKPONOU Kokou	Médecin-Chef	MSP	Lomé	8413	2156
46	Maritime	GOLFE	Dr. AGBEKPONOU Kokou	Médecin-Chef SS/Golfe	MSP	Lomé	8436	2215
47	Maritime	GOLFE	Dr. AGBEKPONOU Kokou	Médecin-Chef SS/Golfe	MSP	Lomé	8437	2140
48	Maritime	Lacs	Dr. DJAGBASSOU Yoka	Médecin-Chef	MSP	ANEHO	8424	2172
49	Maritime	Lacs	Dr. DJAGBASSOU Yoka	Médecin-Chef SS/Lacs	MSP	ANEHO	8536	2195
50	Maritime	Lacs	Dr. DJAGBASSOU Yoka	Médecin-Chef	MSP	ANEHO	8474	2173
51	Maritime	VO	YIBOR Amatsu	Médecin Chef SS	MSP	VOGAN	2974	2115
52	Maritime	VO	YIBOR Amatsu	Médecin-Chef SS/VO	MSP	VOGAN	8438	2111
53	Maritime	VO	YIBOR Amatsu	Médecin-Chef SS/VO	MSP	VOGAN	8452	2074
54	Maritime	YOTO	AKOEGNON Cyrille	Médecin-Chef SS/YOTO	MSP	Tabligbo	8519	2212
55	Maritime	YOTO	KPOGNON Kossi	Médecin-Chef SS/YOTO	MSP	Tabligbo	8535	2209
56	Maritime	YOTO	TODJE Tétégan	Médecin-Chef SS/YOTO	MSP	Tabligbo	8537	2213
57	Maritime	ZIO	Dr. ATTISSO Kossi	Médecin Généraliste	MSP	Tsévié	8473	2197
58	Maritime	ZIO	Dr. ATTISSO Kossi	Médecin Généraliste	MSP	Tsévié	8430	2159
59	Maritime	ZIO	Dr. ATTISSO Kossi	Médecin Généraliste	MSP	Tsévié	8523	2211
60	Plateaux	AGOU	Dr. Trom-Dogbevi	Medecin-Chef SS Kloto	MSP	AgouGare	8517	2058
61	Plateaux	AGOU	Dr. Trom-Dogbevi	Medecin-Chef SS Kloto	MSP	AgouGare	8499	2180
62	Plateaux	AGOU	Dr. Trom-Dogbevi	Medecin-Chef SS Kloto	MSP	AgouGare	8498	2196
63	Plateaux	Amou	Dr. ATTITSI Kodjo	Médecin-Chef SS Amou	MSP	Amlamé	2998	2127

VEHICULES A DEUX ROUES

NBRE	REGION	PREFECTURE	NOM	FONCTION	MINISTERE	LIEU	RTG	CHASSIS
64	Plateaux	Amou	Dr. ATTITSO Kodjo	Médecin-Chef SS Amou	MSP	Amlamé	8502	2128
65	Plateaux	Amou	Dr. ATTITSO Kodjo	Médecin-Chef SS Amou	MSP	Amlamé	8505	2092
66	Plateaux	DAYES	Dr. Trom-Dogbevi	Medecin-Chef SS Klot	MSP	Danyes	8465	2083
67	Plateaux	DAYES	Dr. Trom-Dogbevi	Medecin-Chef SS Klot	MSP	Danyes	2969	2206
68	Plateaux	DAYES	Dr. Trom-Dogbevi	Medecin-Chef SS Klot	MSP	Danyes	8464	2071
69	Plateaux	Est-Mono	Djarba KPINSAGA	Médecin-Chef SS	MSP	Elavagno	8512	2085
70	Plateaux	Est-Mono	Djarba KPINSAGA	Médecin-Chef SS	MSP	Elavagno	8503	2059
71	Plateaux	Est-Mono	Djarba KPINSAGA	Médecin-Chef SS	MSP	Elavagno	8511	2064
72	Plateaux	Haho	AMEGAN Ayaménou K.	Médecin-Chef SS	MSP	Notsé	8462	2121
73	Plateaux	Haho	AMEGAN Ayaménou K.	Médecin-Chef SS	MSP	Notsé	8481	2091
74	Plateaux	Haho	AMEGAN Ayaménou K.	Médecin-Chef SS	MSP	Notsé	8485	2061
75	Plateaux	KLOTO	KEGBALO K. Akouavi	Assistante Médicale	MSP	Kpalimé	2986	2201
76	Plateaux	KLOTO	KEGBALO K. Akouavi	Assistante Médicale	MSP	Kpalimé	2979	2075
77	Plateaux	KLOTO	KEGBALO K. Akouavi	Assistante Médicale	MSP	Kpalimé	2975	2129
78	Plateaux	Moyen-Mono	AMEGAN Ayaménou K.	Médecin-Chef	MSP	Tohoun	8486	2072
79	Plateaux	Moyen-Mono	AMEGAN Ayaménou K.	Médecin-Chef	MSP	Tohoun	2980	2069
80	Plateaux	Moyen-Mono	AMEGAN Ayaménou K.	Médecin-Chef	MSP	Tohoun	2965	2068
81	Plateaux	OGOUI	Prosper K. KPEGBA	Directeur Régional Santé	MSP	Atakpamé	8508	2079
82	Plateaux	OGOUI	Prosper K. KPEGBA	Directeur Régional Santé	MSP	Atakpamé	8509	2062
83	Plateaux	OGOUI	Prosper K. KPEGBA	Directeur Régional Santé	MSP	Atakpamé	8510	2067
84	Plateaux	WAWA	DOTSE Bayake	Médecin-Chef	MSP	Badou	8460	2103

VEHICULES A DEUX ROUES								
NBRE	REGION	PREFECTURE	NOM	FONCTION	MINISTERE	LIEU	RTG	CHASSIS
85	Plateaux	WAWA	DOTSE Bayake	Médecin-Chef	MSP	Badou	8463	2100
86	Plateaux	WAWA	DOTSE Bayake	Médecin-Chef	MSP	Badou	8414	2125
87	SAVANES	KPENDJAL	Dr. MORGAH Kodjo	Directeur Régional Santé	MSP	Dapaong	8420	2118
88	SAVANES	KPENDJAL	Dr. MORGAH Kodjo	Directeur Régional Santé	MSP	Dapaong	8457	2104
89	SAVANES	KPENDJAL	Dr. MORGAH Kodjo	Directeur Régional	MSP	Dapaong	2983	2188
90	SAVANES	OTI	Dr PANA Assimawè	Médecin-Chef SS/OTI	MSP	MANGO	8514	2108
91	SAVANES	OTI	Dr PANA Assimawè	Médecin-Chef SS/OTI	MSP	MANGO	8447	2063
92	SAVANES	OTI	Dr PANA Assimawè	Médecin-Chef SS/OTI	MSP	MANGO	8513	2107
93	SAVANES	TANDJOUARE	Dr. MORGAH Kodjo	Directeur Régional Santé	MSP	Dapaong	8439	2087
94	SAVANES	TANDJOUARE	Dr. MORGAH Kodjo	Directeur Régional Santé	MSP	Dapaong	8417	2119
95	SAVANES	TANDJOUARE	Dr. MORGAH Kodjo	Directeur Régional	MSP	Dapaong	8520	2146
96	SAVANES	TONE	Dr. MORGAH Kodjo	Directeur Régional Santé	MSP	Dapaong	8453	2097
97	SAVANES	TONE	Dr. MORGAH Kodjo	Directeur Régional Santé	MSP	Dapaong	2994	2134
98	SAVANES	TONE	Dr. MORGAH Kodjo	Directeur Régional Santé	MSP	DAPAONG	8421	2093

Equipement de bureau							
#	qte.	date d'achat	description	prix CFA	prix dollars	ID code	proposition de transfert (Ministère, Direction, Division, Service)
1	1	22/09/90	ordinateur portatif NEC (286)		2795.00	mb 2065	Ministère de la Santé et de la Population (MSP), Direction de la Planification, de la Formation et de la Recherche (DPFR) à servir pour le nouveau projet de l'USAID Survie de l'Enfant et Population
	1		imprimante laser, HP IIP		950.00	mb 2002	
	1		cassette à papier (letter size)		150.00	mb 2070	
	1		cassette à papier (A4)		145.56	mb 2072	
	1		onduleur APC, 1200va		800.00	mb 2004	
	1		transformateur, 1500w		190.00	mb 2006	
	1		03/01/92	carte memoire, 4mb		229.00	
	1		cartouche "postscript"		369.00		
				5628.56			
2	1	22/09/90	ordinateur portatif NEC (286)		2795.00	mb 2001	MSP, Direction de la Planification, de la Formation et de la Recherche (DPFR) à servir pour le nouveau projet de l'USAID, Survie de l'Enfant et Population
	1	10/10/90	imprimante à matrice, Epson LQ500	350000	1000.00	mb 2046	
	1	13/04/89	datasec, 550va	382500	1275.00	mb 2010	
					5070.00		
3	1	22/09/90	ordinateur 80286 CompuTec		1075.00	mb 2034	MSP, Direction de la Planification, de la Formation et de la Recherche (DPFR) à servir pour le nouveau projet de l'USAID, Survie de l'Enfant et Population
	1		moniteur monochrome,			mb 2030	
	1		clavier AT			mb 2031	
	1		onduleur APC, 1200va		800.00	mb 2033	
	1		imprimante laser, HP IIP		950.00	mb 2032	
	1		cassette à papier (letter size)		145.00	mb 2069	
	1		cassette à papier (A4)		150.00	mb 2071	
	1		transformateur, 1500w		190.00	mb 2035	
				3310.00			
4	1	29/11/87	ordinateur 8085, Tandon	1029500	2941.43	mb 2052	MSP, Direction de la Pharmacie et du Medicament, Division du Medicament, Pharmacie Central d'Approvisionnement (PHARMAPRO) à servir pour le nouveau projet de l'USAID, Survie de l'Enfant et Population
	1		moniteur monochrome,			mb 205	
	1		clavier AT			mb 2051	
	1	13/03/89	imprimante à matrice, Epson LQ1050	538180	1793.93	mb 2053	
	1	07/07/89	onduleur AEFS, 400w	401000	1337.00	mb 2054	
				6072.36			

Equipement de bureau							
#	qte.	date d'achat	description	prix CFA	prix doBars	ID code	proposition de transfert (Ministere, Direction, Division, Service)
5	1	27/06/89	ordinateur 80286, Samsung SPC 6500, 891200069	3351303	3723.00	mb 2017	MSP, DPFR, Direction à servir pour le nouveau projet de l'USAID, Survie de l'Enfant et Population
	1	29/11/87	Tandon moniteur monochrome DM4, S4-8506565G	65000	216.00	mb 2016	
	1	07/07/89	clavier AT, 9BBC000411	401000		mb 2015	
	1	22/09/89	onduleur AEES, 400va, 89/3120F34		1337.00	mb 2019	
	1	22/09/90	imprimante à jet d'encre, HP deskjet, 3029A17160		655.00	mb 2018	
	1		transformateur, 100w		39.00	mb 2020	
					5970.00		
6	1	10/10/90	ordinateur portatif, Compac LTE286		2758.53	mb 2062	MSP, DPFR, Direction, à servir pour le nouveau projet de l'USAID, Survie de l'Enfant et Population, à l'attention des consultants en mission
	1		transformateur pour compac		362.00	mb 2036	
	1		imprimante portatif, Diconix 150		3120.53	mb 2068	
7	1	10/11/88	machine à écrire Sharp XQ345	320000	1066.67	mb 2047	MSP, DAC, Division de l'Administration, Secretariat
8	1	01/04/86	stencil électronique	575385	1643.96	mb 2055	MSP, DPFR, Direction de la Formation à servir pour le nouveau projet de l'USAID, Survie de l'Enfant et Population
	1	27/12/89	duplicateur des stencils, Alcatel	272527	908.40	me 2056	
	1	10/11/90	rétroprojecteur, 3M	546020	1820.07	am 4004	
	1	10/11/90	machine à relieur	268110	893.70	mb 2057	
	1	10/10/90	flipchart stand	94320	314.40	mb 1042	
					5580.53		
9	1	10/11/90	machine à calculer, Sharp CS2660	56345	187.00	mb 2067	MSP, DAC, Division des Finances, Service de la Comptabilité
	6	16/05/89	machine à calculer, Sharp	330000	1100.00	mb 2014, 2022, 2023, 2024, 2025, 2061	
					1287.00		

Equipement de bureau							
#	qte.	date d'achat	description	prix CFA	prix dollars	ID code	proposition de transfert (Ministere, Direction, Division, Service)
10	1	10/10/88	cassette radio Sharp	90000	300.00	am 4008	MSP, Direction des Soins de Santé Primaires (DSSP), Division de la Santé Communautaire, Service de l'IEC à servir pour le nouveau projet de l'USAID, Survie de l'Enfant et Population
	1	15/08/89	télévision couleur, Samsung	150293	500.98	am 4005	
	1	15/08/89	camera vidéo Sony	592120	1973.73	am 4007	
	1	15/08/89	vidéo Akai 9EGN	259995	866.65	am 4006	
	1	15/08/89	radio Sony	109945	366.48	am 4008	
					4007.84		
11	1	10/11/88	réfrigérateur 140l Electrolux	117887	392.00	am 4002	MSP, Direction Regional Maritime
12	1		réfrigérateur Philips petit modèle	95000	380.00	am 4003	MSP, Direction Generale
13	1		cafetière moulinex	21559	71.90	am 4010	MSP, Direction Generale
			sub total for transfer to MSP		41,957		
1	1	27/06/89	ordinateur 80286, Samsung SPC 6500	1117100	3723.00	mb 2009	Ministère de la Bien Etre Sociale et la Solidarité Nationale, Direction de la Planification et de la Coordination
	1		moniteur monochrome (VGA),			mb 2007	
	1		clavier AT			mb 2008	
	1	07/07/89	onduleur AEES, ASD2, 400va	40100	1337.00	mb 2026	
	1	22/09/90	imprimante à jet d'encre, HP deskjet		655.00	mb 2011	
	1	22/09/90	transformateur, 250w		109.00	mb 2045	
					5833.00		
2	1	27/06/89	ordinateur 80286, Samsung SPC 6500	1117100	3723.00	mb 2040	
	1		moniteur monochrome (VGA),			mb 2038	
	1		clavier AT			mb 2039	
	1	13/04/89	onduleur datasec, 550va	382500	1275.00	mb 2042	
	1	22/09/90	imprimante à jet d'encre, HP deskjet		655.00	mb 2041	
	1	22/09/90	transformateur, 100w		39.00	mb 2043	
					5692.00		

Equipement de bureau							
N	qte.	date d'achat	description	prix CFA	prix dollars	ID code	proposition de transfert (Ministère, Direction, Division, Service)
3	1	05/02/81	photocopieur, Sharp SF820	2337500	6678.57	mb 2058	
	1	03/02/82	trieuse, Sharp SF820	1275000	3642.86	mb 2027	
	1	03/02/82	cassette à papier Sharp SF820	175000	583.33	mb 2028	
	1	03/02/82	auto document feeder		10904.76		
4	1	29/04/81	machine à écrire électrique Olympia	103976	297.07	mb 2029	
	1	04/05/81	machine à écrire Olivetti	227150	649.00	mb 2049	
					946.07		
5	2	11/05/87	machine à écrire IBM	475000	1357.14	mb 2037, 2059	
			sub total for transfer to MBES-SN		24,733		
1	6	28/09/88	Une système téléphonique composé de:			me 3002, 3007, 3014, 3017, 3019, 3024, 3005, 3010, 3033 mb 3004, 3015 3021, 3026, 3029, 3025	
	2		téléphone GE à mémoire	342300	1141.00		
	4		téléphone ordinaire	50000	100.00		
	1	01/02/89	téléphone siemens	120000	480.00		
	2	01/02/89	commutateur, 2 lignes, 14 postes postes standardiste	1200000 254050	4000.00 846.83		
					6567.83	a être gardé par l'USAID pour le nouveau projet <i>Survive de l'Enfant et Population</i>	
2	1	22/09/90	transformateur, 330w		109.00	mb 2020	
3	4	20/10/88	climatiseur 2cv, Philco	895136	2983.79	mb 3006, 3013, 3016, 3020	
	5	20/10/88	climatiseur 2cv, National	1118920	3729.73	mb 3001, 3008, 3009, 3018, 3022	
	1	22/06/89	climatiseur split, Keeprite	422775	1409.25	mb 3034	
	1	10/04/81	Climatiseurs, GE	527076	1505.93	mb 3012	
	2	10/04/81	climatiseurs, Electrolux	395187	1129.11	mb 3003, 3023	
	4	11/11/88	climatiseur 2cv, National	804942	2683.14	mb 3025, 3027, 3028, 3030	
	1	11/07/90	climatiseur split, Keeprite	634831	2116.10	me 3011	
					15557.05		
			sub total for transfer to USAID		22,234		

Meubles de bureau							proposition de transfert (Ministère, Direction, Division, Service)
#	qte.	date d'achat	description	prix cfa	prix \$	ID code	
1	2	05/04/89	fauteuil roulant grand modèle	144180	480.60	mb 1090, 1143	à être gardé par l'USAID pour servir le nouveau projet
2	2	21/04/89	armoire, portes glissantes en verre	271984	906.61	mb 1145, 1096	
3	2	22/05/89	armoire, portes glissantes	271984	906.61	mb 1146, 1097	
4	8	22/05/89	fauteuil roulant petit modèle	432000	1440.00	mb 1006, 1068, 1076, 1083, 1115, 1147, 1148, 1149	
5	35	22/05/89	chaise métallique bourré	470400	1568.00	mb 1027-1039, 1002-1004, 1016-1018, 1069-1071, 1077-1079, 1084-1086, 1091-1093, 1117-1119, 1113	
6	2	22/05/89	bureau directeur avec retour	400000	1333.33	mb 1088-1089, 1140-1141	
7	3	01/08/89	tables de conférence	106800	356.00	mb 1024-1026	
8	1	31/08/90	bureau avec retour	164000	546.67	mb 1001;1005	
9	5	29/05/89	classeur à 4 tiroirs	760000	2533.33	mb 1008, 1014, 1021, 1120, 1072	
10	3	22/10/90	chaise roulante	119400	398.00	mb 1019, 1107, 1108	
11	3	22/10/90	bureau d'ordinateur	186000	620.00	mb 1022, 1105, 1106	
12	5	22/10/90	chaise roulante	234000	780.00	mb 1058, 1059, 1060, 1045, 1013	
13	2	22/10/90	table de conférence	131000	436.67	mb 1040, 1041	
14	5	10/11/88	bureau 1,5m x 0,77m*	650000	2166.67	mb 1055, 1056, 1057, 1043, 1123	
15	15	10/11/88	chaise visiteurs*	240000	800.00	mb 1047-1049, 1053, 1054, 1010-1012, 1130-1136, 1062	
16	4	22/10/90	classeur à 4 tiroirs	608000	2026.67	mb 1080, 1087, 1094, 1144	
17	1	17/05/90	tableau d'affichage	10000	33.00	mb 1121	
18	2	14/12/89	lampe	65744	219.14	mb 1095, 1142	
19	3	17/05/90	étagère	30000	100.00	mb 1150, 1151, 1046	

Meubles de bureau							
#	qte.	date d'achat	description	prix cfa	prix \$	ID code	proposition de transfert (Ministère, Direction, Division, Service)
20	2	17/05/90	tableau d'affiche	20000	66.67	mb 1098, 1154, 1121	
			sub total of articles to be transferred to USAID	5,315,492	17,718		
1	6	06/04/81	armoire en bois avec deux battants	380000	1266.67	mb 1063, 1066, 1073, 1074, 1081, 1103	MBESSN, Direction de la Planification et de la Coordination
2	2	16/12/81	étagère, 2m x 2m	195000	650.00	mb 1050, 1051	
3	13	06/04/81	chaise en bois bourrée	91000	303.33	mb 1101, 1102, 1109-1112, 1126-1129, 1132, 1152, 1155, 1156	
4	4	16/05/83	bureau, 2m x 1m	200000	666.67	mb 1009, 1015, 1082, 1099	
5	1	06/04/81	bureau, 2m x 2m	85000	283.33		
6	2	06/04/81	bureau, 2m x 1,5m	240000	800.00	mb 1122, 1114	
7	2	27/12/82	chaise de secrétaire	100000	333.33	mb 1100, 1128	
8	2	13/05/83	bureau ovale avec table pour téléphone	140000	466.67	mb 1067;1116, 1075;1137	
9	1	29/09/88	ensemble (3) des tables hexagonales	140258	467.53	mb 1125	
10	2	16/12/81	table 1,5m x 0,8m	20000	66.67	mb 1124, 1052	
11	1	11/06/82	table noire	10000	33.33	mb 1152	
12	1	11/06/82	petite table 1m x .8m	10000	33.00	mb 1139	
13	1	20/09/84	étagère moyenne	30000	100.00	mb 1065	
14	1	09/11/88	classeur métallique	85660	286.00	mb 1061	
15	1	27/12/82	classeur métallique	75630	252.10	mb 1104	
			sub total of articles to be transferred to MBES-SN	1,802,548	6,009		

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Health Planner's residential inventory

#	date purchased	qte.	description	ID number	prix cfa	prix \$	commentaire
1	7/11/88	2	gas bottles	201, 202	100000	32.82	à être gardé par l'USAID pour les assistants techniques du nouveau projet
2	1/11/88	4	air conditioning 3cv	203, 204, 205, 206	962244	3272.34	
3	22/07/89	1	dining room table	207	142500	434.70	
4	13/1/89	1	living room set, 4 chairs, couch, love seat, coffee table, 5 end tables	209	1085400	3731.72	
5	26/6/89	1	stove	211	195000	598.27	
6	22/7/89	1	buffet, dining room	213, 214	455500	1084.46	
7	22/8/89	1	triangle shelves	215	45500	138.80	
8	22/8/89	1	king size bed + 2 night tables	216	300000	1032.99	
9	22/8/89	2	full size bed + 2 night tables	217, 248	65000	213.38	
10	22/8/89	1	round table + 3 chairs	218	35000	120.52	
11	22/07/89	12	dining room chairs	219	309000	942.61	
12	22/7/89	1	serving table	220	3800	115.92	
13	3/5/89	1	ladder	227	38895	124.25	
14	26/6/89	2	kitchen shelves	229	21500	67.28	
15	22/8/89	2	garden beds	230	35000	114.89	
16	22/8/89	4	garden table +20 chairs	231, 232, 233, 234	164000	565.07	
17	22/8/89	1	office shelves	235	65000	233.81	
18	22/8/89	2	shelves	236, 249	35000	100.89	
19	22/8/89	1	tv table	240	31000	106.74	

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Health Planner's residential inventory

#	date purchased	qte.	description	ID number	prix cfa	prix \$	commentaire
20	22/8/89	1	desk and drawers	241	57450	184.81	
21	21/12/90	1	living room set	242	186500	750.20	
22	26/10/90	1	kitchen table	243	34700	138.54	
23	25/02/91	4	lamps	244	119963	481.99	
24	14/08/91	1	wheel barrow	246	15705	53.54	
25	14/08/91	1	garbage can	247	12000	40.91	
26	15/02/89	3	chairs	245	25500	87.93	
			sub total articles to be transferred		4,541,157	14,769	
1	27/4/89	1	water heater	225	40000	127.78	équipement usé. à vendre
2	30/11/88	1	emmanuel set, 4 chairs + tables	208	74000	254.81	
3	2/1/89	2	waste baskets	221	6000	20.66	
4	13/2/89	1	sprinkler		14570	50.17	
5	13/2/89	2	watering can	222, 223	12000	41.32	
6	27/4/89	2	shower curtain	224	21645	69.15	
7	19/4/89	1	bathroom rugs	226	27900	119.12	
8	30/6/89	1	lawn mower, hand	228	27430	83.68	
9	22/8/89	19	curtain rods	327	57000	196.27	
10	22/8/89	10	curtains	238	118400	383.23	
11	22/8/89	5	rugs	239	116000	375.46	
12	26/6/89	1	air conditioner split	212	413079	1260.10	

Health Planner's residential inventory							
#	date purchased	qte.	description	ID number	prix cfa	prix \$	commentaire
13	16/2/89	1	refrigerator	210	222213	765.14	
			sub total articles to be sold		1,150,237	3,747	

Financial/Admin's residential inventory							
#	date purchased	qte.	description	ID code	prix cfa	prix \$	commentaire
1	14/9/90	1	kitchen shelves	319	23690	91.12	à être gardé par l'USAID pour les assistants techniques du nouveau projet
2	14/9/90	1	acama refrigerator	301	200000	769.23	
3	14/9/90	2	goldstar 1cv air conditioner	302, 303	242000	930.77	
4	10/10/90	1	dressing table	305	136800	547.20	
5	22/8/89	2	garden table + 6 chairs	306, 307	90000	309.90	
6	10/10/90	1	dining room table, 8 chairs	308	100000	400.00	
7	22/8/89	2	shelves	309, 310	45000	163.00	
8	19/10/90	1	desk chair	311	59800	238.75	
9	10/10/90	1	desk	312	45000	180.00	
10	10/10/90	1	kitchen table	313	24800	99.20	
11	10/10/90	1	hot water heater	314	37000	148.00	
12	15/02/89	1	ironing table	315	30000	120.00	
13	14/10/91	1	living room set	317	504000	1737.93	
14	14/10/91	1	three door armoire	318	140000	482.76	
15	14/9/90	1	GE dryer		*	500.00	

Financia/Admin's residential inventory

#	date purchased	qte	description	ID code	prix cfa	prix \$	commentaire
16	14/9/90	2	GE window air conditioners		*	1000.00	
17	14/9/90	1	Airwell split air conditioner		*	1000.00	
			sub total of articles to be transferred		1,678,090	3,718	
1	17/2/89	1	freezer	304	233255	803.16	à vendre
2	23/11/90	1	thompson refrigerator	316	77548	323.53	
3	14/9/90	2	end table		*	25.00	
4	14/9/90	2	sm. oval tables		*	50.00	
5	14/9/90	1	buffet hutch		*	200.00	
6	14/9/90	1	ingis washer		*	150.00	
7	14/9/90	1	3 drawer chest of drawers		*	200.00	
8	14/9/90	1	coffee table		*	75.00	
9	14/9/90	1	double bed w/mattress & boxspring		*	250.00	
10	14/9/90	2	5 drawer chest of drawers		*	200.00	
11	14/9/90	1	bamboo library shelves		*	25.00	
12	14/9/90	1	bamboo shelf		*	25.00	
13	14/9/90	1	3 drawer side table		*	50.00	
14	14/9/90	4	bamboo end tables		*	30.00	
15	14/9/90	1	desk		*	100.00	
16	14/9/90	1	dining room chair		*	25.00	
17	14/9/90	1	couch		*	50.00	

Financial/Admin's residential inventory							
#	date purchased	qte.	description	ID code	prix cfa	prix \$	commentaire
18	14/9/90	1	corner chair		*	30.00	
19	14/9/90	3	easy chairs		*	50.00	
20	14/9/90	1	ALGOR stove		*	150.00	
			sub total of articles to be sold		310,903	2,812	

IEC specialist's residential inventory							
#	date purchased	qte.	description	ID code	prix cfa	prix \$	commentaire
1	10/10/90	1	dining room table + 8 chairs	401	387600	1550.40	à être gardé par l'USAID pour les assistants techniques du nouveau projet
2	22/7/89	2	ashtray stand	402, 403	8000	34.40	
3	22/7/89	1	office chair	404	36580	114.70	
4	22/7/89	1	kitcken table + 4 chairs	405	25000	86.08	
5	22/7/89	1	small kitchen table	406	7000	24.10	
6	22/7/89	3	round table + 3 chairs	407, 408, 434	70000	241.03	
7	22/7/89	2	shelves	409, 410	45000	146.39	
8	10/10/90	2	tables on coasters	411, 412	133000	532.00	
9	15/02/89	1	bed	413	70000	241.38	
10	15/02/89	1	bed	414	110000	379.31	
12	15/02/89	2	chairs-kitchen	416	17000	58.62	
13	15/02/89	3	chairs-work	417	25500	87.93	
14	15/02/89	8	garden chairs	418	56000	193.10	

IEC specialist's residential inventory

#	date purchased	qte.	description	ID code	prix cfa	prix \$	commentaire
15	15/02/89	2	garden tables	419, 420	36000	124.14	
16	15/02/89	2	kitchen shelves	421, 415	40000	137.93	
22	08/03/89	2	2.5 cv air conditioners	428, 429	471618	1626.27	
23	08/03/89	2	1 cv air conditioners	430, 431	336822	1161.46	
17	15/02/89	1	book case for bedroom	422	90000	310.34	
18	15/02/89	2	two door armoire	423, 424	130000	448.28	
19	15/02/89	1	three door armoire	425	80000	275.86	
			sub total for articles to be transferred		2,175,120	7,774	
1	08/03/89	1	fuge	426	287823	992.49	à vendre
2	08/03/89	1	3 cv air conditioning	427	284731	981.83	
3	08/03/89	1	stove	432	203797	702.75	
4	23/04/89	1	living room set, 2 couches, 3 chairs, 4 end tables, coffee table	433	885000	3051.72	
			sub total for articles to be sold		1,661,351	5,729	

Table I
Togolese Cadre and GOT Contract employees

NAME	FUNCTION	PERSON MONTHS	PERIOD(S)
LONG TERM GOT EMPLOYEES			
Latifou Salami	Project Director	22	Nov 87 - Aug 89
Vignon Devo	Project Director	40	Sept 89 - Dec 92
Kouami Houngues	Public Health Coordinator	62	Nov 87 - Dec 92
Tchatomby Ouro-Bawinay	Community Outreach Coordinator	62	Nov 87 - Dec 92
Lolonyo Kodjo-Nyaku	Women's Condition Coordinator	31	Aug 89 - Apr 91
GOT CONTRACT PERSONNEL (BIE)			
Tchamdja Mindamou	Assistant bookkeeper	55	Jun 88 - Dec 92
Akilessou Badanaro	Assistant bookkeeper	55	Jun 88 - Dec 92
Samari Assanti	Assistant bookkeeper	53	Aug 88 - Dec 92
Pedempada Nabiyou	Secretary-typist	55	Jun 88 - Dec 92
Howagnon EDORH	Secretary-typist	55	Jun 88 - Dec 92
Amivi Adigbli	Secretary-typist	53	Aug 88 - Dec 92
Dongui N'Guissan	Secretary-typist	53	Aug 88 - Dec 92
Tchagom Adoki	Driver	55	Jun 88 - Dec 92
Tchende Atanon	Driver	55	Jun 88 - Dec 92
Essoharnam Kpobie	Driver	53	Aug 88 - Dec 92
Akomedi Oniankitan	Mechanic	55	Jun 88 - Dec 92
Kalemou Atandji	Mechanic	55	Jun 88 - Dec 92
Kodjo Adzralka	Mechanic	53	Aug 88 - Dec 92
Komlan Edje-Koudey	Courier	55	Jun 88 - Dec 92
Adja Kola	Courier	53	Aug 88 - Dec 92
Toyi Pekemsi	Guard	55	Jun 88 - Dec 92
Djatoite Lare	Guard	55	Jun 88 - Dec 92

Table II
USAID funded Togolese Contract employees

NAME	FUNCTION	PERSON MONTHS	PERIOD(S)
LONG TERM CONTRACT PERSONNEL			
Tchahira Tchacondo	Chief Accountant	60	Jan 88 - Dec 92
Koffi Hihetah	TA admin assistant	48	Jan 89 - Dec 92
Chris Vodgojbe	Translator	36	Jan 90 - Dec 92
Aminsa Koula	Chief Secretary	36	Jan 90 - Dec 92
Kpatoba Dignidama	Receptionist	53	Aug 88 - Dec 92
Ayao Akato	Bookkeeper	60	Jan 88 - Dec 92
Manissam Nekere	Bookkeeper	60	Jan 88 - Dec 92
Mawuli Djibom	Bookkeeper	60	Jan 88 - Dec 92
Douti Kolani	Chauffeur	60	Jan 88 - Dec 92
Ali Agbeta	Chauffeur	53	Aug 88 - Dec 92
Annile Pekle	Chauffeur	60	Jan 88 - Dec 92
Kossi Atadoutin	Guard	60	Jan 88 - Dec 92
Tchaou Egbidi	Guard	55	Jun 88 - Dec 92
SHORT TERM LOCAL CONSULTANTS			
Kodjo Evlo	Inventory of CS activities	1.0	July 89
Dalama Kadjaka	Planning/budgeting	0.5	Aug 90
Salifou Memen	Planning/budgeting	0.5	Aug 90
Agbesi-nyale Agbozoh	Survey Supervisor	2.5	Jan - Feb, May 91
Tete Ahodikpe	Health Economist	6.0	Nov 90 - Mar 91, May - Jun 91

Table III
USAID funded Long term expatriate personnel

NAME	FUNCTION	Organi- -zation	PERSON MONTHS	PERIOD(S)
Louis O'Brien	Monitor/Advisor	USAID	24	Feb 88 - Feb 90
Pina Frazzica	Health Planner/COP	DAC	21	Oct 88 - June 90
M'Baye Seye	IEC Specialist	MCDI	16	Dec 88 - March 90
Vahangi Ravao	IEC Specialist	MCDI	30	June 90 - Nov 92
Lee Yellott	Financial/Administra- -tive Manager	DAC	28	Sept 90 - Dec 92
Marc Debay	Health Planner	DAC	26.5	Oct 90 - Dec 92

Table III
Short term technical assistance provided by the contractor

NAME	FUNCTION	PERSON MONTHS	PERIOD(S)
Development Assistance Corporation			
Lee Yellott	Management/COP	2.0	June - July 90
Tom Balderston	Management Information Systems	1.5	Apr - May 92
Medical Care Development International			
Jim French	Software applications	0.5	Dec 88
Loel Callahan	Organization Chart and Position Descriptions	1.0	Dec 89
Malcom Bryant	Planning and Budgeting	0.5	March 90
Eckhard Kleinau	Planning and Budgeting	0.5	June 90
Jean Claude Aguilleaume	Health Planner/Advisor	3.0	April - June 90
Abraham Bekele	Health Economist	3.0	May, Dec 90, June 91
Taryn Vian	Planning and Budgeting	0.5	Aug 90
Nicolas Cunningham	Curriculum Revision	0.5	March 92
Chris Schwabe	Health Economist	3.0	Apr, June, Oct 92
Waverly Rennie	Training evaluation	1.0	Oct 92
Harvard Institute for International Development			
Malcom Bryant	Planning and Budgeting	0.5	Dec 90
Anne Marie Foltz	Planning and Budgeting	1.5	March, May 91
Albert Henn	Planning and Budgeting	0.5	March 91
Adjou Moumouni	Planning and Budgeting	1.0	May 91

LIST OF PERSONS TRAINED IN IEC

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	date des formations recues		
							PEV	LMD/Palu	CPC/PF
CENTRALE	BUTTA	ANDEWE	HOUROUKOU	INFIRMIER	MSP		27-Jul-90	25-Avr-91	01-Jun-92
CENTRALE	BUTTA	N'DJAKOUNDI	BINBIKYA	INFIRMIER	MSP		27-Jul-90	25-Avr-91	01-Jun-92
CENTRALE	BUTTA	LOKO	KOUASSI	IDE	MSP	AGBANDI	27-Jul-90	25-Avr-91	01-Jun-92
CENTRALE	BUTTA	TIKPIGAFFO	AWAOU	MATRONE	MSP	AGBANDI	01-Jan-90	01-Mar-91	01-Jun-92
CENTRALE	BUTTA	AGBEKPONOU	KOSSIVA	ACCOUCHEUSE	MSP	ASSOUKOKO	-	-	01-Jun-92
CENTRALE	BUTTA	BODJONA	KAO	AGENT	MSP	ASSOUKOKO	01-Jun-91	01-Mar-91	01-Jun-92
				ITINERANT					
CENTRALE	BUTTA	INOUSSA	KERIM	INFIRMIER	MSP	ASSOUKOKO	-	25-Avr-91	-
CENTRALE	BUTTA	ALI	KONTA	IDE	MSP	BUTTA	-	21-Nov-90	-
CENTRALE	BUTTA	KOKO	MATCHATOM	AGENT	MSP	BUTTA	-	-	09-Nov-91
				D'HYGIENE					
CENTRALE	BUTTA	KPOGO	YAWA	SAGE FEMME	MSP	BUTTA	-	-	09-Nov-91
CENTRALE	BUTTA	KPOLOKPOLO	KAO	AGENT	MSP	BUTTA	-	25-Avr-91	-
				ITINERANT					
CENTRALE	BUTTA	PEWELI	KEZE	INFIRMIER	MSP	BUTTA	-	25-Avr-91	01-Jun-92
CENTRALE	BUTTA	PISSANG	MANAWEMLOU	APS	MASCF	BUTTA	-	21-Nov-90	09-Nov-91
CENTRALE	BUTTA	ASSIH	LEBLAKI	APS	MASCF	BUTTAGARE	01-Avr-90	21-Nov-90	09-Nov-91
CENTRALE	BUTTA	OTOTOGBALO	AKIM	ACCOUCHEUSE	MSP	BUTTAGARE	-	-	01-Jun-92
CENTRALE	BUTTA	SAMA	KONDI	AGENT	MSP	BUTTAGARE	01-Avr-90	21-Nov-90	-
				D'HYGIENE					
CENTRALE	BUTTA	BANAGNINE	NAMBO	INFIRMIER	MSP	LANGABOU	-	-	01-Jun-92
CENTRALE	BUTTA	LANTOME	AKOSSIWA	ACCOUCHEUSE	MSP	LANGABOU	-	25-Avr-91	01-Jun-92
CENTRALE	BUTTA	AMEGATSE	DELAU	SAGE FEMME	MSP	PAGALA-GARE	-	-	01-Jun-92
CENTRALE	BUTTA	GBOHOE-DOKOU	KOSSI	AGENT	MSP	PAGALA-GARE	27-Jul-90	25-Avr-91	09-Nov-91
				D'HYGIENE					
CENTRALE	BUTTA	NALEBA	AHJIM	AGENT	MSP	PAGALA-GARE	27-Jul-90	25-Avr-91	01-Jun-92
				ITINERANT					
CENTRALE	BUTTA	PAGNABE	LEMANON	MATRONE	MSP	TCHARE	-	25-Avr-91	01-Jun-92
CENTRALE	BUTTA	AGNAZA	BILAKANI	MATRONE	MSP	TCHIFAMA	-	-	01-Jun-92
CENTRALE	BUTTA	BANAZIM	TCHALIM	AGENT AUX	MSP	YALOUMBE	-	27-Nov-91	01-Jun-92
CENTRALE	BUTTA	NTESSEWOU	AFOUA	MATRONE	MSP	YEGUE	-	-	01-Jun-92
CENTRALE	SOTOUBOUA	AWOUZOUBA	BAOUBADI	IDE	MSP	ADJENGRE	27-F'v-90	25-Avr-91	05-Mai-92
CENTRALE	SOTOUBOUA	BIDE	KOFFI	AGENT	MSP	ADJENGRE	27-Jul-90	25-Avr-91	-
				D'HYGIENE					
CENTRALE	SOTOUBOUA	LOLOVOR	DJIGBODI	ACCOUCHEUSE	MSP	ADJENGRE	-	25-Avr-91	-
CENTRALE	SOTOUBOUA	SAIBOU	SINABOU	MATRONE	MSP	ADJENGRE	27-F'v-90	-	04-Mai-92
CENTRALE	SOTOUBOUA	TCHIKPI	GAFO AWAOU	ACCOUCHEUSE	MSP	AGBANDI	-	25-Avr-91	-
CENTRALE	SOTOUBOUA	TCHEMBEHOU	K	INFIRMIER	MSP	ANOUM	27-Jul-90	-	-
CENTRALE	SOTOUBOUA	MINGA	MAZULMA	INFIRMIER	MSP	AOUDA	27-F'v-90	25-Avr-91	05-Mai-92
CENTRALE	SOTOUBOUA	SIMFEIDO	BALANADINA	ACCOUCHEUSE	MSP	AOUDA	27-F'v-90	-	04-Mai-92
CENTRALE	SOTOUBOUA	NOSSILAKI	BAOUDI	INFIRMIER	MSP	BOULOLOUHO	-	25-Avr-91	05-Mai-92
CENTRALE	SOTOUBOUA	TOKM	WELEHALOU	ACCOUCHEUSE	MSP	BOULOLOUHO	03-Ao-91	-	04-Mai-92
CENTRALE	SOTOUBOUA	TCHEDRE	AKPARO	IDE	MSP	DJARKPANGA	04-Mai-91	06-Jun-91	04-Mai-92
CENTRALE	SOTOUBOUA	TCHEDRE	RAKIATOU	MATRONE	MSP	DJARKPANGA	-	-	04-Mai-92
CENTRALE	SOTOUBOUA	ASSIO	ADJAOVI ATUJI	ACCOUCHEUSE	MSP	FAZAO	-	-	20-Avr-92
CENTRALE	SOTOUBOUA	BLOUA	BAKPA	IDE	MSP	FAZAO	03-Mar-90	25-Avr-91	20-Avr-92
CENTRALE	SOTOUBOUA	KABISSA	ABANAM	IDE	MSP	KANIAMBOUA	-	25-Avr-91	05-Mai-92
CENTRALE	SOTOUBOUA	NABINE	OKPINDI	ACCOUCHEUSE	MSP	KANIAMBOUA	27-Jul-90	25-Avr-91	05-Mai-92
CENTRALE	SOTOUBOUA	ALEKI	ESSODA	INFIRMIER	MSP	KAZABOUA	27-Jul-90	25-Avr-91	-
CENTRALE	SOTOUBOUA	KATANSAO	MANAWAWE	MATRONE	MSP	KAZABOUA	-	-	04-Mai-92
CENTRALE	SOTOUBOUA	KEREZOUE	WISSI	INFIRMIER	MSP	KAZABOUA	05-Jul-90	-	05-Mai-92
CENTRALE	SOTOUBOUA	KOMOU	SERAREWA	IDE	MSP	KAZABOUA	27-Jul-90	25-Avr-91	05-Mai-92
CENTRALE	SOTOUBOUA	SEWA	ABRA	ACCOUCHEUSE	MSP	KAZABOUA	-	25-Avr-91	-
CENTRALE	SOTOUBOUA	SIMTORO	KOUMEALO	MATRONE	MSP	KAZABOUA	-	-	05-Mai-92
CENTRALE	SOTOUBOUA	AWATE	DIGBENDI	INFIRMIER	MSP	MELAMBOUA	-	09-Avr-91	04-Mai-92
CENTRALE	SOTOUBOUA	ESSO	NINA	MATRONE	MSP	MELOMBOUA	05-Mai-90	-	04-Mai-92
CENTRALE	SOTOUBOUA	BIDJOLA	KAZA	INFIRMIER	MSP	SESSARO	27-Jul-90	25-Avr-91	06-Mar-92
CENTRALE	SOTOUBOUA	GAFFO	AKPENI	INFIRMIER	MSP	SESSARO	-	13-Mar-91	05-Mar-92
CENTRALE	SOTOUBOUA	MASSAGUESA	BASSO	APS	ONG	SOKODE	-	21-Nov-90	-
CENTRALE	SOTOUBOUA	AGBAFRA	ADJOA DOPEVI	SAGE FEMME	MSP	SOTOUBOUA	-	-	04-Mai-92
CENTRALE	SOTOUBOUA	AYITOU	KOURHOME	TSGS	MSP	SOTOUBOUA	01-Avr-90	21-Nov-90	04-Nov-91
CENTRALE	SOTOUBOUA	BATCHABANI	KOSSI	CSS	MASCF	SOTOUBOUA	01-Avr-90	21-Nov-90	09-Nov-91
CENTRALE	SOTOUBOUA	BEKEI	KPATCHA	IDE	MSP	SOTOUBOUA	27-F'v-90	25-Avr-91	04-Mai-92
CENTRALE	SOTOUBOUA	GUEZA	AKOKO DJIFFA	MATRONE	MSP	SOTOUBOUA	-	-	04-Mai-92
CENTRALE	SOTOUBOUA	MINEKPOR	KODJOVI	AGENT	MSP	SOTOUBOUA	01-Avr-90	21-Nov-90	09-Nov-91
				D'HYGIENE					

A1 1.3
A2 4.10
A3 1.15

A5 26.29
A6 30.

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ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	date des formations recus		
							PEV	LMD/Palu	CPC/PF
CENTRALE	SOTOUBOUA	NAPO	NAKPANE	IDE	MSP	SOTOUBOUA	02-Ao-90	27-Jul-90	-
CENTRALE	SOTOUBOUA	OURO-AKPO	RABI	ATBEF	ONG	SOTOUBOUA	-	-	04-Nov-91
CENTRALE	SOTOUBOUA	TEBENI	KOMLAN	AM	MSP	SOTOUBOUA	01-Avr-90	21-Nov-90	09-Nov-91
CENTRALE	SOTOUBOUA	BLAMEDI	KOMLAN	AGENT	MSP	TCHEBEBE	27-Jul-90	25-Avr-91	-
				ITINERANT					
CENTRALE	SOTOUBOUA	LONGA	NAKA	MATRONE	MSP	TCHEBEBE	-	-	05-Mar-92
CENTRALE	SOTOUBOUA	TCHEOU	TAGBA	IDE	MSP	TCHEBEBE	27-Jul-90	25-Avr-91	04-Mar-92
CENTRALE	SOTOUBOUA	MAGNIMATEMA	MATOKI	ACCOUCHEUSE	MSP	TCHOIETE	01-Ao-90	28-Mai-91	05-Mai-92
CENTRALE	SOTOUBOUA	PAGNILA	TCHAO	AGENT	MSP	TCHOIETE	27-Jul-90	25-Avr-91	04-Mai-92
				ITINERANT					
CENTRALE	SOTOUBOUA	ATARIGBE	NASSARA	INFRMIER	MSP	TINDJASSE	-	-	05-Mai-92
CENTRALE	SOTOUBOUA	ATITSO	AMEWUNU	AGENT	MSP	TINDJASSE	08-Jul-90	-	04-Mai-92
				ITINERANT					
CENTRALE	SOTOUBOUA	EDJAMLAKINA	TCHAA	AGENT	MSP	TITIGBE	27-Jul-90	25-Avr-91	-
				ITINERANT					
CENTRALE	SOTOUBOUA	NABEDE	KPATCHA	IDE	MSP	TITIGBE	02-F'v-82	-	05-Mai-92
CENTRALE	SOTOUBOUA	AFFO	AKIM	ACCOUCHEUSE	MSP	YEGUE	-	25-Avr-91	-
CENTRALE	TCHAMBA	SAMARI	ALJA	MATRONE	MSP	BAGO	-	-	05-Mai-92
CENTRALE	TCHAMBA	IBRAHIMA	MARIAMA	ACCOUCHEUSE	MSP	BALOUKA	02-Ao-90	-	04-Mai-92
CENTRALE	TCHAMBA	KAMBLO	ADOULA	IDE	MSP	BALOUKA	02-Ao-90	20-Mar-91	04-Mai-92
CENTRALE	TCHAMBA	ADJAOMA	OBIDANI	ACCOUCHEUSE	MSP	GOUBI	-	-	04-Mai-92
CENTRALE	TCHAMBA	SAKIAN	AGBO KOFFI	AGENT	MSP	GOUBI	02-Ao-90	20-Mar-91	04-Mai-92
				ITINERANT					
CENTRALE	TCHAMBA	IKPADJEMI	IGNEFOUMI	MATRONE	MSP	KABOLI	-	-	04-Mai-92
CENTRALE	TCHAMBA	TCHAGNAO	DIKENI	SAGE FEMME	MSP	KABOLI	05-Ao-90	-	04-Mai-92
CENTRALE	TCHAMBA	ALAGBO	KODJO	APS	MASCF	KAMBOLE	02-Ao-90	20-Mar-91	-
CENTRALE	TCHAMBA	EGGAMDA	YOMAH	INFRMIER	MSP	KAMBOLE	-	20-Mar-91	-
CENTRALE	TCHAMBA	KOLA	TOYI	INFRMIER	MSP	KAMBOLE	-	-	04-Mai-92
CENTRALE	TCHAMBA	TCHAKOURA	ISSO-WAVANA	IDE	MSP	KAMBOLE	-	-	04-Mai-92
CENTRALE	TCHAMBA	BAMAKOI	RAHAMATOU	MATRONE	MSP	KOULOUMI	-	-	05-Mai-92
CENTRALE	TCHAMBA	MATCHATOM	KPATCHA	AGENT	MSP	KOULOUMI	02-Ao-90	20-Mar-91	-
				ITINERANT					
CENTRALE	TCHAMBA	OURO-AGORO	TCHADIKEM	INFRMIER	MSP	KOULOUMI	02-Ao-90	20-Mar-91	05-Mai-92
CENTRALE	TCHAMBA	TCHADJOBO	SADJI	APS	MASCF	KOULOUMI	01-Avr-90	21-Nov-90	09-Nov-91
CENTRALE	TCHAMBA	DAIBI	AKOUBA	AGENT	MSP	KOUSSOUNTO	02-Ao-90	-	-
				ITINERANT					
CENTRALE	TCHAMBA	EMORO	AGNITOUFEI	IDE	MSP	KOUSSOUNTO	02-Ao-90	20-Mar-91	04-Mai-92
						U			
CENTRALE	TCHAMBA	MAWOKO	YAO	AGENT	MSP	KOUSSOUNTO	02-Ao-90	20-Mar-91	-
				DHYGIENE		U			
CENTRALE	TCHAMBA	NABOUTIBA	KOMLAN	APS	MASCF	KOUSSOUNTO	02-Ao-90	-	-
						U			
CENTRALE	TCHAMBA	ATCHA	AGODOUWE	AGENT	MSP	KRU KRU	02-Ao-90	20-Mar-91	-
				ITINERANT					
CENTRALE	TCHAMBA	FOFANA	BEVA	MATRONE	MSP	KRU KRU	-	-	04-Mai-92
CENTRALE	TCHAMBA	NABIOU	BASSAMABADE	IDE	MSP	KRU KRU	-	-	05-Mai-92
CENTRALE	TCHAMBA	AGBERE	MOLA PARI	ATBEF	ONG	TCHAMBA	01-Jul-90	21-Nov-90	14-Nov-91
CENTRALE	TCHAMBA	ALAGBE	YONGASSANA	AM	MSP	TCHAMBA	-	21-Nov-90	-
CENTRALE	TCHAMBA	DIGBEREKOU	ATCHA	CSS	MASCF	TCHAMBA	01-Avr-90	21-Nov-90	09-Nov-91
CENTRALE	TCHAMBA	DOUTI	YOMBOU	TSGS	MSP	TCHAMBA	-	21-Nov-90	-
CENTRALE	TCHAMBA	ETEKPOR	YAWA	SAGE FEMME	MSP	TCHAMBA	01-Jul-90	-	04-Mai-92
CENTRALE	TCHAMBA	GBATI	KPANTE	IDE	MSP	TCHAMBA	01-Oct-90	-	05-Mai-92
			M'SAMBA						
CENTRALE	TCHAMBA	GBEKLE	ANANI	AGENT	MSP	TCHAMBA	-	20-Mar-91	-
				DHYGIENE					
CENTRALE	TCHAMBA	LOUTOU	TATA YAO	TSGS	MSP	TCHAMBA	-	01-F'v-91	09-Nov-91
CENTRALE	TCHAMBA	OMOLOU	SOULE	AGENT	MSP	TCHAMBA	-	20-Mar-91	-
				ITINERANT					
CENTRALE	TCHAMBA	TCHIMA	PAGOULOU	AGENT	MSP	TCHAMBA	01-Avr-90	21-Nov-90	09-Nov-91
				DHYGIENE					
CENTRALE	TCHAOUDJO	AYEVA	RABI	SAGE FEMME	MSP	-	-	24-Avr-91	-
CENTRALE	TCHAOUDJO	AGORO	ESSOWAVANA	IDE	MSP	AGOULOU	02-Ao-90	01-Jul-91	09-Mai-92
CENTRALE	TCHAOUDJO	DJERE	ARIZMA	ACCOUCHEUSE	MSP	AGOULOU	-	24-Avr-91	09-Mai-92
CENTRALE	TCHAOUDJO	KONDOH	BADANA	AGENT	MSP	AGOULOU	02-Ao-90	-	-
				ITINERANT					
CENTRALE	TCHAOUDJO	AMAH	TCHIOU	IDE	MSP	ALEHERIDE	01-Oct-90	01-F'v-91	09-Mai-92
CENTRALE	TCHAOUDJO	DAKO	OURO	AGENT	MSP	ALEHERIDE	02-Ao-90	-	-
				ITINERANT					
CENTRALE	TCHAOUDJO	ISSOGBARI	TCHATAGBA	ACCOUCHEUSE	MSP	ALEHERIDE	-	24-Avr-91	09-Mai-92

ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	date des formations recus		
							PEV	LMD/Palu	CPC/PF
CENTRALE	TCHAOUDJO	OURO-SAMA	ESOVATE	APS	MASCF	ALEHERIDE	02-Ao-90	24-Avr-91	-
CENTRALE	TCHAOUDJO	ADYOI	LAHADI	ACCOUCHEUSE	MSP	BOWOUDA	-	-	09-Mai-92
CENTRALE	TCHAOUDJO	PAHAMING	HODALALO	IDE	MSP	BOWOUDA	01-Oct-89	01-F'v-91	09-Mai-92
CENTRALE	TCHAOUDJO	OURO-AKPO	TCHEDRE	ACCOUCHEUSE	MSP	KADAMBARA	-	-	09-Mai-92
CENTRALE	TCHAOUDJO	ALLY	BELINESSO	INFIRMIER	MSP	KASSARABO	-	-	09-Mai-92
CENTRALE	TCHAOUDJO	TCHAGAFOU	ESSOIGNINA	INFIRMIER	MSP	KASSENA	-	-	09-Mai-92
CENTRALE	TCHAOUDJO	GADO	ASSIBI	ACCOUCHEUSE	MSP	KEMENI	-	24-Avr-91	09-Mai-92
CENTRALE	TCHAOUDJO	GBANDI	YAWO	INFIRMIER	MSP	KEMENI	02-Ao-90	24-Avr-91	09-Mai-92
CENTRALE	TCHAOUDJO	IDRISSOU	ASSANA	ACCOUCHEUSE	MSP	KOLINA	-	-	09-Mai-92
CENTRALE	TCHAOUDJO	ALAGBE	DICROTOAGB	AGENT	MSP	KOLOWARE	01-Avr-90	21-Nov-90	-
				ITINERANT					
CENTRALE	TCHAOUDJO	AZIMARE	AKPEM	ACCOUCHEUSE	MSP	KOLOWARE	-	24-Avr-91	-
CENTRALE	TCHAOUDJO	BAROMA	BATAWOLA	AIDE	MSP	KOLOWARE	-	-	09-Mai-92
				SOIGNANTE					
CENTRALE	TCHAOUDJO	LABARAN	ASSIBI	ACCOUCHEUSE	MSP	KOLOWARE	-	-	09-Mai-92
CENTRALE	TCHAOUDJO	BOYOR	B'GNON	INFIRMIER	MSP	KOULOUNDE	-	24-Avr-91	-
CENTRALE	TCHAOUDJO	MADOUGOU	B'GNON	INFIRMIER	MSP	KOULOUNDE	-	-	09-Mai-92
CENTRALE	TCHAOUDJO	OURO-GOUNI	AREZIMA	MATRONE	MSP	KOULOUNDE	-	15-F'v-91	09-Mai-92
CENTRALE	TCHAOUDJO	ADJEMINI	FOUSSEN	INFIRMIER	MSP	KPAKPARAKP	-	24-Avr-91	-
CENTRALE	TCHAOUDJO	AYENA	AZOUAMA	ACCOUCHEUSE	MSP	KPARATAO	-	-	09-Mai-92
CENTRALE	TCHAOUDJO	ENAKU	KOFFI	IDE	MSP	KPARATAO	02-Ao-90	24-Avr-91	09-Mai-92
CENTRALE	TCHAOUDJO	KPETOU	KOSSI	AGENT	MSP	KPARATAO	02-Ao-90	-	-
				ITINERANT					
CENTRALE	TCHAOUDJO	KPINTIBE	BOUTE	INFIRMIER	MSP	KPASSOUADE	02-Ao-90	24-Avr-91	09-Mai-92
CENTRALE	TCHAOUDJO	ALASSANI	ROUBATOU	ACCOUCHEUSE	MSP	KPAZA	-	24-Avr-91	-
CENTRALE	TCHAOUDJO	KEWE	PISSOU	IDE	MSP	KPAZA	-	24-Avr-91	09-Mai-92
CENTRALE	TCHAOUDJO	FOUSSEN	MOUSSOURATAN	ACCOUCHEUSE	MSP	LAMA-TESSI	-	-	09-Mai-92
CENTRALE	TCHAOUDJO	TAKIMA	TCHAO	IDE	MSP	LAMA-TESSI	02-Ao-90	24-Avr-91	09-Mai-92
CENTRALE	TCHAOUDJO	PAKAI	PAHON	INFIRMIER	MSP	SABONGARI	02-Ao-90	24-Avr-91	09-Mai-92
CENTRALE	TCHAOUDJO	ADAMOU	AISSETOU	ATBEF	ONG	SOKODE	-	-	04-Nov-91
CENTRALE	TCHAOUDJO	AFELI	DELA	AM	MSP	SOKODE	01-Avr-90	21-Nov-90	09-Nov-91
CENTRALE	TCHAOUDJO	ALOSSE	AMAVI	IDE	MSP	SOKODE	-	-	09-Mai-92
CENTRALE	TCHAOUDJO	BENEZI	KPELEGA	AGENT	MSP	SOKODE	02-Ao-90	-	-
				ITINERANT					
CENTRALE	TCHAOUDJO	BLAOUNDINA	TOYI	AGENT	MSP	SOKODE	01-Avr-90	21-Nov-90	09-Nov-91
				D'HYGIENE					
CENTRALE	TCHAOUDJO	DOKEY	YAWA	IDE	MSP	SOKODE	-	-	09-Mai-92
CENTRALE	TCHAOUDJO	GNON	RABI	SAGE FEMME	MSP	SOKODE	-	-	09-Nov-91
CENTRALE	TCHAOUDJO	HILLAH	KOKOE	SAGE FEMME	MSP	SOKODE	-	-	09-Mai-92
CENTRALE	TCHAOUDJO	KALE	ADJAARA	INFIRMIER	MSP	SOKODE	02-Ao-90	-	-
CENTRALE	TCHAOUDJO	KOFFI	TSOTSO	SAGE FEMME	MSP	SOKODE	-	01-Nov-90	09-Mai-92
CENTRALE	TCHAOUDJO	MARGBOWA	BASSIMA	SAGE FEMME	MSP	SOKODE	-	24-Avr-91	09-Mai-92
CENTRALE	TCHAOUDJO	MAWOUSSI	TCHONGUI	INFIRMIER	MSP	SOKODE	-	24-Avr-91	-
CENTRALE	TCHAOUDJO	OURO-ALAKAPAY	ESSOFA	AGENT AUX	ONG	SOKODE	-	-	09-Mai-92
CENTRALE	TCHAOUDJO	PALEY	BANABOKO	AGENT	MSP	SOKODE	02-Ao-90	-	-
				ITINERANT					
CENTRALE	TCHAOUDJO	SALIFOU	ALIDOU	AGENT	MSP	SOKODE	02-Ao-90	-	-
				D'HYGIENE					
CENTRALE	TCHAOUDJO	SAMAROU	SAFATOU	APS	MASCF	SOKODE	-	24-Avr-91	-
CENTRALE	TCHAOUDJO	SOLE	MASSILE	ACCOUCHEUSE	MSP	SOKODE	-	-	09-Mai-92
CENTRALE	TCHAOUDJO	TCHAKOURA	SOULEY	CSS	MASCF	SOKODE	01-Avr-90	21-Nov-90	09-Nov-91
CENTRALE	TCHAOUDJO	TCHEDRE	ESSOTINA	AGENT	MSP	SOKODE	01-Jul-90	21-Nov-90	09-Mai-92
				D'HYGIENE					
CENTRALE	TCHAOUDJO	TITIPO	KANFITE	APS	MASCF	SOKODE	01-Avr-90	21-Nov-90	09-Nov-91
CENTRALE	TCHAOUDJO	TCHEDRE	AKOSIWA	ACCOUCHEUSE	MSP	SOTUBOUA	31-Jul-90	-	09-Mai-92
CENTRALE	TCHAOUDJO	AGORO	RABIETC.	ACCOUCHEUSE	MSP	WASSARABO	-	-	09-Mai-92
CENTRALE	TCHAOUDJO	MEDJISSIRIBI	BIVA	APS	MASCF	WASSARABO	02-Ao-90	-	-
CENTRALE	TCHAOUDJO	TCHABAGNA	BOSSI	IDE	MSP	WASSARABO	02-Ao-90	24-Avr-91	-

ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	Dates des formations reçues		
							PEV	LMD/Palu	CPC/PF
KARA	ASSOLI	SADAWEKI	KIMEALO	INFIRMIER	MSP	ALEDJO	.	.	04-Mar-92
KARA	ASSOLI	CHASSAGNE	LOUISE	INFIRMIER	MSP	ALEDJO	31-Jul-90	.	.
KARA	ASSOLI	DECLEREIUX	ANGELE	IDE	MSP	ALEDJO	.	.	04-Mar-92
KARA	ASSOLI	KEZIE	SEVERINE	IDE	MSP	ALEDJO	.	08-Mar-91	.
KARA	ASSOLI	KOLOMBIA	JEANNE	INFIRMIER	MSP	ALEDJO	31-Jul-90	.	.
KARA	ASSOLI	REVOL	ODILE	IDE	MSP	ALEDJO	.	08-Mar-91	.
KARA	ASSOLI	AKPAMADJI	BASSE	AGENT D'HYGIENE	MSP	BAFILO	01-Avr-90	25-Nov-90	22-Oct-91
KARA	ASSOLI	ALEDJI	IGBATAWO ESSO	APS	MASCF	BAFILO	01-Avr-90	21-Nov-90	22-Oct-91
KARA	ASSOLI	AROUNA	NASSIROU	AGENT ITINERANT	MSP	BAFILO	31-Jul-90	08-Mar-91	.
KARA	ASSOLI	AWADE	NNA	APS	MASCF	BAFILO	01-Avr-90	.	.
KARA	ASSOLI	BAH-TROIRE	RAKIETOU	MATRONE	MSP	BAFILO	.	.	04-Mar-92
KARA	ASSOLI	DIAMJIN	KODJO	AGENT D'HYGIENE	MSP	BAFILO	.	25-Nov-90	.
KARA	ASSOLI	DJAMJIN	KODJO	AGENT D'HYGIENE	MSP	BAFILO	01-Avr-90	25-Nov-90	22-Oct-91
KARA	ASSOLI	ESSO-DJOBO	KOMI	CSS	MASCF	BAFILO	01-Avr-90	25-Nov-90	22-Oct-91
KARA	ASSOLI	MARIKI	NAKA	IDE	MSP	BAFILO	.	.	04-Mar-92
KARA	ASSOLI	MAYOU	DEUDALOU	INFIRMIER	MSP	BAFILO	31-Jul-90	08-Mar-91	.
KARA	ASSOLI	NANYETTE	FINAME	TSGS	MSP	BAFILO	01-Avr-90	25-Nov-90	22-Oct-91
KARA	ASSOLI	OURO-TAGBA	AKIM	ATBEF	ONG	BAFILO	.	25-Nov-90	.
KARA	ASSOLI	AGOFO	TENE	MATRONE	MSP	DACKO	.	.	04-Mar-92
KARA	ASSOLI	AMIDOU	ZAKARI	AGENT ITINERANT	MSP	DACKO	31-Jul-90	.	.
KARA	ASSOLI	SEWONOU	YAO	IDE	MSP	DACKO	31-Jul-90	08-Mar-91	04-Mar-92
KARA	ASSOLI	ANAYAOU	EYANOSSE	IDE	MSP	GANDE	.	.	04-Mar-92
KARA	ASSOLI	ATCHA	LATIFOU	MATRONE	MSP	GANDE	.	.	04-Mar-92
KARA	ASSOLI	DJOUA	ESSOFA	AGENT ITINERANT	MSP	GANDE	31-Jul-90	.	.
KARA	ASSOLI	ABEZEME	PATAKAPAWI	IDE	MSP	KOUMONDE	01-Sep-90	01-Avr-91	04-Mar-92
KARA	ASSOLI	ALI IZOTOU	AGBAI	MATRONE	MSP	KOUMONDE	.	.	04-Mar-92
KARA	ASSOLI	TCHA-DJRO	DJOBO	AGENT ITINERANT	MSP	KOUMONDE	31-Jul-90	.	.
KARA	BASSAR	ALAWUI	KUDJUKA ABALO	IDE	MSP	BAGGELI	31-Jul-90	10-Nov-90	04-Mar-92
KARA	BASSAR	TOUAKAWA	ESSOYO	IDE	MSP	BAGHAN	31-Jul-90	.	07-Mar-92
KARA	BASSAR	YANDJIRE	NANFOUM	AGENT AUX ACCOUCHEU SE	MSP	BAGHAN	31-Jul-90	.	.
KARA	BASSAR	SONHAYE	MOUNTANI	ACCOUCHEU SE	MSP	BANGELI	01-Jul-90	01-Sep-91	04-Mar-92
KARA	BASSAR	ABOULAYE	ISSAKA	INFIRMIER	MSP	BASSAR	05-Dec-90	.	.
KARA	BASSAR	ADJAMAGBO	KOMLAN	AM	MSP	BASSAR	01-Ao-90	.	09-Nov-91
KARA	BASSAR	AFEKU	MAWUKO	TSGS	MSP	BASSAR	01-Nov-90	31-Nov-91	09-Nov-91
KARA	BASSAR	BIMOYA	KOUMITCHA	APS	MASCF	BASSAR	01-Avr-90	.	.
KARA	BASSAR	DALOUBA	TAKASSI	SECRETAIRE	MSP	BASSAR	31-Jul-90	.	.
KARA	BASSAR	DJAFALA	AKPENE	SAGE FEMME	MSP	BASSAR	.	.	07-Mar-92
KARA	BASSAR	EDJIM	ADJOA AKPENE	IDE	MSP	BASSAR	.	.	06-Mar-92
KARA	BASSAR	ESSIOMLE	ETEKPO	AM	MSP	BASSAR	01-Avr-90	21-Nov-90	.
KARA	BASSAR	GBANDI	AOUSSI	AGENT ITINERANT	ONG	BASSAR	.	21-Nov-90	.
KARA	BASSAR	GBATI	SAYI	ATBEF	ONG	BASSAR	.	21-Nov-90	.
KARA	BASSAR	LAROU	TEI PAKASSIBOU	APS	MASCF	BASSAR	.	21-Nov-90	.
KARA	BASSAR	NAPO	GBANDI	INFIRMIER	MSP	BASSAR	31-Jul-90	.	.
KARA	BASSAR	OUANOU	TANI	LABORANTIN	MSP	BASSAR	02-Ao-90	.	.
KARA	BASSAR	OURO-GNENI	DAROU	AGENT D'HYGIENE	MSP	BASSAR	31-Jul-90	.	.
KARA	BASSAR	PALLO	EDJARE	CONTROLEUR	MSP	BASSAR	31-Jul-90	.	.
KARA	BASSAR	TAGOI	AZOUNI	ATBEF	ONG	BASSAR	.	.	04-Nov-91
KARA	BASSAR	TAMANDJA	BINALIBOU	APS	MASCF	BASSAR	01-Avr-90	21-Nov-90	09-Nov-91
KARA	BASSAR	TANGBANOUA	GNANKA	ACCOUCHEU SE	MSP	BASSAR	31-Jul-90	.	.
KARA	BASSAR	TCHANGONE	BIGHASSI	INFIRMIER	MSP	BASSAR	31-Jul-90	.	.
KARA	BASSAR	TCHEDOU	MAWAZAWE	IDE	MSP	BASSAR	.	.	05-Mar-92
KARA	BASSAR	TCHOTCHOKO	WALIME	AIDE SOIGNANTE	MSP	BASSAR	01-Avr-90	25-Nov-90	09-Nov-91

ANNEX E

Region	Prefecture	Nom	Prénom	Titre	Ministry	Ville	Dates des formations reçues		
							PEV	LMD/Palu	CPC/PF
KARA	BASSAR	YABOT	MABIBANE	ACCOUCHEUR SE	MSP	BASSAR	31-Jul-90	-	-
KARA	BASSAR	ZBRIL	ALFA	AGENT D'HYGIENE	MSP	BASSAR	31-Jul-90	-	-
KARA	BASSAR	GBATI	BOUKOUMPOU	ACCOUCHEUR SE	MSP	BIKOUOUIBE	31-Nov-90	-	04-Mar-92
KARA	BASSAR	AKPA	YAWA	ACCOUCHEUR SE	MSP	BINAPARBA	-	-	07-Mar-92
KARA	BASSAR	BRONI	NYEMENYA	IDE	MSP	BINAPARBA	31-Jul-90	-	05-Mar-92
KARA	BASSAR	TCHADJEI	ALI	IDE	MSP	BITCHABE	31-Jul-90	-	06-Mar-92
KARA	BASSAR	TROUM	GADO	ACCOUCHEUR SE	MSP	BITCHABE	31-Jul-90	-	07-Mar-92
KARA	BASSAR	TCHEDRE	MOUNTANI	MATRONE	MSP	DIMION	-	-	04-Mar-92
KARA	BASSAR	AMAHAM	ESSOHANOM	INFIRMIER	MSP	DIMORI	-	-	04-Mar-92
KARA	BASSAR	DE SOUZA	YAOVI	IDE	MSP	DIMORI	31-Jul-90	-	-
KARA	BASSAR	DZOTSI	KODZO	AM	MSP	KABOU	-	-	07-Mar-92
KARA	BASSAR	KONDI	MOUMOUNI	AGENT AUX	MSP	KABOU	31-Jul-90	-	-
KARA	BASSAR	TCHAPO	KOSSIWA	ACCOUCHEUR SE	MSP	KABOU	01-Avr-90	24-Oct-90	04-Mar-92
KARA	BASSAR	AYATE	MAWUENA	IDE	MSP	KATCHAMBA	31-Jul-90	-	-
KARA	BASSAR	KILIOU	MANDABANI	IDE	MSP	KIDJABOUN	31-Jul-90	-	-
KARA	BASSAR	MINTOUMBA	AWA	INFIRMIER	MSP	MANGA	31-Jul-90	-	07-Mar-92
KARA	BASSAR	TCHANGAI	MENSAH	IDE	MSP	MANGA	31-Jul-90	-	07-Mar-92
KARA	BASSAR	N'BORTCHE	BINGO	AGENT ITINERANT	MSP	NANDOUTA	31-Jul-90	-	-
KARA	BASSAR	KOUTOBE	ADJOUA	MATRONE	MSP	NATCHAMBA	31-Jul-90	-	07-Mar-92
KARA	BASSAR	KPELEVI	KOMLA	IDE	MSP	NATCHAMBA	31-Jul-90	-	04-Mar-92
KARA	BASSAR	ALI	KOMLAN	AGENT AUX	MSP	NATCHITIKPI	-	21-Nov-90	-
KARA	BASSAR	ADEWI	POTOKINAM	IDE	MSP	SANDA	31-Jul-90	-	07-Mar-92
KARA	BASSAR	BEGOU	FADMA	AGENT D'HYGIENE	MSP	SANDA	01-Ao-90	-	-
KARA	BASSAR	KOUASSI	NOUFO	MATRONE	MSP	SANDA	-	-	07-Mar-92
KARA	BASSAR	PALAWA	AMANA	IDE	MSP	SANDA	31-Jul-90	-	04-Mar-92
KARA	BASSAR	AGBISSO	AHILWO	INFIRMIER	MSP	TCHATCHAMIN ADE	-	-	07-Mar-92
KARA	BASSAR	GBANDI	DAPOU	MATRONE	MSP	TCHATCHAMIN ADE	-	-	07-Mar-92
KARA	BINAH	AKORU	MAWULI	IDE	MSP	ASSERE	19-Jul-90	-	-
KARA	BINAH	BEXETI	NEME	ACCOUCHEUR SE	MSP	ASSERE	01-Nov-90	-	05-Mar-92
KARA	BINAH	KOYE	KOSSIWA	AGENT D'HYGIENE	MSP	ASSERE	02-Ao-90	10-Avr-91	26-Oct-91
KARA	BINAH	SEGLA	SEWONU	INFIRMIER	MSP	ASSERE	-	-	05-Mar-92
KARA	BINAH	BADJANA	WARFEI	CSS	MASCF	BINAH	01-Avr-90	25-Nov-90	-
KARA	BINAH	BODJONA	NANANI	APS	MASCF	BINAH	01-Avr-90	25-Nov-90	22-Oct-91
KARA	BINAH	BODJONA	NANA	APS	MASCF	BINAH	-	24-Oct-90	-
KARA	BINAH	KAGA	KOUSSOWA	TSGS	MSP	BINAH	01-Avr-90	25-Nov-90	22-Oct-91
KARA	BINAH	TCHAMDJA	PAKA	IDE	MSP	BONFALE	01-Ao-90	01-Oct-91	06-Mar-92
KARA	BINAH	KAMARA	TONTOYI	MATRONE	MSP	BOUFALE	-	01-Avr-91	05-Mar-92
KARA	BINAH	NANGBARA	TANAOUFEI	MANOEUVRE	MSP	BOUFALE	19-Jul-90	-	-
KARA	BINAH	SOLITOKE	MAYUWA	AGENT ITINERANT	MSP	BOUFALE	19-Jul-90	-	-
KARA	BINAH	ANAWUI	PAWBADI	AGENT D'HYGIENE	MSP	FARENDE	19-Jul-90	-	05-Mar-92
KARA	BINAH	TAGBA	PATIH	MATRONE	MSP	FARENDE	-	01-Sep-90	05-Mar-92
KARA	BINAH	TCHAKIM	NTCHAOUA	INFIRMIER	MSP	FARENDE	19-Jul-90	-	-
KARA	BINAH	BATO	AYA	MATRONE	MSP	KEMERIDA	-	01-Avr-91	05-Mar-92
KARA	BINAH	KOURU	SANNI	MANOEUVRE	MSP	KEMERIDA	19-Jul-90	-	-
KARA	BINAH	LAKIGNAN	KAO PALOUKI	INFIRMIER	MSP	KEMERIDA	-	01-Nov-89	05-Mar-92
KARA	BINAH	SAGOU	LIFELBA	APS	MASCF	KEMERIDA	19-Jul-90	-	-
KARA	BINAH	BATTAH	TCHATCHOVI	SAGE FEMME	MSP	KETAO	-	-	05-Mar-92
KARA	BINAH	MANGBASSEM	TOYI	AM	MSP	KETAO	-	25-Nov-90	22-Oct-91
KARA	BINAH	NYAKOSSAN	AGBENYIGAN	IDE	MSP	KETAO	19-Jul-90	-	-
KARA	BINAH	PERE	TIADEME	AGENT D'HYGIENE	MSP	KETAO	05-Jun-90	-	05-Mar-92
KARA	BINAH	ESSOBIYOU	ABINA	APS	MASCF	PAGOUDA	-	-	22-Oct-91
KARA	BINAH	MOUSSA	ALASSANI	AGENT D'HYGIENE	MSP	PAGOUDA	-	-	05-Mar-92

ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	dates des formations reçues		
							PEV	LMD/Palu	CPC/PF
KARA	BINAH	PEKPE	ADJOWA	SAGE FEMME	MSP	PAGOUDA	-	-	05-Mar-92
KARA	BINAH	PRE	BISSALIWE	ATBEF	CNG	PAGOUDA	01-Avr-90	25-Nov-90	22-Oct-91
KARA	BINAH	MASSWOELE	KOMLA	AGENT ITINERANT	MSP	PESSARE	19-Jul-90	24-Avr-91	-
KARA	BINAH	NABEDE	POZOHOU	IDE	MSP	PESSARE	02-Ao—90	01-Mar-90	05-Mar-92
KARA	BINAH	WALLA	AGBA	APS	MASCF	PESSARE	19-Jul-90	-	-
KARA	BINAH	WILSON	AGNOKO	ACCOUCHEU SE	MSP	PESSARE	-	-	05-Mar-92
KARA	BINAH	BESSI	YAWA	ACCOUCHEU SE	MSP	SIRKA	-	01-Avr-91	05-Mar-92
KARA	BINAH	SATIGOU	ABOUDOULAYE	IDE	MSP	SIRKA	19-Jul-90	24-Avr-91	05-Mai-92
KARA	BINAH	BOUKPESSI	ASSANDA	IDE	MSP	SOLLA	04-Avr-90	01-Oct-91	05-Mar-92
KARA	BINAH	KOUKPA MOU	KONDO	AGENT ITINERANT	MSP	SOLLA	19-Jul-90	-	-
KARA	BINAH	LOUKA	PIDEMNAWE	MATRONE	MSP	SOLLA	-	18-Avr-91	05-Mai-92
KARA	BINAH	BADJALE	KATAMINA	INFIRMIER	MSP	SOMDE	19-Jul-90	24-Avr-91	05-Mai-92
KARA	BINAH	KOUMAI	MADJELAWÉ	ACCOUCHEU SE	MSP	SOMDE	-	01-Avr-91	05-Mar-92
KARA	BINAH	WALLA	AMAYA	APS	MASCF	SOMDE	19-Jul-90	-	-
KARA	DANKPEN	ATITSO	FIANYO	INFIRMIER	MSP	BAPOURE	31-Jul-90	-	04-Mar-92
KARA	DANKPEN	AWANDI	AZIM	ACCOUCHEU SE	MSP	BAPOURE	31-Jul-90	-	04-Mai-92
KARA	DANKPEN	ALI	YOUSSAOU	APS	MASCF	GERIN KOUKA	-	-	09-Nov-91
KARA	DANKPEN	IDRISSOU	RAZAKOU	IDE	MSP	GERIN KOUKA	31-Jul-90	25-Nov-90	09-Nov-91
KARA	DANKPEN	KPANOUGON	NEE HERMA	SAGE FEMME	MSP	GERIN KOUKA	-	-	04-Mai-92
KARA	DANKPEN	MONSILA	N'GHAMBE	APS	MASCF	GERIN KOUKA	01-Avr-90	25-Nov-90	09-Nov-91
KARA	DANKPEN	N'SOUGAN	KOKOU	AGENT D'HYGIENE	MSP	GERIN KOUKA	-	-	04-Mai-92
KARA	DANKPEN	TAGONE	KPAMBE	ATBEF	ONG	GERIN KOUKA	-	-	04-Nov-91
KARA	DANKPEN	WEMON	HADA	AGENT D'HYGIENE	MSP	GERIN KOUKA	-	25-Nov-90	04-Nov-91
KARA	DANKPEN	NABINE	NOUFO	ACCOUCHEU SE	MSP	KATCHAMBA	-	-	04-Mai-92
KARA	DANKPEN	SAMAROU	MIZIGUE	INFIRMIER	MSP	KATCHAMBA	-	-	04-Mar-92
KARA	DANKPEN	YAMBOTE	MAHBA	ACCOUCHEU SE	MSP	KIDJABOU	-	-	04-Mai-92
KARA	DANKPEN	KILOU	MANDABANI	INFIRMIER	MSP	KIDJABOUN	-	-	04-Mai-92
KARA	DANKPEN	AGBOVE	KOSSI	IDE	MSP	NAMON	01-Ao—90	-	-
KARA	DANKPEN	ALOU	KABIA	INFIRMIER	MSP	NAMON	02-Ao—90	-	04-Mar-92
KARA	DANKPEN	NIKABOU	ZINATOU	ACCOUCHEU SE	MSP	NAMON	-	-	04-Mai-92
KARA	DANKPEN	GSEOU	N'GARIBA	INFIRMIER	MSP	NANDAILA	02-Ao—90	14-Mar-91	04-Mai-92
KARA	DANKPEN	MAGNIBO	NAMOMBE	ACCOUCHEU SE	MSP	NANDOUTA	-	-	04-Mai-92
KARA	DANKPEN	DJAWÉ	NADJAMBE	AGENT ITINERANT	MSP	NAWARE	-	-	04-Mar-92
KARA	DANKPEN	DOLAMA	TANDJOMA	IDE	MSP	NAWARE	31-Jul-90	-	04-Mar-92
KARA	DANKPEN	GBATI	NANA	ACCOUCHEU SE	MSP	NAWARE	-	-	04-Mai-92
KARA	DOUFELGO U	KOGOE	PAIDEMA	INFIRMIER	MSP	AGOUDE	31-Jul-90	15-F'v-91	-
KARA	DOUFELGO U	BODJONA	PITCHOLO	INFIRMIER	MSP	AGOUNOE	-	-	20-Avr-92
KARA	DOUFELGO U	AHA	ALFA	INFIRMIER	MSP	ALLOUM	-	-	20-Avr-92
KARA	DOUFELGO U	PREOU	ATANGUEDJI	AGENT ITINERANT	MSP	ALLOUMA	21-Mar-91	-	-
KARA	DOUFELGO U	N'ZONOU	BALAKIYEM	ACCOUCHEU SE	MSP	AMANDE	31-Jul-90	15-F'v-91	24-Avr-92
KARA	DOUFELGO U	YAYA	ALASSANI	INFIRMIER	MSP	BAGA	05-D'c-90	14-Mar-91	24-Avr-92
KARA	DOUFELGO U	BOTCHONA	ANKAMA	IDE	MSP	BROUKOU	31-Jul-90	15-F'v-91	24-Avr-92
KARA	DOUFELGO U	DAO	ABRA BINIBE	ACCOUCHEU SE	MSP	BROUKOU	01-Ao—90	-	24-Avr-92
KARA	DOUFELGO U	ALONG	AMOUSSEY	LABORANTIN	MSP	DEFALE	01-Ao—90	01-Oct-91	-
KARA	DOUFELGO U	MADITOMA	KAGLOU	IDE	MSP	KADJALLA	-	20-Oct-89	24-Avr-92

ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	dates des formations reçues		
							PEV	LMD/Palu	CPC/PF
KARA	DOUFELGO U	NANDAHOURE BA	MAGNIMADEM A	AGENT D'HYGIENE	MSP	KADJALLA	26-Jul-91	25-Mar-91	24-Avr-92
KARA	DOUFELGO U	AMANA	MANANI	ACCOUCHEU SE	MSP	KONFAGA	27-Jul-90	.	24-Avr-92
KARA	DOUFELGO U	LANGUIYE	KOMI ESSOHANAWÉ	IDE	MSP	KONFAGA	31-Jul-90	15-F'v-91	24-Avr-92
KARA	DOUFELGO U	KOGBETSE	DODZI	ACCOUCHEU SE	MSP	KPAHA	31-Jul-90	15-F'v-91	.
KARA	DOUFELGO U	TAGBA	SOLILAYI	ACCOUCHEU SE	MSP	KPAHA	.	.	24-Avr-92
KARA	DOUFELGO U	MONTOYA	ALICIA	INFIRMIER	ONG	NIAMTOUGOU	.	.	20-Avr-92
KARA	DOUFELGO U	AWADE	KOSSI	IDE	MSP	NIAMTOUGOU	01-Avr-90	29-Nov-90	24-Avr-92
KARA	DOUFELGO U	AWATA	DEDJOBEA	ATBEF	ONG	NIAMTOUGOU	.	25-Nov-90	.
KARA	DOUFELGO U	BABALIMA	M'BAKAHEL	CSS	MASCF	NIAMTOUGOU	01-Avr-90	25-Nov-90	22-Oct-91
KARA	DOUFELGO U	BAGUILIMA	MATEWE	ACCOUCHEU SE	MSP	NIAMTOUGOU	31-Jul-90	22-Mar-91	.
KARA	DOUFELGO U	BANASSIM	M'BALOU	AGENT D'HYGIENE	MSP	NIAMTOUGOU	27-Jul-90	17-Mai-91	.
KARA	DOUFELGO U	BATEBAWIA	BALAXA	APS	MASCF	NIAMTOUGOU	01-Avr-90	27-Oct-90	.
KARA	DOUFELGO U	BIMIZI	MEZOUJWA	INFIRMIER	MSP	NIAMTOUGOU	31-Jul-90	.	.
KARA	DOUFELGO U	BOUKESSIM	ESSO	IDE	MSP	NIAMTOUGOU	31-Jul-90	22-Mar-91	.
KARA	DOUFELGO U	DADANEMA	AMA	APS	MASCF	NIAMTOUGOU	01-Avr-90	25-Nov-90	22-Oct-91
KARA	DOUFELGO U	DANDJITA	KOUASSI	INFIRMIER	MSP	NIAMTOUGOU	.	14-Mai-91	.
KARA	DOUFELGO U	DEBABA	BAFELGTANTA	AGENT AUX	MSP	NIAMTOUGOU	.	31-Oct-90	18-Mai-92
KARA	DOUFELGO U	DJALOUWA	LOGDA	SAGE FEMME	MSP	NIAMTOUGOU	31-Jul-90	15-F'v-91	.
KARA	DOUFELGO U	EDJAMTOU	KOMI	IDE	MSP	NIAMTOUGOU	31-Jul-90	15-F'v-91	.
KARA	DOUFELGO U	KPOKANU	KUAKU	AM	MSP	NIAMTOUGOU	01-Oct-90	25-Nov-90	04-Nov-91
KARA	DOUFELGO U	MENSAH	MEYEVI	AGENT ITINERANT	MSP	NIAMTOUGOU	01-Nov-84	01-Nov-90	.
KARA	DOUFELGO U	TANANG	KOMI ESSOSSIMNA	AM	MSP	NIAMTOUGOU	01-Avr-90	25-Nov-90	22-Oct-91
KARA	DOUFELGO U	TCHAGBA	ESSOPHA	IDE	MSP	NIAMTOUGOU	.	25-Nov-90	21-Oct-91
KARA	DOUFELGO U	TETE	KOSSIWA	IDE	MSP	NIAMTOUGOU	25-Avr-91	.	24-Avr-92
KARA	DOUFELGO U	KALGORA	AFIWA	MATRONE	MSP	POUDA	.	01-Jul-91	20-Avr-92
KARA	DOUFELGO U	BAFAI	BATELORA	SAGE FEMME	MSP	SARNARAGOU	.	.	24-Avr-92
KARA	DOUFELGO U	AGNAMANA	AKOUAVI	IDE	MSP	SIQU	01-Ao—90	28-Mar-91	24-Avr-92
KARA	DOUFELGO U	BOUKPESSI	ASSANDA WENMIMA	MATRONE	MSP	SIQU	02-Ao—90	27-Jul-90	24-Avr-92
KARA	DOUFELGO U	KOUBIRMA	KODJO	APS	MASCF	SIQU	31-Jul-90	.	.
KARA	DOUFELGO U	MINDOU	BAGUBADI	AGENT D'HYGIENE	MSP	SIQU	.	25-Avr-91	.
KARA	DOUFELGO U	ALATEBI	AKUA	MATRONE	MSP	TENEGA	01-Jul-90	01-Jul-91	20-Avr-92
KARA	DOUFELGO U	KPIENAME	BITIE	IDE	MSP	TENEGA	01-Jun-90	01-Jun-91	20-Avr-92
KARA	KERAN	AGOUA	PALAKIEYM	IDE	MSP	ATALETE	27-Jul-90	25-Avr-91	21-Avr-92
KARA	KERAN	ALIKA	MALOU	AGENT ITINERANT	MSP	ATALOTE	31-Jul-90	.	.
KARA	KERAN	ARIATCHAO	SONGAI	IDE	MSP	ATALOTE	31-Jul-90	15-F'v-91	.
KARA	KERAN	NASSIGUEDE	ADJOUA	MATRONE	MSP	ATALOTE	.	.	21-Avr-92

ANNEX E

Région	Préfecture	Nom	Prenom	Titre	Ministry	Ville	Dates des formations reçues		
							PEV	LMD, Palu	CPC, PF
KARA	KERAN	AMOUDJI	AFI	SAGE FEMME	MSP	HELOTA	-	15-F'v-91	-
KARA	KERAN	GNINOU	TCHAO	APS	MASCF	HELOTA	-	15-F'v-91	-
KARA	KERAN	TATOUA	MADITE	AGENT ITINERANT	MSP	HELOTA	-	-	21-Avr-92
KARA	KERAN	TCHARE	AKPEN	SAGE FEMME	MSP	HELOTA	01-Avr-90	24-Oct-90	21-Avr-92
KARA	KERAN	AYIVIGAN	AYOKO	SAGE FEMME	MSP	KANDE	31-Jul-90	15-F'v-91	-
KARA	KERAN	BASSOH	KODJO	IDE	MSP	KANDE	-	-	21-Avr-92
KARA	KERAN	DJATO	TCHANILE	TSGS	MSP	KANDE	01-Avr-90	25-Nov-90	22-Oct-91
KARA	KERAN	KAGNASSIM	NABEDE	IDE	MSP	KANDE	31-Jul-90	-	-
KARA	KERAN	KATAKONA	BOUTOYAM	CSS	MASCF	KANDE	01-Avr-90	25-Nov-90	22-Oct-91
KARA	KERAN	KUTUADU	YAWA	SAGE FEMME	MSP	KANDE	-	15-F'v-91	-
KARA	KERAN	N'DAMA	BOUANA	INFIRMIER	MSP	KANDE	31-Jul-90	-	-
KARA	KERAN	N'POH	YETOUHO	AGENT DHYGIENE	MSP	KANDE	-	15-F'v-91	-
KARA	KERAN	N'POYETOUHO	YENI	AGENT DHYGIENE	MSP	KANDE	31-Jul-90	-	-
KARA	KERAN	OKEBIYI	ADJOA	SAGE FEMME	MSP	KANDE	-	-	21-Avr-92
KARA	KERAN	PITCHATOU	POKOYE	APS	MASCF	KANDE	01-Avr-90	25-Nov-90	22-Oct-91
KARA	KERAN	YAGBA	KOMI	LABORANTIN	MSP	KANDE	31-Jul-90	15-F'v-91	-
KARA	KERAN	ZOGBEKNOR	KOUASSIVI	AM	MSP	KANDE	-	25-Nov-90	21-Oct-91
KARA	KERAN	OUTI	ALOUANDJOU	AGENT ITINERANT	MSP	KOKOU TEMBERMA	-	17-Mar-91	21-Avr-92
KARA	KERAN	SAMIE	KPATCHA	INFIRMIER	MSP	KOKOU TEMBERMA	-	-	21-Avr-92
KARA	KERAN	BOULELE	NTCHA	IDE	MSP	KOKOUTEMB	-	15-F'v-91	-
KARA	KERAN	DJATO	KODJO	INFIRMIER	MSP	KOUTOUGOU	-	-	21-Avr-92
KARA	KERAN	DJABAKOU	KOMLAN	IDE	MSP	NABOULGO	31-Jul-90	15-F'v-91	21-Avr-92
KARA	KERAN	DJATO	GATZARO	INFIRMIER	MSP	NADOBA	-	-	21-Avr-92
KARA	KERAN	GNAKPAO	MEGUIZA	APS	MASCF	NADOBA	31-Jul-90	15-F'v-91	-
KARA	KERAN	KPAKOU	YEMEDOU	ACCOUCHEU SE	MSP	NADOBA	-	-	21-Avr-92
KARA	KERAN	NANTCHINDI	AKLALOB	ATBEF	ONG	PAGOUDA	-	25-Nov-90	21-Oct-91
KARA	KERAN	AFATHE	MATOUKNA	AGENT ITINERANT	MSP	TAPOUNTE	-	-	21-Avr-92
KARA	KERAN	AKATHYWA	AFATE	AGENT ITINERANT	MSP	TAPOUNTE	-	15-F'v-91	-
KARA	KERAN	NTCHA	BOUELE	AGENT AUX	MSP	TAPOUTE	-	-	21-Avr-92
KARA	KERAN	AGBEROU	ABRIKA	AGENT ITINERANT	MSP	WARENGO	31-Jul-90	15-F'v-91	21-Avr-92
KARA	KERAN	TCHOMA	LAIBONI	INFIRMIER	MSP	WARENGO	31-Jul-90	15-F'v-91	21-Avr-92
KARA	KOZAH	KADANGA	BANESSO	INFIRMIER	MSP	AGOU AVEDJE	05-Mar-89	28-Mar-91	05-Mar-92
KARA	KOZAH	KAZIMA	NZONOU	MANOEUVRE	MSP	ATCHANGBATE	-	-	22-Mar-92
KARA	KOZAH	BILAOU	AGLAM	MATRONE	MSP	AWANDJELO	-	-	22-Mar-92
KARA	KOZAH	KILIOU	TOMYEM	ACCOUCHEU SE	MSP	AWANDJELO	-	17-Mar-91	-
KARA	KOZAH	TAKOUGNADE	ABALO	AGENT ITINERANT	MSP	AWANDJELO	27-Jul-90	-	-
KARA	KOZAH	KATANI	YAWA	ACCOUCHEU SE	MSP	BEBEDA	-	-	22-Mar-92
KARA	KOZAH	KATCHOU	KPELZA	AGENT ITINERANT	MSP	BEBEDA	27-Jul-90	17-Mar-91	-
KARA	KOZAH	KELEME	TOYI	IDE	MSP	BEBEDA	27-Jul-90	17-Mar-91	05-Mar-92
KARA	KOZAH	AFAKORA	MONDJCSSO	IDE	MSP	BOUNDINA BAS	-	-	22-Mar-92
KARA	KOZAH	TAKOUGNADI	ARIZA	ACCOUCHEU SE	MSP	DJAMBE	01-Mar-90	-	22-Mar-92
KARA	KOZAH	TCHAPO	NAPO	IDE	MSP	DJAMBE	01-Jun-90	01-Avr-91	05-Mar-92
KARA	KOZAH	BADJAGLANA	HODIBA	INFIRMIER	MSP	FEUDA	01-Ao-90	19-Jun-91	22-Mar-92
KARA	KOZAH	LEMOU	MANAYEME	ACCOUCHEU SE	MSP	FEUDA	27-Jul-90	17-Mar-91	22-Mar-92
KARA	KOZAH	LANTAME	BADABOUE	IDE	MSP	GANDE	31-Jul-90	08-Mar-91	05-Mar-92
KARA	KOZAH	ADADE	KANGMI	AM	MSP	KARA	01-Avr-90	-	-
KARA	KOZAH	AFOUTOU		IDE	MSP	KARA	-	17-Mar-91	-
KARA	KOZAH	AGATE	ESSOHANAM	SAGE FEMME	MSP	KARA	27-Jul-90	-	22-Mar-92
KARA	KOZAH	AGBAMADO	BADJA	MANOEUVRE	MSP	KARA	01-Avr-90	25-Nov-90	-
KARA	KOZAH	AKATITO	TCHA EKPAI	APS	MASCF	KARA	01-Avr-90	25-Nov-90	22-Oct-91
KARA	KOZAH	ASSIMA	AUA	ACCOUCHEU SE	MSP	KARA	27-Jul-90	17-Mar-91	-

ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	Dates des formations reçues		
							PEV	LMD, Palu	CPC/ PF
KARA	KOZAH	ASSO	AKPELUSIM	AGENT D'HYGIENE	MSP	KARA	-	25-Nov-90	22-Oct-91
KARA	KOZAH	BADAKA	KOZOU	IDE	MSP	KARA	27-Jul-90	-	-
KARA	KOZAH	BELEI	AMIDOU	IDE	MSP	KARA	-	17-Mar-91	-
KARA	KOZAH	BOSONHOM	POZOFEDOU	IDE	MSP	KARA	-	01-Avr-91	05-Mar-92
KARA	KOZAH	DJASSINON	EKOULOU	APS	MASCF	KARA	-	07-Mar-91	-
KARA	KOZAH	ESSO	AMISSITOU	SAGE FEMME	MSP	KARA	-	-	05-Mar-92
KARA	KOZAH	FARE	GNIDEKOU	AGENT ITINERANT	MSP	KARA	27-Jul-90	17-Mar-91	-
KARA	KOZAH	GBENGBEN	ESSOMAM	ACCOUCHEU SE	MSP	KARA	27-Jul-90	17-Mar-91	-
KARA	KOZAH	GNIOU	ALASSA	AGENT D'HYGIENE	MSP	KARA	-	25-Nov-90	-
KARA	KOZAH	GOUNA	AKOUM	SAGE FEMME	MSP	KARA	27-Jul-90	-	-
KARA	KOZAH	KAO	GNADINLABA	INFIRMIER	MSP	KARA	-	17-Mar-91	-
KARA	KOZAH	KONDI	AYAWOVI	SAGE FEMME	MSP	KARA	-	24-Avr-91	22-Mar-92
KARA	KOZAH	NABEDE	MESSOZIMNA	APS	MASCF	KARA	-	25-Nov-90	22-Oct-91
KARA	KOZAH	NAMADOU	MAKO	SAGE FEMME	MSP	KARA	27-Jul-90	-	-
KARA	KOZAH	NAPOE	NINKO	SAGE FEMME	MSP	KARA	-	-	05-Mar-92
KARA	KOZAH	PALU	ESSOYOMEWE	IDE	MSP	KARA	-	25-Avr-91	22-Mar-92
KARA	KOZAH	PRE	MAWEE	IDE	MSP	KARA	01-Jan-89	-	22-Mar-92
KARA	KOZAH	SABI	KOSSI	AGENT D'HYGIENE	MSP	KARA	27-Jul-90	-	-
KARA	KOZAH	SIMFEIDO	AFOUM	SAGE FEMME	MSP	KARA	05-Mar-91	05-Mar-91	05-Mar-92
KARA	KOZAH	SOTOMA	YHAM	AGENT D'HYGIENE	MSP	KARA	-	25-Nov-90	-
KARA	KOZAH	TOMDJANA	ANASSODE	ACCOUCHEU SE	MSP	KARA	-	-	22-Mar-92
KARA	KOZAH	WANGALA	MANZOUMAR U	ATBEF	ONG	KARA	-	25-Nov-90	21-Oct-91
KARA	KOZAH	YEFIMA	AYEBA	IDE	MSP	KARA	27-Jul-90	01-Jan-91	05-Mar-92
KARA	KOZAH	ADORGIOH	ANEVI	IDE	MSP	KOUMEA	-	22-Avr-91	22-Mar-92
KARA	KOZAH	BEUEDA	BEHEYA	SAGE FEMME	MSP	KOUMEA	-	-	22-Mar-92
KARA	KOZAH	DEDJO	EYA	SAGE FEMME	MSP	KOUMEA	27-Jul-90	17-Mar-91	-
KARA	KOZAH	DOUMOUGUE	KOLANI	AM	MSP	KOUMEA	27-Jul-90	17-Mar-91	-
KARA	KOZAH	NDAH	N'POH	IDE	MSP	LAMABO	27-Jul-90	17-Mar-91	-
KARA	KOZAH	BOUKPESSI	KPANAGUE	INFIRMIER	MSP	LAMA-KPEDA	-	-	05-Mar-92
KARA	KOZAH	TOSSIM	PEKALO	ACCOUCHEU SE	MSP	LAMA-KPEDA	27-Jul-90	17-Mar-91	22-Mar-92
KARA	KOZAH	TOUNDOU	OUSSEI	IDE	MSP	LAMA-KPEDA	27-Jul-90	17-Mar-91	05-Mar-92
KARA	KOZAH	BAWAH	TCHASSEMEU	INFIRMIER	MSP	LANDA	27-Jul-90	17-Mar-91	22-Mar-92
KARA	KOZAH	HOUEJUI	KOSSIM	IDE	MSP	LANDA	27-Jul-90	17-Mar-91	05-Mar-92
KARA	KOZAH	KOLLA	LAOUTOU	ACCOUCHEU SE	MSP	LANDA	27-Jul-90	17-Mar-91	22-Mar-92
KARA	KOZAH	KPATCHA	KOKOU	AGENT ITINERANT	MSP	LANDA	01-Avr-90	24-Oct-90	26-Oct-91
KARA	KOZAH	SOODINA	BAMENBANON A	ACCOUCHEU SE	MSP	LANDA	-	-	22-Mar-92
KARA	KOZAH	ALEDJI	ALASSANE	INFIRMIER	MSP	LASSA HOUDE	01-Avr-90	21-Nov-90	22-Oct-91
KARA	KOZAH	BOROZE	AYAWOVI	IDE	MSP	LASSA HOUDE	-	17-Mar-91	-
KARA	KOZAH	KEDEWLOU	PALU	IDE	MSP	LASSA-BAS	01-Jan-90	17-Mar-91	05-Mar-92
KARA	KOZAH	SOSSOU	ABLAVI	ACCOUCHEU SE	MSP	LASSA-BAS	27-Jul-90	17-Mar-91	22-Mar-92
KARA	KOZAH	BOYODE	JOSEPHINE	AIDE SOIGNANTE	MSP	LASSA-HAUT	-	-	22-Mar-92
KARA	KOZAH	KIDEMA	ESSODOUNA	SAGE FEMME	MSP	PYA	27-Jul-90	17-Mar-91	-
KARA	KOZAH	KOMBATE	KINAM	SAGE FEMME	MSP	PYA	-	-	22-Mar-92
KARA	KOZAH	NTETCHELE	PIALO	SAGE FEMME	MSP	PYA	-	-	05-Mar-92
KARA	KOZAH	BAGNA	KOSSI	IDE	MSP	PYA HODO	27-Jul-90	17-Mar-91	05-Mar-92
KARA	KOZAH	MABAFEI	KPADJA	IDE	MSP	SAOUE	27-Jul-90	17-Mar-91	-
KARA	KOZAH	MAMBAFEI	KPADJA	IDE	MSP	SAOUE	-	-	22-Mar-92
KARA	KOZAH	NAMIBALA	KPADJA	IDE	MSP	SAOUE	01-Mar-90	30-Avr-91	-
KARA	KOZAH	TCHODIE	KEMEA	ACCOUCHEU SE	MSP	SAOUE	27-Jul-90	17-Mar-91	22-Mar-92
KARA	KOZAH	ALI	PELO	MATRONE	MSP	SARAKAWA	-	-	22-Mar-92
KARA	KOZAH	BATAKA	TCHILALO	ACCOUCHEU SE	MSP	SARAKAWA	27-Jul-90	17-Mar-91	22-Mar-92
KARA	KOZAH	BODJOLLE	ESSOCHANAM	IDE	MSP	SARAKAWA	05-D'c-90	14-Mar-91	05-Mar-92
KARA	KOZAH	GBEDEVI	AKOUELE	IDE	MSP	SODINA	27-Jul-90	17-Mar-91	-

ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	dates des formations reçues		
							PEV	LMD/Palu	CPC/FF
KARA	KOZAH	NADALA	BINTI	INFIRMIER	MSP	SOUDINA	-	-	05-Mai-92
KARA	KOZAH	PASSA	PAROUPETOU	ACCOUCHEU SE	MSP	SOUDINA	27-Jul-90	17-Mar-91	22-Mai-92
KARA	KOZAH	AGBA	MIWA	MATRONE	MSP	TCHARE	27-Jul-90	17-Mar-91	22-Mar-92
KARA	KOZAH	BAMAZI	BIGALABOU	INFIRMIER	MSP	TCHARE	-	-	05-Mai-92
KARA	KOZAH	KANFITIME	KONDANDJA	IDE	MSP	TCHARE	27-Jul-90	17-Mai-91	-
KARA	KOZAH	AZIAKO	KOSSI	IDE	MSP	TCHITCHAO	27-Jul-90	17-Mar-91	-
KARA	KOZAH	MILILA	ESSOZIMAM	ACCOUCHEU SE	MSP	TCHITCHAO	27-Jul-90	17-Mar-91	22-Mar-92
KARA	KOZAH	ANIDOU	POWOGOUN	IDE	MSP	YADE-BOHOU	-	24-Avr-91	22-Mai-92
KARA	KOZAH	HERAND	MARCELLE	IDE	MSP	YADE-BOHOU	-	17-Mai-91	-
KARA	KOZAH	KADI	KOMI	INFIRMIER	MSP	YADE-BOHOU	-	-	22-Mai-92
KARA	KOZAH	TAMGBANDJA	AYIMDO	SAGE FEMME	MSP	YADE-BOHOU	31-Jul-90	-	05-Mai-92
KARA	KOZAH	TAWLESSI	SAMALO	ACCOUCHEU SE	MSP	YADE-BOHOU	27-Jul-90	-	-
KARA	KOZAH	TELOU	AMAH	AGENT D'HYGIENE	MSP	YADE-BOHOU	19-Jul-90	25-Nov-90	21-Oct-91
KARA	KOZAH	VIDZPO	KWAMI	AM	MSP	YADE-BOHOU	-	25-Nov-90	21-Oct-91

ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	dates des formations recus		
							PEV	LMD/Palu	CPC/PF
MARITIME	AVE	SIMON DE FANTI	DOMI	ACCOUCHEUSE	MSP	AKEFE	-	10-Jun-91	11-Jul-92
MARITIME	AVE	ADEWA	TCHAO	INFIRMIER	MSP	AKEPE	01-Ao-90	10-Jun-91	11-Jul-92
MARITIME	AVE	WURAH	AKUWA	SAGE FEMME	MSP	ANYRON	-	-	11-Jul-92
MARITIME	AVE	ADANUDO	AKUMI	MATRONE	MSP	ASSAHOUN	-	01-Mar-90	11-Jul-92
MARITIME	AVE	AKAKPO	KOSSITSE	AGENT	MSP	ASSAHOUN	-	31-Oct-90	14-Oct-91
				ITINERANT					
MARITIME	AVE	GASSIHOUN	AFIWA	SAGE FEMME	MSP	ASSAHOUN	-	-	11-Jul-92
MARITIME	AVE	KAKATSI	KOJO	LABORANTIN	MSP	ASSAHOUN	01-Avr-90	31-Oct-90	14-Oct-91
MARITIME	AVE	KOULAH	KODJO MESS	AGENT	MSP	ASSAHOUN	-	31-Oct-90	14-Oct-91
				DHYGIENE					
MARITIME	AVE	WENTOGLA	MABATABA	INFIRMIER	MSP	ASSAHOUN	-	10-Jun-91	-
MARITIME	AVE	AYMI	SEWA	MATRONE	MSP	ATTI-ATOVCN	-	-	11-Jul-92
MARITIME	AVE	AKATO	AKOSIWA	ACCOUCHEUSE	MSP	BADJA	-	01-Avr-91	06-Jul-92
MARITIME	AVE	MISSOH	AGBEEWOANO	IDE	MSP	BADJA	02-Fv-90	10-Jun-91	11-Jul-92
MARITIME	AVE	ADJOVI	ADJOVI	MATRONE	MSP	BAGBE	01-Ao-90	10-Jun-91	11-Jul-92
MARITIME	AVE	KOOJODE	SEDOU	IDE	MSP	BAGBE	27-Jul-90	17-Mai-91	11-Jul-92
MARITIME	AVE	HOUNZANGBE	KOUASSI	IDE	MSP	BATOUME	01-Avr-90	25-Nov-90	11-Jul-92
MARITIME	AVE	CHINI	ENYONAM	ACCOUCHEUSE	MSP	BATOUME	01-Ao-90	10-Jun-91	11-Jul-92
MARITIME	AVE	ADRI	EDEAME	ACCOUCHEUSE	MSP	DGOLO	-	01-Avr-91	11-Jul-92
MARITIME	AVE	ATITEY	KODJO	INFIRMIER	MSP	DZOLO	-	10-Jun-91	11-Jul-92
MARITIME	AVE	ADJAKA	KODJO	IDE	MSP	KEVE	-	10-Jun-91	11-Jul-92
MARITIME	AVE	ADJOTO	SETSOFIA	ACCOUCHEUSE	MSP	KEVE	-	19-Jul-92	11-Jul-92
MARITIME	AVE	ETEH	KAFUI	SAGE FEMME	MSP	KEVE	-	-	11-Jul-92
MARITIME	AVE	ZOUHOUGBE	EDOH	APS	MASCF	KEVE	01-Avr-90	-	-
MARITIME	AVE	TOMI	ADZOA	ATBEF	ONG	LOME	-	-	11-Jul-92
MARITIME	AVE	ANANOU	DODJIM	IDE	MSP	NOEPE	01-Ao-90	10-Jun-91	11-Jul-92
MARITIME	AVE	AYMI	APOKO	SAGE FEMME	MSP	NOEPE	-	-	11-Jul-92
MARITIME	AVE	ADUM	KOSSI	IDE	MSP	TOVEGAN	-	10-Jun-91	11-Jul-92
MARITIME	AVE	TAKONA	KONATIBE	ACCOUCHEUSE	MSP	TOVEGAN	01-Ao-90	19-Jun-91	11-Jul-92
MARITIME	AVE	D'ALMEIDA	AMAH	IDE	MSP	TSMIEPE	01-Jul-90	01-Avr-91	11-Jul-92
MARITIME	AVE	KPOGNO	AYAWOVI	ACCOUCHEUSE	MSP	TSMIEPE	-	01-Jan-90	11-Jul-92
MARITIME	AVE	AMENOUNAN	KOSSI	INFIRMIER	MSP	WONOUGBA	-	-	11-Jul-92
MARITIME	AVE	KOUDAHENOU	AMA	MATRONE	MSP	WONOUGBA	01-Ao-90	10-Jun-91	11-Jul-92
MARITIME	AVE	AZIBLE	AFIWA	ACCOUCHEUSE	MSP	YOMETCHI	01-Ao-90	-	11-Jul-92
MARITIME	AVE	SOGNON	KODJO	IDE	MSP	YOMETCHI	-	10-Jun-91	11-Jul-92
MARITIME	GOLFE	AZIABO	ABLAVI	SAGE FEMME	MSP	ADAKPAME	02-Ao-90	28-Mai-91	-
MARITIME	GOLFE	DEGLO	ANANI MAMBI	AM	MSP	ADAKPAME	01-Avr-90	27-Oct-90	20-Mai-92
MARITIME	GOLFE	LAKOUSSAN	AMAKOUEVI	IDE	MSP	ADAKPAME	20-Jul-90	28-Mai-91	20-Mai-92
MARITIME	GOLFE	AGOLU	KOKOU	APS	MASCF	ADIDOGOME	27-Jul-90	-	-
MARITIME	GOLFE	APENOU	AMMI	APS	MASCF	ADIDOGOME	27-Jul-90	-	-
MARITIME	GOLFE	FELLI-DAGNON	ADJOA	APS	MASCF	ADIDOGOME	01-Avr-90	31-Oct-90	14-Oct-91
MARITIME	GOLFE	KOKOUBA	ACHAIATOU	APS	MASCF	ADIDOGOME	-	28-Mai-91	20-Mai-92
MARITIME	GOLFE	LAWSON	ADJOA	SAGE FEMME	MSP	ADIDOGOME	01-Ao-90	19-Jun-91	-
MARITIME	GOLFE	LAWSON-N'NEKPEK	AKOUETE	AM	MSP	ADIDOGOME	01-Avr-90	01-Oct-90	14-Oct-91
MARITIME	GOLFE	LEGUESSIM	HALASSEWA	SAGE FEMME	MSP	ADIDOGOME	-	01-Mar-91	18-Mar-92
MARITIME	GOLFE	SIKPA	ADJOA	APS	MASCF	ADIDOGOME	01-Ao-90	28-Mai-91	20-Mai-92
MARITIME	GOLFE	TCHETIKE	ADJARATOU	APS	MASCF	ADIDOGOME	27-Jul-90	28-Mai-91	-
MARITIME	GOLFE	TOKPO	FATOUA	APS	MASCF	ADIDOGOME	27-Jul-90	28-Mai-91	20-Mai-92
MARITIME	GOLFE	BAYOR	TOROGA	APS	MASCF	AGOENYIVE	01-Avr-90	31-Oct-90	14-Oct-91
MARITIME	GOLFE	DA SILVEIRA	AYAWOVI	SAGE FEMME	MSP	AGOENYIVE	01-Ao-90	01-Mai-91	20-Mai-92
MARITIME	GOLFE	DJANEYE	BOUNDJA	SAGE FEMME	MSP	AGOENYIVE	27-Jul-90	01-Mai-91	20-Mai-92
MARITIME	GOLFE	GNADE	KOMLAN	APS	MASCF	AGOENYIVE	02-Ao-90	28-Mai-91	-
MARITIME	GOLFE	GNADEH	KOMLAN	APS	MASCF	AGOENYIVE	-	20-Mai-91	20-Mai-92
MARITIME	GOLFE	KANSIWER	MAWUENA	AGENT	MSP	AGOENYIVE	01-Avr-90	31-Oct-90	14-Oct-91
				DHYGIENE					
MARITIME	GOLFE	MABLE	AGATHE	APS	MASCF	AGOENYIVE	27-Jul-90	28-Mai-91	20-Mai-92
MARITIME	GOLFE	POKONA	PYALOU	APS	MASCF	AGOENYIVE	27-Jul-90	28-Mai-91	22-Mai-92
MARITIME	GOLFE	AHADJITSE	YAO	IDE	MSP	BAGUIDA	27-Jul-90	28-Mai-91	20-Mai-92
MARITIME	GOLFE	AKEY	ABLAVI	MATRONE	MSP	BAGUIDA	27-Mai-90	28-Mai-91	20-Mai-92
MARITIME	GOLFE	DAVI	DATE	APS	MASCF	BAGUIDA	01-Avr-90	31-Oct-90	14-Oct-91
MARITIME	GOLFE	HOSSOU	AFI	ACCOUCHEUSE	MSP	BAGUIDA	27-Jul-90	28-Mai-91	-
MARITIME	GOLFE	DANKPO	KOSSIWAVI	AGENT AUX	MSP	KELEGOUGA N	27-Jul-90	28-Mai-91	-
MARITIME	GOLFE	KOUDAYA	AMEDEJISSO	INFIRMIER	MSP	LEGBASSITO	09-Ao-90	28-Mai-91	20-Mai-92
MARITIME	GOLFE	MLATAWOU	MUEGBO	ACCOUCHEUSE	MSP	LEGBASSITO	27-Jul-90	28-Mai-91	20-Mai-92
MARITIME	GOLFE	ADUAYOM	DEDE	IDE	MSP	LOME	-	-	20-Mai-92
MARITIME	GOLFE	AFAN	AMA	IDE	MSP	LOME	-	28-Mai-91	-

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Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	dates des formations recus		
							PEV	LMD.Palu	CFC/PF
MARITIME	GOLFE	AKOGO	KOFFI	AM	MSP	LOME	01-Ao-90	04-Jun-91	-
MARITIME	GOLFE	ASSIH	PESSEPEKA	AM	MSP	LOME	01-Avr-90	21-Nov-90	09-Nov-91
MARITIME	GOLFE	AYI	AURELIE	IDE	MSP	LOME	20-Jul-90	28-Mar-91	20-Mar-92
MARITIME	GOLFE	BONFOH	DENETOU	APS	MASCF	LOME	-	-	20-Mar-92
MARITIME	GOLFE	DACKY	ADJO	AM	MSP	LOME	01-Avr-90	-	-
MARITIME	GOLFE	DEVO	ESSIGAN	LABORANTIN	MSP	LOME	-	28-Mar-91	-
MARITIME	GOLFE	EDORH	EDEMESSI	AM	MSP	LOME	05-D'c-90	14-Mar-91	-
MARITIME	GOLFE	GAGU	KOAMI	CSS	MASCF	LOME	27-Jul-90	-	14-Oct-91
MARITIME	GOLFE	KPODAR	AYELE	AM	MSP	LOME	05-D'c-90	14-Avr-91	-
MARITIME	GOLFE	SAMBIANI	Dabory	MAITRE ORTH	MSP	LOME	31-Jul-90	-	-
MARITIME	GOLFE	ASSOGBAVI	SESSIME	SAGE FEMME	MSP	NYEKOMAKP OE	-	-	20-Mar-92
MARITIME	GOLFE	KOSSIWOAVI	DANKPO	AGENT AUX	MSP	REKE	-	01-Mar-91	18-Mar-92
MARITIME	GOLFE	AMEDOME	KOOZO	AGENT ITINERANT	MSP	SANGUERA	08-Ao-90	28-Mar-91	20-Mar-92
MARITIME	GOLFE	ATSAVEDI	MENSAH	IDE	MSP	SANGUERA	27-Jul-90	28-Mar-91	20-Mar-92
MARITIME	GOLFE	KOUHOU	N'LEDJI	IDE	MSP	SEGBE	27-Jul-90	28-Mar-91	20-Mar-92
MARITIME	GOLFE	HEGBOR	KUAMVI	IDE	MSP	TOGBLEKOPE	27-Jul-90	28-Mar-91	20-Mar-92
MARITIME	LACS	ABOKI	GNIDAH	APS	MASCF	ADAME	01-Ao-90	-	-
MARITIME	LACS	BARKATCHANDOU	KOUDJOUKALO U	ACCOUCHEUSE	MSP	ADAME	-	-	06-Jun-92
MARITIME	LACS	YENKEY	KODJO	INFIRMIER	MSP	ADAME	01-Jan-89	-	06-Jun-92
MARITIME	LACS	DOSSOU	ATSOU	AGENT DHYGIENE	MSP	ADJIDO	-	26-Jun-91	-
MARITIME	LACS	AMEGBLEAHE	AKUYO	SAGE FEMME	MSP	AFAGNAN	-	26-Jun-91	-
MARITIME	LACS	DORVI	KOSSI	APS	MASCF	AFAGNAN	01-Avr-90	31-Oct-90	14-Oct-91
MARITIME	LACS	APEDEH	NOVITO	APS	MASCF	AFANYA	01-Ao-90	04-Jun-91	-
MARITIME	LACS	ALLAGLO	N'KUNU	APS	MASCF	AGBANA	01-Ao-90	-	-
MARITIME	LACS	KAPOU	AYABAVI	ACCOUCHEUSE	MSP	AGBANA	01-Ao-90	-	-
MARITIME	LACS	DOSSOU	KODJO	MANOEUVRE	MSP	AGBANAKIN	01-Jan-89	26-Jun-91	06-Jun-92
MARITIME	LACS	GBEDEY	SEVI	APS	MASCF	AGBANAKIN	01-Ao-90	-	-
MARITIME	LACS	AMEDEGNATO	AYEWANOU	IDE	MSP	AGBODRAFO	01-Ao-90	20-Jun-91	06-Jun-92
MARITIME	LACS	EKLU	POAVI	MATRONE	MSP	AGBODRAFO	01-Jan-89	-	06-Jun-92
MARITIME	LACS	HONAWOO	AFI	ACCOUCHEUSE	MSP	AGBODRAFO	-	26-Jun-91	-
MARITIME	LACS	SESSOU	KOSSI	APS	MASCF	AGBODRAFO	01-Ao-90	04-Jun-91	-
MARITIME	LACS	MOLOGA	AFI	ACCOUCHEUSE	MSP	AGBRADRAFO	01-Jan-89	24-Jun-91	06-Jun-92
MARITIME	LACS	DADJIE	ANANVI	IDE	MSP	AGOME	-	01-Jun-91	06-Jun-92
MARITIME	LACS	KPETEMEY	HONSOUSI	MATRONE	MSP	AGOME	01-Jan-89	-	06-Jun-92
MARITIME	LACS	GALABO	EKUE	AGENT ITINERANT	MSP	AGOME-GLOZ	01-Ao-90	-	-
MARITIME	LACS	KANYI	AGBENGNGAN	APS	MASCF	AGOME-GLOZ	01-Ao-90	-	-
MARITIME	LACS	AYAYI	MEYEV	ACCOUCHEUSE	MSP	AGOME-GLOZ OU	-	04-Jun-91	06-Jun-92
MARITIME	LACS	AMEKPO	AYI	AGENT ITINERANT	MSP	AGOME-SEVA	01-Ao-90	26-Jun-91	06-Jun-92
MARITIME	LACS	TOUTOU	AFIYI	ACCOUCHEUSE	MSP	AGOME-SEVA	-	04-Jun-91	-
MARITIME	LACS	MESSAUVI	AYABA	ACCOUCHEUSE	MSP	AGOUEGA	01-Jan-89	-	06-Jun-92
MARITIME	LACS	MENSAH	PAFO	INFIRMIER	MSP	AGOUEGAN	01-Ao-90	01-Jun-91	06-Jun-92
MARITIME	LACS	MOUSSA	ASSIBI	ACCOUCHEUSE	MSP	AGOUEGAN	-	04-Jun-91	-
MARITIME	LACS	DADJE	ANANVI	INFIRMIER	MSP	AKLAKOU	01-Ao-90	26-Jun-91	-
MARITIME	LACS	IBRAHIM	CULICATOU	SAGE FEMME	MSP	AKLAKOU	01-Jan-89	26-Jun-91	06-Jun-92
MARITIME	LACS	SESSOU	AYITE	AGENT ITINERANT	MSP	AKLAKOU	01-Ao-90	04-Jun-91	-
MARITIME	LACS	TETEGAN	AKOUEDE	IDE	MSP	AKLAKOU	01-Jan-89	04-Jun-91	06-Jun-92
MARITIME	LACS	AFATSAWO	KOFFI	IDE	MSP	ANEHO	-	26-Jun-91	-
MARITIME	LACS	AGBODJI	EKOUEGAN	IDE	MSP	ANEHO	01-Ao-90	-	06-Jun-92
MARITIME	LACS	AKAKPO	AYOKO	APS	MASCF	ANEHO	-	26-Jun-91	-
MARITIME	LACS	AMEHAME	MAWUENA	AGENT DHYGIENE	MSP	ANEHO	01-Avr-90	31-Oct-90	14-Oct-91
MARITIME	LACS	BRUCE	SESSI	AGENT AUX	MSP	ANEHO	01-Jan-89	-	06-Jun-92
MARITIME	LACS	FOUGAN	KAYI	ACCOUCHEUSE	MSP	ANEHO	01-Ao-90	04-Jun-91	06-Jun-92
MARITIME	LACS	GABIAM	KOMI	APS	MASCF	ANEHO	-	31-Oct-90	14-Oct-91
MARITIME	LACS	GNASSOUNOU	EKEDJE	ATBEF	ONG	ANEHO	-	-	06-Jun-92
MARITIME	LACS	KOMLAN	DEDE	IDE	MSP	ANEHO	31-Jul-90	-	-
MARITIME	LACS	MESSANGAN	MESSAN	AM	MSP	ANEHO	01-Avr-90	31-Oct-90	14-Oct-91
MARITIME	LACS	TENDAR	MENSAH	IDE	MSP	ANEHO	01-Jan-89	04-Jun-91	06-Jun-92
MARITIME	LACS	TENOU	ANANI	CSS	MASCF	ANEHO	01-Avr-90	-	14-Oct-91

ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	dates des formations recus		
							FEV	UMD/Palu	CPC/PF
MARITIME	LACS	TOKOU	AKUELE	TSGS	MSP	ANEHO	01-Avr-90	31-Oct-90	14-Oct-91
MARITIME	LACS	AKOUEY	NADOU	SAGE FEMME	MSP	ANFOIN	-	26-Jun-91	-
MARITIME	LACS	ETSI	KOMLAN	AM	MSP	ANFOIN	01-Avr-90	21-Oct-90	06-Jun-92
MARITIME	LACS	HOUNHOUENOU	AJLAVI	ACCOUCHEUSE	MSP	ANFOIN	01-Jan-89	-	06-Jun-92
MARITIME	LACS	YILADEMA	PATATOM	ACCOUCHEUSE	MSP	ANFOIN	-	-	06-Jun-92
MARITIME	LACS	SOZANGBE	LOGOSSI	ACCOUCHEUSE	MSP	ATTISSO	29-Jan-89	04-Jun-91	06-Jun-92
MARITIME	LACS	ASSAGBA	ADFOA	MATRONE	MSP	ATTITOGAN	01-Jan-89	01-Jul-91	06-Jun-92
MARITIME	LACS	BADAKA	KOHOE	ACCOUCHEUSE	MSP	ATTITOGAN	23-Jan-89	-	05-Jun-92
MARITIME	LACS	KOUEVI-KOKO	MENSSAN	AM	MSP	ATTITONGON	01-Ao-90	01-Jun-91	06-Jun-92
MARITIME	LACS	KOUNOU	KETE	AGENT ITINERANT	MSP	ATTITONGON	01-Ao-90	-	-
MARITIME	LACS	LOCOH	YAWA	SAGE FEMME	MSP	ATTITONGON	-	26-Jun-91	-
MARITIME	LACS	AMAKE	AGBENKE	APS	MASCF	AVEVE	01-Ao-90	-	-
MARITIME	LACS	BRUCE	KOWAHU	IDE	MSP	AVEVE	01-Ao-90	01-Jun-91	06-Jun-92
MARITIME	LACS	KATARIA	OHINE	APS	MASCF	BATONOU	01-Ao-90	-	-
MARITIME	LACS	YEMEY	AYABA	ACCOUCHEUSE	MSP	BATONOU	01-Jan-89	04-Jun-91	06-Jun-92
MARITIME	LACS	AGBEWOU	AFANTOGNAWO	APS	MASCF	DJETA	01-Ao-90	-	-
MARITIME	LACS	NSOUGAN	DEDE	MATRONE	MSP	DJETA	01-Jan-89	26-Jun-91	06-Jun-92
MARITIME	LACS	TOHOEDE	KODJO	INFIRMIER	MSP	DJETA	01-Ao-90	04-Jun-91	06-Jun-92
MARITIME	LACS	AHOUNGBEVI	MAHESSI	ACCOUCHEUSE	MSP	GBODJOME	01-Jan-89	26-Jun-91	06-Jun-92
MARITIME	LACS	AMEWOU	YAOBIO	IDE	MSP	GBODJOME	-	04-Jun-91	06-Jun-92
MARITIME	LACS	ETAU	MAHSSI	ACCOUCHEUSE	MSP	GBODJOME	01-Ao-90	-	-
MARITIME	LACS	AMAH	LOSSI	ACCOUCHEUSE	MSP	GLIDJI	02-Ao-90	24-Avr-91	06-Jun-92
MARITIME	LACS	HOAFA	AMEYO	APS	MASCF	GLIDJI	-	26-Jun-91	-
MARITIME	LACS	AKAKPO	AWOFA	ACCOUCHEUSE	MSP	GOURMOKOP E	01-Jan-89	01-Jul-91	06-Jun-92
MARITIME	LACS	ALI	JANA	IDE	MSP	GOURMOKOP E	01-Ao-90	01-Jun-91	09-Nov-91
MARITIME	LACS	BENISSAN	KOMI	IDE	MSP	GLIDJI	01-Ao-90	01-Avr-91	06-Jun-92
MARITIME	LACS	BOCCOVI	AYITEVI	INFIRMIER	MSP	KPOTA	01-Ao-90	04-Jun-91	-
MARITIME	LACS	AGBEZOUHLON	AKOUAVI	ACCOUCHEUSE	MSP	MELLY	01-Jan-89	26-Jun-91	06-Jun-92
MARITIME	LACS	ASSIGNON	KOUASSI	APS	MASCF	MELLY	01-Ao-90	26-Jun-91	05-Jun-92
MARITIME	LACS	DEGBE	TCHOTCHO	AGENT AUX	MSP	MELLY	-	04-Jun-91	06-Jun-92
MARITIME	LACS	AGBAKOU	AYAOMI	INFIRMIER	MSP	SEKO	01-Ao-90	04-Jun-91	06-Jun-92
MARITIME	LACS	KOFFI	AKOERA	MATRONE	MSP	SEKO	01-Jan-89	26-Jun-91	06-Jun-92
MARITIME	LACS	ADJISSANOU	HOMONON	MATRONE	MSP	ZOWLA	01-Jan-89	20-Jun-91	06-Jun-92
MARITIME	LACS	AGBEKPONOU	DONKOR	IDE	MSP	ZOWLA	01-Ao-90	26-Jun-91	06-Jun-92
MARITIME	LACS	MIATODJO	KODJO	APS	MASCF	ZOWLA	01-Ao-90	-	-
MARITIME	VO	AGBODJINOU	AFIAVI	ACCOUCHEUSE	MSP	AKOUMAPE	-	16-Mai-91	-
MARITIME	VO	DJEDU	KOFFI	IDE	MSP	AKOUMAPE	01-Ao-90	15-Mai-91	08-Jun-92
MARITIME	VO	DOSSEH	AKOUAVI	ACCOUCHEUSE	MSP	AKOUMAPE	-	16-Mai-91	08-Jun-92
MARITIME	VO	ADAMAH	MAWOUSS	AGENT ITINERANT	MSP	AMEGNAN	01-Ao-90	-	-
MARITIME	VO	AYSSAH	WOWONYO	INFIRMIER	MSP	AMEGNAN	01-Ao-90	16-Mai-91	08-Jun-92
MARITIME	VO	BADAKOU	AMEGNEGBO	ACCOUCHEUSE	MSP	AMEGNAN	01-Ao-90	-	08-Jun-92
MARITIME	VO	AWOUDJA	AGBEMAVI	IDE	MSP	ASSANKONDI 	27-Jul-90	17-Mai-91	08-Jun-92
MARITIME	VO	CHARBER	AKOUAVI	IDE	MSP	ASSANKONDI 	01-Ao-90	16-Mai-91	-
MARITIME	VO	DONKO	AMALEYE	IDE	MSP	ASSANKONDI 	01-Ao-90	16-Mai-91	-
MARITIME	VO	AKAKPOVI	HOLAVO	AGENT ITINERANT	MSP	BADOUGBE	01-Ao-90	-	-
MARITIME	VO	AMEKOUVO	KOSSIGAN	IDE	MSP	BADOUGBE	01-Ao-90	16-Mai-91	08-Jun-92
MARITIME	VO	MESSANVI	COVI	ACCOUCHEUSE	MSP	BADOUGBE	-	16-Mai-91	08-Jun-92
MARITIME	VO	ABOUDJO	KOFFI	IDE	MSP	DAGBATI	01-Ao-90	-	-
MARITIME	VO	FOLMI	AYELE	ACCOUCHEUSE	MSP	DAGBATI	01-Ao-90	-	08-Jun-92
MARITIME	VO	YOVOGAN	AGBEKO	IDE	MSP	DAGBATI	27-Jul-90	17-Mai-91	08-Jun-92
MARITIME	VO	TCHAMDJA	ESSOHANAH	IDE	MSP	EKPI	31-Jul-90	07-Mai-91	08-Jun-92
MARITIME	VO	AGNIKA	KODJO	APS	MASCF	HAHOTOE	01-Ao-90	-	-
MARITIME	VO	HOUNKPATI	AKOUA	AGENT D'HYGIENE	MSP	HAHOTOE	-	16-Mai-91	-
MARITIME	VO	LAWSON	AKOUWAVI	ACCOUCHEUSE	MSP	HAHOTOE	-	-	08-Jun-92
MARITIME	VO	WUASSI	KODJO	IDE	MSP	HAHOTOE	01-Ao-90	-	08-Jun-92
MARITIME	VO	AGADJOU	MENSAH	INFIRMIER	MSP	HOUNKOTE	-	16-Mai-91	08-Jun-92
MARITIME	VO	MENSAH	KAYI	ACCOUCHEUSE	MSP	KETA	-	-	11-Jun-92
MARITIME	VO	DJADDOH	WALAKEYEM	IDE	MSP	KETA AKOVI	01-Ao-90	16-Mai-91	08-Jun-92

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	dates des formations recues		
							PEV	LMD/Palu	CPC/PF
MARITIME	VO	LAWSON	KAJI	ACCOUCHEUSE	MSP	KETA AKODA	-	-	08-Jun-92
MARITIME	VO	DJAMAH	APELETE	AGENT	MSP	SEVAGAN	01-Ao-90	-	-
MARITIME	VO	GUIDIGAN	ABLAWA	ITINERANT	MSP	SEVAGAN	01-Ao-90	16-Mar-91	08-Jun-92
MARITIME	VO	SODJA	NOUWATSI	ACCOUCHEUSE	MSP	SEVAGAN	01-Ao-90	16-Mar-91	-
MARITIME	VO	ZODJA	NOUWATSI	IDE	MSP	SEVAGAN	01-Ao-90	16-Jun-91	-
MARITIME	VO	ACKY	KOKOU	AGENT	MSP	TOGOVILLE	01-Ao-90	-	-
MARITIME	VO	AZANLESSESSI	AMEYO	D'HYGIENE	MSP	TOGOVILLE	-	16-Mar-91	08-Jun-92
MARITIME	VO	GSETE	KOSSIVI	ACCOUCHEUSE	MSP	TOGOVILLE	01-Ao-90	16-Mar-91	08-Jun-92
MARITIME	VO	AWOUTO	ABLAVI	IDE	MSP	VO ATTIVE	-	16-Mai-91	08-Jun-92
MARITIME	VO	AGBETROBU	KOUASSI	ACCOUCHEUSE	MSP	VOGAN	01-Avr-90	01-Oct-90	14-Oct-91
MARITIME	VO	AKPOTO	AYABA	AM	MSP	VOGAN	-	16-Mai-91	-
MARITIME	VO	ASSIONGBON	KANGNI	IDE	MSP	VOGAN	-	31-Oct-90	14-Oct-91
MARITIME	VO	GLOKPOR	AKUAVI	CSS	MASCF	VOGAN	-	-	14-Oct-91
MARITIME	VO	HOUENGNATO	AGBETROBOU	ATBEF	ONG	VOGAN	-	-	14-Oct-91
MARITIME	VO	KISSI	ABRA	AM	MSP	VOGAN	01-Ao-90	31-Oct-90	-
MARITIME	VO	KPAKPO	SECHIME	SAGE FEMME	MSP	VOGAN	01-Ao-90	-	-
MARITIME	VO	MELISSI	ABRA	SAGE FEMME	MSP	VOGAN	01-Ao-90	-	08-Jun-92
MARITIME	VO	SAMATY	TCHAKE	SAGE FEMME	MSP	VOGAN	01-Ao-90	-	-
MARITIME	VO	SOUKPOR	KOMI	AGENT	MSP	VOGAN	01-Avr-90	31-Oct-90	14-Oct-91
MARITIME	VO	TEVI	MASSA	D'HYGIENE	MSP	VOGAN	-	16-Mar-91	-
MARITIME	VO	YOROU	SABABE	SAGE FEMME	MSP	VOGAN	01-Ao-90	-	-
MARITIME	VO	ADJANONGLO	LANTE	AGENT	MSP	VOGAN	01-Ao-90	-	-
MARITIME	VO	DJAGU	BLEWOUSSI	APS	MASCF	VOKOUTIME	01-Avr-90	31-Oct-90	-
MARITIME	VO	SAGBA	YAWA	AGENT	MSP	VOKOUTIME	01-Ao-90	-	-
MARITIME	VO	ZINSOU	KOMLAN	ITINERANT	MSP	VOKOUTIME	-	16-Mai-91	08-Jun-92
MARITIME	VO	JOHNSON	AKOSSONA	ACCOUCHEUSE	MSP	VOGBA	01-Ao-90	16-Mai-91	08-Jun-92
MARITIME	VO	SODOGA	KOMI	IDE	MSP	VOGBA	01-Ao-90	16-Mai-91	08-Jun-92
MARITIME	VO	KOKOU	AKOSSIVA	INFIRMIER	MSP	VOGBA	01-Ao-90	16-Mai-91	08-Jun-92
MARITIME	VO	SAKPONOU	KOSSIVA	ACCOUCHEUSE	MSP	ZOOTI	-	-	12-Jun-92
MARITIME	VO	AKAKPO	KOKOEVI	ACCOUCHEUSE	MSP	ZOOTI	-	16-Mai-91	08-Jun-92
MARITIME	YOTO	KANYI	AFANYO	APS	MASCF	AHEPE	01-Ao-90	28-D'c-90	10-Mai-92
MARITIME	YOTO	GBONE	ABLAVI	IDE	MSP	AHEPE	01-Ao-90	-	-
MARITIME	YOTO	NOUWOSSEY	KONGSO	MATRONE	MSP	ESSE ANA	-	-	10-Mai-92
MARITIME	YOTO	VIGLO	KODJO	IDE	MSP	GBOTO	01-Ao-90	-	-
MARITIME	YOTO	ANIMAKA	AKOUWA	APS	MASCF	GBOTO	01-Avr-90	31-Oct-90	14-Oct-91
MARITIME	YOTO	EVODA	KOMLA	APS	MASCF	KINIKONOUJI	-	-	10-Mai-92
MARITIME	YOTO	ADJAMANI	KOKOU	APS	MASCF	KINIKONOUJI	01-Ao-90	-	10-Mai-92
MARITIME	YOTO	AHOLE	BIESSU	APS	MASCF	KOUVE	-	28-D'c-90	10-Mai-92
MARITIME	YOTO	BATCHONA	POUMOM	IDE	MSP	KOUVE	01-Ao-90	-	-
MARITIME	YOTO	CLUJOE	YAONI	AGENT	MSP	KOUVE	01-Ao-90	28-D'c-90	-
MARITIME	YOTO	FADMA	BEGOU	D'HYGIENE	MSP	KOUVE	01-Ao-90	-	-
MARITIME	YOTO	KLU	YAWA	MATRONE	MSP	KOUVE	-	-	10-Mai-92
MARITIME	YOTO	TEKPO	MOMENYANAWA	APS	MASCF	KOUVE	01-Ao-90	-	-
MARITIME	YOTO	ADJANGBA	AFI	APS	MASCF	TABLIGBO	01-Ao-90	-	10-Mai-92
MARITIME	YOTO	AGBAGNON	DOVI	APS	MSP	TABLIGBO	01-Avr-90	31-Oct-90	-
MARITIME	YOTO	AGUIDI	EVODA	TSGS	MSP	TABLIGBO	01-Avr-90	31-Oct-90	-
MARITIME	YOTO	AKOUEGNON	COMLAN	APS	MASCF	TABLIGBO	01-Ao-90	28-D'c-90	-
MARITIME	YOTO	GHAZY	ALNASS	IDE	MSP	TABLIGBO	01-Avr-90	31-Oct-90	14-Oct-91
MARITIME	YOTO	HOUNAKE	DJIDO	CSS	MASCF	TABLIGBO	01-Avr-90	31-Oct-90	14-Oct-91
MARITIME	YOTO	KAGNAOU	KOMLAN	AGENT	MSP	TABLIGBO	27-Jul-90	17-Mai-91	-
MARITIME	YOTO	KPOGNON	KOKOUMI	D'HYGIENE	MSP	TABLIGBO	01-Ao-90	-	-
MARITIME	YOTO	N'GOYI	MIGNANOU	AGENT	MSP	TABLIGBO	01-Ao-90	-	-
MARITIME	YOTO	SILJADIN	YAWA	D'HYGIENE	MSP	TABLIGBO	-	-	14-Oct-91
MARITIME	YOTO	SCUDJI	KAYI	AM	ONG	TABLIGBO	-	-	10-Mai-92
MARITIME	YOTO	TODJE	TETEGAN	ATBEF	MSP	TABLIGBO	-	-	14-Oct-91
MARITIME	YOTO	WURAH	AMEYO	MATRONE	MSP	TABLIGBO	-	-	10-Mai-92
MARITIME	YOTO	ATAGNON	ADJOA	TSGS	MSP	TABLIGBO	27-Jul-90	17-Mai-91	10-Mai-92
MARITIME	YOTO	IHOU	KOSSI	SAGE FEMME	MSP	TABLIGBO	01-Ao-90	-	-
MARITIME	YOTO			APS	MASCF	TCHAKPO	01-Ao-90	-	-
MARITIME	YOTO			APS	MASCF	TCHAKPO	24-Jul-90	28-D'c-90	-

ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	dates des formations recus		
							PEV	LMD/Palu	CPC/PF
MARITIME	YOTO	TEDOR	KOSSICIA	ACCOUCHEUSE	MSP	TCHEKPO	-	-	10-Mai-92
MARITIME	YOTO	AGBOE	ABRAN	MATRONE	MSP	TCHEKPO DEDEKP	-	-	10-Mai-92
MARITIME	YOTO	GODOEGAN	NKEGBE	IDE	MSP	TCHEKPO DEVE	-	-	-
MARITIME	YOTO	ODOJO	BASSIROU	IDE	MSP	TOKPLI	01-Ao-90	-	-
MARITIME	YOTO	KOSSI	AMAVI	MATRONE	MSP	TOMETYKON D	01-Ao-90	-	-
MARITIME	YOTO	AKOSSOU	AYABA	MATRONE	MSP	TOMETYKON DJI	-	-	10-Mai-92
MARITIME	YOTO	GUEZERE	KOKOU	INFIRMIER	MSP	YOTO KOPE	-	-	10-Mai-92
MARITIME	YOTO	DOGOE	ABRAN	MATRONE	MSP	ZAFI	01-Ao-90	-	-
MARITIME	YOTO	TETEV	AKOELE	IDE	MSP	ZAFI	01-Ao-90	-	-
MARITIME	ZIO	ADRI	YAWOVI	AGENT ITINERANT	MSP	ABOBO	01-Ao-90	19-Jun-91	04-Jul-92
MARITIME	ZIO	AGBO	MANA	ACCOUCHEUSE	MSP	ABOBO	01-Ao-90	01-Jul-91	04-Jul-92
MARITIME	ZIO	DETO	AMAVI	MATRONE	MSP	ADANGBE	01-Ao-90	19-Jun-91	04-Jul-92
MARITIME	ZIO	KOKOU	VIGNON	IDE	MSP	ADANGBE	01-Ao-90	01-Avr-91	04-Jul-92
MARITIME	ZIO	AMOUSSOVI	AKAKPOVI	IDE	MSP	AGBELOUVE	01-Ao-90	19-Jun-91	04-Jul-92
MARITIME	ZIO	BATAKA	ABEYO	MATRONE	MSP	AGBELOUVE	01-Ao-90	01-Jul-91	04-Jul-92
MARITIME	ZIO	DANDO	AZANDO	AGENT D'HYGIENE	MSP	AGBELOUVE	01-Ao-90	19-Jun-91	-
MARITIME	ZIO	BINAO	KOAJU	ACCOUCHEUSE	MSP	AHOUJO	01-Ao-90	19-Jun-91	-
MARITIME	ZIO	ANTHONY	DOVI	ACCOUCHEUSE	MSP	AKEPE	01-Ao-90	-	-
MARITIME	ZIO	DJILAN	YAO	INFIRMIER	MSP	ALOKCEGBE	01-Jan-90	20-Jun-91	04-Jul-92
MARITIME	ZIO	DZILAN	APEDOH	IDE	MSP	ALOKOEGBE	01-Ao-90	19-Jun-91	-
MARITIME	ZIO	TOTI	AMA	ACCOUCHEUSE	MSP	ALOKOEGBE	01-Ao-90	19-Jun-91	04-Jul-92
MARITIME	ZIO	ADABRA	KOSSIWA	ACCOUCHEUSE	MSP	AYAKOPE	01-Ao-90	19-Jun-91	04-Jul-92
MARITIME	ZIO	AKATOR	AKOSSIWA	ACCOUCHEUSE	MSP	BADJA	-	10-Jun-91	-
MARITIME	ZIO	DACKY	KOKOU	APS	MASCF	BADJA	01-Avr-90	-	-
MARITIME	ZIO	POLLE	BANAMBAKO	IDE	MSP	BATOUME	-	10-Jun-91	-
MARITIME	ZIO	AGBO	ELEMAWUSSI	IDE	MSP	DALAVE	-	14-D'e-90	04-Jul-92
MARITIME	ZIO	SEM	YAO	IDE	MSP	DALAVE	-	20-Jun-91	-
MARITIME	ZIO	AGBANAN	AFI	ACCOUCHEUSE	MSP	DAVIE	01-Ao-90	19-Jun-91	-
MARITIME	ZIO	NIKABOU	DAMBA	ACCOUCHEUSE	MSP	DAVIE	01-Ao-90	19-Jun-91	04-Jul-92
MARITIME	ZIO	SANVI	AKOUAVI	APS	MASCF	DAVIE	01-Ao-90	19-Jun-91	-
MARITIME	ZIO	TEWUA	YAVI	ACCOUCHEUSE	MSP	DJAGBLE	01-Ao-90	19-Jun-91	04-Jul-92
MARITIME	ZIO	AGBIGBI	APEFA	MATRONE	MSP	DJEMEKEY	01-Ao-90	19-Jun-91	04-Jul-92
MARITIME	ZIO	SENYO	KWAMI	AGENT ITINERANT	MSP	DJEMEKEY	01-Ao-90	19-Jun-91	04-Jul-92
MARITIME	ZIO	ATIGLO	AKUA	ACCOUCHEUSE	MSP	GAME	01-Ao-90	10-Jun-91	04-Jul-92
MARITIME	ZIO	YEKPLE	TAMENYO	IDE	MSP	GAME	01-Ao-90	19-Jun-91	04-Jul-92
MARITIME	ZIO	AZAWOR	AMA	MATRONE	MSP	GAPE	01-Ao-90	19-Jun-91	04-Jul-92
MARITIME	ZIO	HOUNABE	SOTODE	IDE	MSP	GAPE	-	01-Avr-91	04-Jul-92
MARITIME	ZIO	PEIGUE	ESSOSSIMNA	INFIRMIER	MSP	GAPE KPODJI	01-Ao-90	19-Jun-91	04-Jul-92
MARITIME	ZIO	PIGNANDI	PADADOUNAM	ACCOUCHEUSE	MSP	GAPE KPODJI	01-Ao-90	19-Jun-91	-

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	dates des formations recus		
							FEV	LMO.Palu	CPC/PP
PLATEAUX	AGOU	AGODE	AYOVI	SAGE FEMME	MSP	ADETA	01-Ao-90	23-Mar-91	16-Mai-92
PLATEAUX	AGOU	HEKA	AWOUSSI	MATRONE	MSP	AGBAVE	01-Mar-90	.	16-Mai-92
PLATEAUX	AGOU	KPEDJI	KOFFI	INFIRMIER	MSP	AGOTIME	01-Ao-90	23-Mar-91	11-Mai-92
PLATEAUX	AGOU	GAMEDA	ESSI	MATRONE	MSP	AGOU	01-Ao-90	28-Mar-91	16-Mai-92
PLATEAUX	AGOU	KONTO	KONDI	APS	MASCF	AKPLOLO	01-Ao-90	24-Avr-91	18-Mar-92
PLATEAUX	AGOU	AHADJI	YAWA	MATRONE	MSP	AKPLOLO	.	28-Mar-91	16-Mai-92
PLATEAUX	AGOU	DAKEY	DOVI	MATRONE	MSP	APEGAME	.	.	16-Mai-92
PLATEAUX	AGOU	DOGBE	KOSSIWA	ACCOUCHEUSE	MSP	AGOU AVEDZE	27-Jul-90	17-Mar-91	16-Mai-92
PLATEAUX	AGOU	ALOVOR	KOMLA	IDE	MSP	AGOU GADJA	01-Ao-90	28-Mar-91	16-Mai-92
PLATEAUX	AGOU	BENYIGBA	YAWA	APS	MASCF	AGOU GARE	02-Ao-90	.	.
PLATEAUX	AGOU	ADOKANOU	SENAM	AM	MSP	AGOU-GARE	01-Avr-90	27-Oct-90	09-Nov-91
PLATEAUX	AGOU	ATA	KOFFI	AGENT	MSP	AGOU-GARE	.	28-Mar-91	.
PLATEAUX	AGOU	DAGADU	ADZO	MATRONE	MSP	AGOU-GARE	.	04-Jun-91	16-Mai-92
PLATEAUX	AGOU	DENYIGBA	YAWA	APS	MASCF	AGOU-GARE	01-Jul-90	24-Avr-91	18-Mai-92
PLATEAUX	AGOU	SEKONOU	KOFFI	APS	MASCF	AGOU-GARE	01-Avr-90	21-Oct-90	03-Nov-91
PLATEAUX	AGOU	SONTA	MESSAN	AGENT	MSP	AGOU-GARE	01-Avr-90	27-Oct-90	09-Nov-91
PLATEAUX	AGOU	TENU	ENYONAM	DHYGIENE	MSP	AGOU-GARE	01-Ao-90	.	.
PLATEAUX	AGOU	TOGO	BLEWUSI	AGENT	MSP	AGOU-GARE	31-Jul-90	21-Nov-90	09-Nov-91
PLATEAUX	AGOU	WODAKO	FELICITE	SAGE FEMME	MSP	AGOU-GARE	.	01-Mar-90	16-Mai-92
PLATEAUX	AGOU	DONI	KOSSIWA	ACCOUCHEUSE	MSP	AMOUSSOU	31-Jul-90	01-Avr-91	16-Mai-92
PLATEAUX	AGOU	EGBE	NOVISSI	IDE	MSP	AMOUSSOU	01-Ao-90	28-Mar-91	16-Mai-92
PLATEAUX	AGOU	KLUTSE	KOKU	AGENT	MSP	AMOUSSOU	.	27-Oct-90	09-Nov-91
PLATEAUX	AGOU	SUMSA	DZIGBODI	APS	MASCF	AMOUSSOU	01-Avr-90	27-Oct-90	09-Nov-91
PLATEAUX	AGOU	MENSAH	ADJO	ACCOUCHEUSE	MSP	GADJAGAN	.	.	15-Mar-92
PLATEAUX	AGOU	TSOGBALE	KOSSI	IDE	MSP	GADJAGAN	01-Avr-90	21-Oct-90	26-Oct-91
PLATEAUX	AGOU	WAKLATSI	KOFFIGAN	IDE	MSP	GADJAGAN	01-Ao-90	28-Mar-91	16-Mai-92
PLATEAUX	AGOU	EZUJXPE	ABRA	MATRONE	MSP	GLEKONOU	01-Ao-90	28-Mar-91	16-Mai-92
PLATEAUX	AGOU	GNAGNA	KWAMI	IDE	MSP	KATI	01-Ao-90	28-Mar-91	16-Mai-92
PLATEAUX	AGOU	TENU	MOKPOKP	ACCOUCHEUSE	MSP	KATI	.	04-Jun-91	16-Mai-92
PLATEAUX	AGOU	AHELIKPET	AFI	MATRONE	MSP	KEBO	.	04-Jun-91	16-Mai-92
PLATEAUX	AGOU	EBU	AMA	MATRONE	MSP	KEBO	.	06-Avr-92	16-Mai-92
PLATEAUX	AGOU	GOMADO	KOMIVI	AGENT	MSP	KOLOGAN	.	28-Mar-91	16-Mai-92
PLATEAUX	AGOU	ADZIVON	DELALI	MATRONE	MSP	NYITOE ZUKPE	01-Ao-90	10-Jun-91	16-Mai-92
PLATEAUX	AGOU	DONKOR	YAO	IDE	MSP	NYITOE ZUKPE	01-Ao-90	28-Mar-91	16-Mai-92
PLATEAUX	AMOU	AMEVO	SOSSI	MATRONE	MSP	ADOGLI	27-Jul-90	13-Mar-91	11-Mai-92
PLATEAUX	AMOU	WOLUDJI	KOSSI	INFIRMIER	MSP	ADOGLI	02-Ao-90	14-Mar-91	11-Mai-92
PLATEAUX	AMOU	LOKOSSOU	SESSI	ACCOUCHEUSE	MSP	ADOGLI	02-Ao-90	14-Mar-91	.
PLATEAUX	AMOU	AGBONKOU	KODJO	AGENT	MSP	AMLAME	.	.	20-Mar-92
PLATEAUX	AMOU	AGODE	SENAME	DHYGIENE	MSP	AMLAME	.	.	04-Mar-92
PLATEAUX	AMOU	ALLEO	KOMI	IDE	MSP	AMLAME	02-Ao-90	.	.
PLATEAUX	AMOU	AMENYINU	DOVI	IDE	MSP	AMLAME	02-Ao-90	14-Mar-91	11-Mai-92
PLATEAUX	AMOU	AMETEPE	KOMI	AGENT	MSP	AMLAME	01-Ao-90	25-Nov-90	24-Oct-91
PLATEAUX	AMOU	DJAGADOU	KOFFI	CSS	MASCF	AMLAME	01-Avr-90	31-Oct-90	09-Nov-91
PLATEAUX	AMOU	ETSE	YAO	IDE	MSP	AMLAME	.	24-Oct-90	.
PLATEAUX	AMOU	GBADAM	AFIWA	SAGE FEMME	MSP	AMLAME	.	14-Mar-91	11-Mai-92
PLATEAUX	AMOU	MAGLO	YAO	APS	MASCF	AMLAME	01-Avr-90	24-Oct-90	09-Nov-91
PLATEAUX	AMOU	NASSOMA	WOYADE	APS	MASCF	AMLAME	01-Jan-89	10-Avr-91	04-Mar-92
PLATEAUX	AMOU	TCHAKPAN	AMAVI	SECRETARE	MASCF	AMLAME	24-Jul-90	10-Avr-91	04-Mar-92
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Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	Dates des formations recues		
							PEV	LMD, Paiu	CPC, PF
PLATEAUX	AMOU	TCHOGBAL E	MAURIENA	APS	MASC F	AMLAME	-	10-Avr-91	-
PLATEAUX	AMOU	TETE	KOKOU	TSGS	MSP	AMLAME	24-Jul-90	24-Oct-90	24-Oct-91
PLATEAUX	AMOU	TOMETY	EDOUMI	IDE	MSP	AMLAME	02-Ao-90	-	-
PLATEAUX	AMOU	YOVO	ADJOA	ATBEF	CNG	AMLAME	-	24-Oct-90	24-Oct-91
PLATEAUX	AMOU	ABODA	KOSSI	IDE	MSP	AMOU-OBLO	-	-	11-Mai-92
PLATEAUX	AMOU	AGBO	ALUNOU	APS	MASC F	AMOU-OBLO	24-Jul-90	10-Avr-91	04-Mai-92
PLATEAUX	AMOU	APALOO	DOTSE	AM	MSP	AMOU-OBLO	01-Avr-90	24-Oct-90	09-Nov-91
PLATEAUX	AMOU	BAHUNDE	BESSY	SAGE FEMME	MSP	AMOU-OBLO	-	-	11-Mai-92
PLATEAUX	AMOU	BODOMBOS SOU	TCHILALO	SAGE FEMME	MSP	AMOU-OBLO	-	14-Mai-91	-
PLATEAUX	AMOU	LOGLO	EUNAM	SAGE FEMME	MSP	AMOU-OBLO	02-Ao-90	-	-
PLATEAUX	AMOU	TSEKOU	MAWOLU	IDE	MSP	AMOU-OBLO	-	14-Mai-91	-
PLATEAUX	AMOU	ATIGAKOU	YAWA	ACCOUCHEUSE	MSP	AVEDJE	01-Jul-90	13-Mai-91	11-Mai-92
PLATEAUX	AMOU	KOUMESSI	KOSSI	INFIRMIER	MSP	AVEDJE	02-Ao-90	14-Mai-91	11-Mai-92
PLATEAUX	AMOU	AMEGANSE	VISSEHO	IDE	MSP	AYOME	02-Ao-90	14-Mai-91	11-Mai-92
PLATEAUX	AMOU	ELUYA	AKOFA	ACCOUCHEUSE	MSP	AYOME	02-Ao-90	14-Mai-91	11-Mai-92
PLATEAUX	AMOU	ETSE	ALLOFA	ACCOUCHEUSE	MSP	AYOME	26-Avr-90	13-Mai-91	11-Mai-92
PLATEAUX	AMOU	VAVA	KOFFI	INFIRMIER	MSP	DIDOKPO	02-Ao-90	14-Mai-91	11-Mai-92
PLATEAUX	AMOU	KARABO	PITALATA M	INFIRMIER	MSP	EZIME	-	14-Mai-91	11-Mai-92
PLATEAUX	AMOU	NMOUTIKP A	DAMBA	INFIRMIER	MSP	EZIME	02-Ao-90	-	-
PLATEAUX	AMOU	ODAH	AYAWOVI	ACCOUCHEUSE	MSP	EZIME	02-Ao-90	14-Mai-91	11-Mai-92
PLATEAUX	AMOU	ADAM	MAHAMAD OU	INFIRMIER	MSP	GAME	02-Ao-90	14-Mai-91	12-Mai-92
PLATEAUX	AMOU	NPAPE	YAWA	MATRONE	MSP	GAME	01-Mai-90	01-Mai-91	15-Mai-92
PLATEAUX	AMOU	NPAPE	YAWA	ACCOUCHEUSE	MSP	GAME	02-Ao-90	-	-
PLATEAUX	AMOU	AGBEMEDE	NKWAME	IDE	MSP	HHEATRO	27-Jul-90	14-Mai-91	11-Mai-92
PLATEAUX	AMOU	AYENA	ASSIBA	ACCOUCHEUSE	MSP	HHEATRO	-	14-Mai-91	-
PLATEAUX	AMOU	NABAGO	AKPAROU	APS	MASC F	HHEATRO	24-Jul-90	10-Avr-91	04-Mai-92
PLATEAUX	AMOU	NABOULIWA	TCHILALO	ACCOUCHEUSE	MSP	HHEATRO	-	14-Mai-91	-
PLATEAUX	AMOU	NGANI	KOGNAJ	AGENT ITINERANT	MSP	HHEATRO	02-Ao-90	-	-
PLATEAUX	AMOU	SEGLA	AMAGLO	SAGE FEMME	MSP	HHEATRO	-	28-Avr-90	12-Mai-92
PLATEAUX	AMOU	ADOUVI	KODJO	APS	MASC F	KOUTOUKPA	-	10-Avr-91	-
PLATEAUX	AMOU	EKPETCHO UGAN	AMA	ACCOUCHEUSE	MSP	KOUTOUKPA	02-Ao-90	14-Mai-91	11-Mai-92
PLATEAUX	AMOU	SENOU	KOSSI	IDE	MSP	KOUTOUKPA	02-Ao-90	14-Mai-91	11-Mai-92
PLATEAUX	AMOU	ASSOGBAVI	AKOSSIWA	MATRONE	MSP	KPATEGAN	02-Ao-90	14-Mai-91	11-Mai-92
PLATEAUX	AMOU	KOUNOU	AMOUZOU	AGENT ITINERANT	MSP	KPATEGAN	26-Avr-90	13-Mai-91	11-Mai-92
PLATEAUX	AMOU	TETTEH	ABI-SOLO	APS	MASC F	KPATEGAN	24-Jul-90	10-Avr-91	04-Mai-92
PLATEAUX	AMOU	MENSAH	AMETEPE	AGENT ITINERANT	MSP	OGA	01-Ao-90	25-Jun-91	11-Mai-92
PLATEAUX	AMOU	SADJI	KOSSI	IDE	MSP	OGA	02-Ao-90	14-Mai-91	11-Mai-92
PLATEAUX	AMOU	TCHALLA	EDI	MATRONE	MSP	OKAFUO	-	-	11-Mai-92
PLATEAUX	AMOU	ALEHERI	METINOU	IDE	MSP	OKPAHOU	02-Ao-90	14-Mai-91	11-Mai-92
PLATEAUX	AMOU	BABYE	EBIANADU	MATRONE	MSP	OKPAHOU	02-Ao-90	14-Mai-91	11-Mai-92
PLATEAUX	AMOU	BOKORVI	KOFFI	INFIRMIER	MSP	PATATOUKOU	-	-	11-Mai-92
PLATEAUX	AMOU	EDOH	ADJOA	ACCOUCHEUSE	MSP	PATATOUKOU	27-Jul-90	28-Mai-91	11-Mai-92
PLATEAUX	AMOU	AKAKPO	KOSSIWA	ACCOUCHEUSE	MSP	SODO	01-Jul-90	-	11-Mai-92
PLATEAUX	AMOU	TOSSOU	KOFFI	IDE	MSP	TABLIGBO	01-Jul-90	-	11-Mai-92
PLATEAUX	AMOU	ANFRANI	DZIGBODI	SAGE FEMME	MSP	TEMEDJA	27-Jul-90	14-Mai-91	11-Mai-92
PLATEAUX	AMOU	BODJONA	YAWA	IDE	MSP	TEMEDJA	-	13-Mai-91	11-Mai-92
PLATEAUX	AMOU	TARMA	ANABEDE	ACCOUCHEUSE	MSP	TEMEDJA	02-Ao-90	-	-
PLATEAUX	AMOU	TCHALLA	IGNINFOU MI	ACCOUCHEUSE	MSP	TEMEDJA	-	13-Mai-91	11-Mai-92
PLATEAUX	DAYES	AGBOVI	AGBEKOH	IDE	MSP	DANYI YIKPA	-	-	25-Mai-92
PLATEAUX	DAYES	DZOTSI	OZIFA	MATRONE	MSP	AHLON DENO	01-Ao-90	28-Mai-91	23-Mai-92
PLATEAUX	DAYES	EDOH	CODJOVI	IDE	MSP	AHLON DENO	-	-	11-Mai-92
PLATEAUX	DAYES	DOUMALOR	ABRA	MATRONE	MSP	AHLON SASSMORE	10-Ao-90	19-Jun-91	23-Mai-92
PLATEAUX	DAYES	YIBO	AME	MATRONE	MSP	AHLON TINPE	-	28-Mai-91	11-Mai-92
PLATEAUX	DAYES	ALATE	KWADJO	IDE	MSP	APEYEME	01-Ao-90	28-Mai-91	23-Mai-92
PLATEAUX	DAYES	TOGBE	AFFIWA	SAGE FEMME	MSP	APEYEME	02-Ao-90	01-Jun-91	11-Mai-92

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	dates des formations recus		
							PEV	LMD/Palu	CPC/PF
PLATEAUX	DAYES	AQJAVON	KWAMI	AGENT	MSP	DANYI	01-Avr-90	21-Oct-90	09-Nov-91
PLATEAUX	DAYES	AMEWOA	AVAW	D'HYGIENE	MSP	APEYEME	01-Ao-90	28-Mar-91	-
PLATEAUX	DAYES	APEDO	AKOU	ACCOUCHEUSE	MSP	DANYI	-	28-Mar-91	11-Mar-92
PLATEAUX	DAYES	ASSENKA	KOFFI	AGENT	MSP	APEYEME	-	-	18-Mar-92
PLATEAUX	DAYES	DEGBOEVI	SENA	APS	MASCF	DANYI	01-Ao-90	21-Oct-90	09-Nov-91
PLATEAUX	DAYES	DOGBOEVI	SENA	APS	MASCF	DANYI	-	24-Oct-90	-
PLATEAUX	DAYES	HOYI	AKAKPOSS	INFIRMIER	MSP	APEYEME	01-Ao-90	01-Jun-91	23-Mar-92
PLATEAUX	DAYES	KOTOKAN	KODJO	AGENT	MSP	DANYI	-	28-Mar-91	-
PLATEAUX	DAYES	KPATIKO	KODZO	ITINERANT	MSP	APEYEME	-	01-Jun-91	25-Mar-92
PLATEAUX	DAYES	PATIKO	KODZO	AGENT	MSP	DANYI	-	01-Jun-91	-
PLATEAUX	DAYES	AYEKO	SOWIN	IDE	MSP	DANYI	01-Ao-90	28-Mar-91	09-Nov-91
PLATEAUX	DAYES	BATAHINA	KADABA	APS	MASCF	ELAVANYO	02-Ao-90	27-Oct-90	09-Nov-91
PLATEAUX	DAYES	BIDASSA	AFEIGNINDO	ACCOUCHEUSE	MSP	DANYI	01-Ao-90	28-Mar-91	23-Mai-92
PLATEAUX	DAYES	EKOUEVI	KOFFI	AGENT	MSP	ELAVANYO	19-Jul-90	24-Oct-90	24-Oct-91
PLATEAUX	DAYES	KPETSE	YAWO	AGENT	MSP	DANYI	01-Ao-90	10-Mar-91	18-Mar-92
PLATEAUX	DAYES	LAWSON	LATEVI	AGENT	MSP	ELAVANYO	26-Jul-90	01-Jun-91	11-Mai-92
PLATEAUX	DAYES	ANEWOA	AKUYO	ACCOUCHEUSE	MSP	DANYI KPETE	-	19-Jun-91	23-Mai-92
PLATEAUX	DAYES	KAMETI	SEFENYA	ACCOUCHEUSE	MSP	DANYI KPETE	-	28-Mar-91	-
PLATEAUX	DAYES	BUAKA	AKU	ACCOUCHEUSE	MSP	DANYI NDIGBE	01-Ao-90	19-Jun-91	23-Mai-92
PLATEAUX	DAYES	COMLAN	KODOLO	IDE	MSP	DANYI NDIGBE	01-Ao-90	28-Mar-91	23-Mai-92
PLATEAUX	DAYES	AMETEFE	AMA	AIDE	MSP	DROGBEGAN	-	01-Ao-91	25-Mar-92
PLATEAUX	DAYES	KOKLOTO	AFIWA	MATRONE	MSP	KOUDZRAGAN	-	19-Jun-91	11-Mai-92
PLATEAUX	DAYES	AGBODJAN	TEVI	INFIRMIER	MSP	SASSANOU	01-Ao-90	01-Jun-91	23-Mai-92
PLATEAUX	DAYES	AVOU	ABRA	MATRONE	MSP	YIKPA	01-Ao-90	28-Mar-91	23-Mai-92
PLATEAUX	EST	ADOM	KOFFI	APS	MASCF	ELAVAGNON	01-Ao-90	10-Avr-91	20-Avr-92
PLATEAUX	MONO	BOUAGBE	AKOSSIWA	ACCOUCHEUSE	MSP	ELAVAGNON	01-Ao-90	-	-
PLATEAUX	EST	KALEGNO	AKUAVI	SAGE FEMME	MSP	ELAVAGNON	01-F'v-90	-	18-Mar-92
PLATEAUX	EST	KPATCHA	KOKOU	INFIRMIER	MSP	ELAVAGNON	01-Avr-90	01-Oct-90	24-Oct-91
PLATEAUX	EST	WOLOU	ADJOA	MATRONE	MSP	ISSATI	-	-	18-Mar-92
PLATEAUX	EST	OLODO	KOSSI	INFIRMIER	MSP	OGOUI KINPO	01-Ao-90	24-Mar-91	18-Mar-92
PLATEAUX	HAHO	AGBE	YAO	AGENT	MSP	ASSRAMA	-	10-Avr-91	04-Mar-92
PLATEAUX	HAHO	AGBOKANZO	LEGBENYO	MATRONE	MSP	ASSRAMA	05-D'c-90	14-Mar-91	06-Jun-92
PLATEAUX	HAHO	DOUMEGNO	KOSSI	APS	MASCF	ASSRAMA	24-Jul-90	10-Avr-91	04-Mai-92
PLATEAUX	HAHO	ZOUGLO	AKOUAVI	ACCOUCHEUSE	MSP	ASSRAMA	05-D'c-90	14-Mar-91	-
PLATEAUX	HAHO	VEJI	SIDALO	MATRONE	MSP	BATQUME	05-D'c-90	14-Mar-91	06-Jun-92
PLATEAUX	HAHO	GALLEY	YAWO	IDE	MSP	DALIA	05-Mar-89	05-Mar-90	06-Jun-92
PLATEAUX	HAHO	YOVOTSE	BOKOR	MATRONE	MSP	DALIA	05-D'c-90	14-Mar-91	06-Jun-92
PLATEAUX	HAHO	SEGBEFIA	ABRA	ACCOUCHEUSE	MSP	DJAMDE	27-Jul-90	17-Mar-91	06-Jun-92
PLATEAUX	HAHO	KPETESSO	AKOU	IDE	MSP	HAHOMEGBE	05-D'c-90	14-Mar-91	06-Jun-92
PLATEAUX	HAHO	ZAKOU	AMI	ACCOUCHEUSE	MSP	KAHIOU	05-D'c-90	14-Mar-91	-
PLATEAUX	HAHO	KOUDABOR	MANSSAH	ACCOUCHEUSE	MSP	KPEGNON	05-D'c-90	14-Mar-91	-

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	dates des formations recues		
							PEV	LMD/Palu	CPC/PF
PLATEAUX	HAHO	PAPPEY	KCKOU	INFIRMIER	MSP	KPOVE	05-D'c-90	14-Mar-91	06-Jun-92
PLATEAUX	HAHO	ADOYE	ADJELEGA N	SAGE FEMME	MSP	NOTSE	05-D'c-90	14-Mar-91	-
PLATEAUX	HAHO	AGBEMAVI	KOFFI EDEM	AGENT D'HYGIENE	MSP	NOTSE	01-Avr-90	24-Oct-90	26-Oct-91
PLATEAUX	HAHO	AHOLOU	AKOFO	SAGE FEMME	MSP	NOTSE	-	01-D'c-90	06-Jun-92
PLATEAUX	HAHO	AHOUN	ELJNAM	APS	MASCF	NOTSE	01-Avr-90	27-Oct-90	04-Mar-92
PLATEAUX	HAHO	ALEKE	KOSSI AKOFATO	AGENT D'HYGIENE	MSP	NOTSE	01-Avr-90	27-Oct-90	04-Mar-92
PLATEAUX	HAHO	AMA	AKOSSIWA	ACCOUCHEUSE	MSP	NOTSE	05-D'c-90	14-Mar-91	-
PLATEAUX	HAHO	AMEGAN	KOFFI	IDE	MSP	NOTSE	01-Avr-90	27-Oct-90	06-Jun-92
PLATEAUX	HAHO	ATOGNIMA	DESSIMA	INFIRMIER	MSP	NOTSE	05-D'c-90	14-Mar-91	-
PLATEAUX	HAHO	BIAKOU	ELJNAM	APS	MASCF	NOTSE	-	24-Oct-90	-
PLATEAUX	HAHO	KAVEY	KOKOU	AGENT D'HYGIENE	MSP	NOTSE	01-Jan-89	10-Avr-91	04-Mar-92
PLATEAUX	HAHO	KETOR	KOSSI SEMEFA	APS	MASCF	NOTSE	01-Avr-90	24-Oct-90	09-Nov-91
PLATEAUX	HAHO	KOSSI	AZIKI	ACCOUCHEUSE	MSP	NOTSE	-	-	14-Oct-91
PLATEAUX	HAHO	NOUWOME	YAWA	ATBEF	ONG	NOTSE	-	24-Oct-90	24-Oct-91
PLATEAUX	HAHO	OTOGBE	KOFFI	TSGS	MSP	NOTSE	01-Ao—90	24-Oct-90	04-Mar-92
PLATEAUX	HAHO	PERE	PALAKIYE WE	CSS	MASCF	NOTSE	24-Jul-90	24-Oct-91	-
PLATEAUX	HAHO	TATA-DEKU	SEENAM	AGENT D'HYGIENE	MSP	NOTSE	01-Avr-90	27-Oct-90	26-Oct-91
PLATEAUX	HAHO	TCHAGBELE	AKPO	TSGS	MSP	NOTSE	-	10-Avr-91	26-Oct-91
PLATEAUX	HAHO	TSOGBALE	MAWOUNA	CSS	MASCF	NOTSE	01-Avr-90	21-Oct-90	26-Oct-91
PLATEAUX	HAHO	YATA	ALEVI	ACCOUCHEUSE	MSP	NOTSE	05-D'c-90	14-Avr-91	-
PLATEAUX	HAHO	DJIGBE	KOSSI	INFIRMIER	MSP	PKEKPLEME	05-D'c-90	14-Mar-91	-
PLATEAUX	HAHO	AHQUETCHI	KOKOU	AGENT ITINERANT	MSP	TADO	05-D'c-90	14-Mar-91	-
PLATEAUX	HAHO	TOGAN	ABAYI	ACCOUCHEUSE	MSP	TADO	05-D'c-90	14-Mar-91	06-Jun-92
PLATEAUX	HAHO	AYAWOUGB E	AFONA	ACCOUCHEUSE	MSP	TETETOU	-	14-Mar-91	-
PLATEAUX	HAHO	LAWSON	LATE	IDE	MSP	TETETOU	-	-	06-Jun-92
PLATEAUX	HAHO	MAWOUGBE	DJIGBODI	MATRONE	MSP	TETETOU	05-D'c-90	-	06-Jun-92
PLATEAUX	HAHO	OURO-SAM A	BOZINAMB O	INFIRMIER	MSP	TETETOU	-	-	06-Jun-92
PLATEAUX	HAHO	AVOCHINO	AGBODEN ON	APS	MASCF	TOHOUN	-	24-Oct-90	-
PLATEAUX	HAHO	ALOU	YAO BIMEWAI	IDE	MSP	WAHALA	-	01-D'c-89	06-Jun-92
PLATEAUX	HAHO	AMEDIN	SENA	APS	MASCF	WAHALA	-	-	04-Mar-92
PLATEAUX	HAHO	GAGNON	SOGBADJI	APS	MASCF	WAHALA	24-Jul-90	10-Avr-91	-
PLATEAUX	HAHO	GNIKPANOU	MASSAN	ACCOUCHEUSE	MSP	WAHALA	05-D'c-90	-	-
PLATEAUX	HAHO	GOSSOU	KOKOU	AGENT ITINERANT	MSP	WAHALA	05-D'c-90	14-Mar-91	-
PLATEAUX	HAHO	ISSIFOU	YEKNI	APS	MASCF	WAHALA	24-Jul-90	10-Avr-91	04-Mar-92
PLATEAUX	HAHO	AHE	DEAPEME KPO	INFIRMIER	MSP	WUILEHOE	-	14-Mar-91	-
PLATEAUX	HAHO	GBOGBUI	SEWADE	IDE	MSP	WUILEHOE	05-D'c-90	14-Mar-91	06-Jun-92
PLATEAUX	HAHO	KOUAMI-DO KOU	DAPEAME KPO	MATRONE	MSP	WUILEHOE	05-D'c-90	-	06-Jun-92
PLATEAUX	KLOTO	ADJOR	LOLONYO	IDE	MSP	ADETA	-	28-Mar-91	-
PLATEAUX	KLOTO	ADZOR	LOLONYO	INFIRMIER	MSP	ADETA	01-Ao—90	05-Mar-91	11-Mar-92
PLATEAUX	KLOTO	EHO	AMA	SAGE FEMME	MSP	ADETA	01-Ao—90	28-Mar-91	11-Mar-92
PLATEAUX	KLOTO	PILAND	KOSSIWA	ACCOUCHEUSE	MSP	ADETA	-	28-Mar-91	-
PLATEAUX	KLOTO	AKPAKA	TSEVI	IDE	MSP	AGOME TOMEGBE	01-Avr-90	28-Mar-91	11-Mar-92
PLATEAUX	KLOTO	KONOU	ADJOA	MATRONE	MSP	AGOME TOMEGBE	31-Jul-90	07-Mar-91	11-Mar-92
PLATEAUX	KLOTO	TSEVI	AKPAKA	IDE	MSP	AGOME TOMEGBE	01-Ao—90	-	-
PLATEAUX	KLOTO	APETSIANYI	ABRA	MATRONE	MSP	AGOTIME	01-Ao—90	28-Mar-91	-
PLATEAUX	KLOTO	DACKY	DOVI	ACCOUCHEUSE	MSP	AGOU DOUVOU	-	28-Mar-91	-
PLATEAUX	KLOTO	NYANYO	ADZO	MATRONE	MSP	AGOU DOUVOU	-	-	16-Mar-92
PLATEAUX	KLOTO	AWUTE	AKOSSIWA	MATRONE	MSP	AGOU GADJA	01-Ao—90	04-Jun-91	16-Mar-92
PLATEAUX	KLOTO	JAMES	KOSSIWA	ACCOUCHEUSE	MSP	AGOU KLONOU	01-Ao—90	28-Mar-91	16-Mar-92

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	dates des formations recues		
							PEV	LMD/Palu	CPC/PF
PLATEAUX	KLOTO	AWUMEY	ADZO	ACCOUCHEUSE	MSP	AKATA AGAME	01-Avr-90	28-Mar-91	16-Mar-92
PLATEAUX	KLOTO	NYAHO	ENYONAM	MATRONE	MSP	AKATA AGAME	01-Ao-90	28-Mar-91	11-Mar-92
PLATEAUX	KLOTO	OURO-SAM A	ALI	INFIRMIER	MSP	AKATA AGAME	02-Ao-90	06-Mar-91	11-Mar-92
PLATEAUX	KLOTO	OURO-TAGB A	ALI	IDE	MSP	AKATA AGAME	-	28-Mar-91	-
PLATEAUX	KLOTO	HOUNKPATI	DOVI	MATRONE	MSP	ATCHAVE	01-Ao-90	28-Mar-91	11-Mar-92
PLATEAUX	KLOTO	AGBEKO	KOSSI	INFIRMIER	MSP	AVEYO KPETA	-	01-Jun-91	23-Mai-92
PLATEAUX	KLOTO	TSOGBE	ADZO	ACCOUCHEUSE	MSP	BETHESDA	01-Ao-90	28-Mar-91	-
PLATEAUX	KLOTO	KOUASSI	KOUAMI	INFIRMIER	MSP	BLIFOU	01-Oct-90	28-Mar-91	11-Mar-92
PLATEAUX	KLOTO	APETOA	EFFI	AGENT ITINERANT	MSP	DOUFEVE	-	28-Mar-91	-
PLATEAUX	KLOTO	DAGADOU	ADJO	ACCOUCHEUSE	MSP	FIABGE	-	28-Mar-91	-
PLATEAUX	KLOTO	AKAGBO	AMA	MATRONE	MSP	GADJAGAN	01-Ao-90	28-Mar-91	11-Mar-92
PLATEAUX	KLOTO	GBOTSU	AMA	ACCOUCHEUSE	MSP	GBALAVE	-	28-Mar-91	11-Mar-92
PLATEAUX	KLOTO	AGNAMANA	TAYEO	SAGE FEMME	MSP	GOUDEVE	01-Avr-90	05-Mar-91	11-Mar-92
PLATEAUX	KLOTO	GAHE	AFI	ACCOUCHEUSE	MSP	GOUDEVE	-	28-Mar-91	-
PLATEAUX	KLOTO	EKLU	ELOM	MATRONE	MSP	HANYGBA	01-Ao-90	28-Mar-91	11-Mar-92
PLATEAUX	KLOTO	GLUGBE	MAWULI	INFIRMIER	MSP	INFA	-	-	11-Mar-92
PLATEAUX	KLOTO	KLOLOE	ENYONAM	INFIRMIER	MSP	KBIME HLOMA	-	05-Mar-91	11-Mar-92
PLATEAUX	KLOTO	KPOHA	ADZOA	ACCOUCHEUSE	MSP	KLPELE-ELE	01-Ao-90	-	-
PLATEAUX	KLOTO	AHIADOU	ATSU	IDE	MSP	KOUMA KONDA	-	-	11-Mar-92
PLATEAUX	KLOTO	APENOU	AFIWAM	SAGE FEMME	MSP	KPADAPE	27-Jul-90	01-Jun-91	11-Mai-92
PLATEAUX	KLOTO	KPEGLO	ADJOWAM	ACCOUCHEUSE	MSP	KPADAPE	-	28-Mar-91	23-Mai-92
PLATEAUX	KLOTO	KPOGO	KOSSI	AGENT D'HYGIENE	MSP	KPADAPE	01-Ao-90	24-Avr-91	18-Mai-92
PLATEAUX	KLOTO	ADZIMA	SESIME	APS	MASCF	KPALIME	01-Ao-90	24-Avr-91	18-Mai-92
PLATEAUX	KLOTO	ADZRAH	GATO	IDE	MSP	KPALIME	-	28-Mar-91	11-Mai-92
PLATEAUX	KLOTO	AFITSE	APAKEME SI	SAGE FEMME	MSP	KPALIME	-	-	11-Mai-92
PLATEAUX	KLOTO	AGBODJAV ON	SEGLA	TSGS	MSP	KPALIME	01-Avr-90	-	-
PLATEAUX	KLOTO	AGBODJAV OU	AKPEVI	SAGE FEMME	MSP	KPALIME	01-Ao-90	-	-
PLATEAUX	KLOTO	AGBOGBOD O	AFANTCHA O	AGENT D'HYGIENE	MSP	KPALIME	01-Ao-90	24-Avr-91	04-Mar-92
PLATEAUX	KLOTO	ALOSSE	WOTOMEF A	AGENT D'HYGIENE	MSP	KPALIME	02-Ao-90	24-Avr-91	18-Mai-92
PLATEAUX	KLOTO	AMETONYE NOU	LOMALO	APS	MASCF	KPALIME	01-Ao-90	24-Avr-91	20-Mar-92
PLATEAUX	KLOTO	AMITOUJA NOU	GOME	APS	MASCF	KPALIME	02-Ao-90	-	-
PLATEAUX	KLOTO	ASSIGBEY	AGBELENYK O	TSGS	MSP	KPALIME	01-Avr-90	24-Oct-90	09-Nov-91
PLATEAUX	KLOTO	BATASCOM E	AHLOUKO BA	APS	MASCF	KPALIME	02-Ao-90	24-Avr-91	-
PLATEAUX	KLOTO	BESSAN	KPOJO	IDE	MSP	KPALIME	05-Jul-90	-	11-Mar-92
PLATEAUX	KLOTO	DZOMEDA	ENYONAM	ATBEF	ONG	KPALIME	-	24-Oct-90	24-Oct-91
PLATEAUX	KLOTO	EDZE	KOMLA	APS	MASCF	KPALIME	02-Ao-90	24-Oct-90	09-Nov-91
PLATEAUX	KLOTO	EKPE	MAWALAW OE	APS	MASCF	KPALIME	02-Ao-90	23-Avr-91	-
PLATEAUX	KLOTO	GOE	YAWO	APS	MASCF	KPALIME	02-Ao-90	24-Avr-91	18-Mar-92
PLATEAUX	KLOTO	HOR	DEDE	APS	MASCF	KPALIME	01-Ao-90	24-Avr-91	18-Mar-92
PLATEAUX	KLOTO	KEGBALO	AKOUAVI	AM	MSP	KPALIME	01-Avr-90	27-Oct-90	09-Nov-91
PLATEAUX	KLOTO	KONDO	BIBALO	AGENT D'HYGIENE	MSP	KPALIME	01-Avr-90	24-Oct-90	09-Nov-91
PLATEAUX	KLOTO	KONOU	ATSUPUI	APS	MASCF	KPALIME	-	24-Avr-90	14-Oct-91
PLATEAUX	KLOTO	KONOU	KWAMI	TSGS	MSP	KPALIME	01-Ao-90	24-Oct-90	18-Mar-92
PLATEAUX	KLOTO	KONU	ABRA	APS	MASCF	KPALIME	01-Ao-90	24-Oct-91	22-Mar-92
PLATEAUX	KLOTO	SOULEYMA NE	RAMATOU	APS	MASCF	KPALIME	01-Avr-90	27-Oct-90	09-Nov-91
PLATEAUX	KLOTO	SUNU	MAWJENA	IDE	MSP	KPALIME	-	28-Mar-91	-
PLATEAUX	KLOTO	TANGAO	AFIROUWA	ACCOUCHEUSE	MSP	KPALIME	10-Jun-90	28-Mar-91	16-Mar-92
PLATEAUX	KLOTO	TCHEDRE	SARIFATO U	SAGE FEMME	MSP	KPALIME	-	-	11-Mar-92
PLATEAUX	KLOTO	YENTCHAR E	TCHABINA NDI	APS	MASCF	KPALIME	01-Ao-90	24-Avr-91	18-Mar-92

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ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	Dates des formations reçues		
							PEV	LMD/Palu	CPC/PF
PLATEAUX	KLOTO	DEY	HOLA	APS	MASCF	KPELE ADETA	01-Ao-90	24-Avr-91	18-Mar-92
PLATEAUX	KLOTO	MESSAN	KODJO	AGENT D'HYGIENE	MSP	KPELE ADETA	-	24-Avr-91	20-Avr-92
PLATEAUX	KLOTO	NYASSOGB O	YAWO	APS	MASCF	KPELE ADETA	01-Ao-90	24-Avr-91	18-Mar-92
PLATEAUX	KLOTO	DAMOUDOU	SABI	IDE	MSP	KPELE AGAVE	31-Jul-90	15-F'v-91	15-Mar-92
PLATEAUX	KLOTO	FIABI	ESSMI	MATRONE	MSP	KPELE AGAVE	01-Ao-90	28-Mar-91	11-Mar-92
PLATEAUX	KLOTO	AKPANI	ENYONAM	APS	MASCF	KPELE DAFO	01-Jan-89	01-Mar-91	20-Avr-92
PLATEAUX	KLOTO	TAGBA	FAYAMAHI RE	APS	MASCF	KPELE DAFON	-	24-Avr-91	-
PLATEAUX	KLOTO	AWESSO	MANBAYE NE	ACCOUCHEUSE	MSP	KPELE ELE	01-Ao-90	14-D'c-90	11-Mar-92
PLATEAUX	KLOTO	KISSI	KOMI	AGENT D'HYGIENE	MSP	KPELE ELE	01-Ao-90	24-Avr-91	18-Mar-92
PLATEAUX	KLOTO	MEDEBOU	GBOYOU	INFIRMIER	MSP	KPELE ELE	01-Ao-90	28-Mar-91	11-Mar-92
PLATEAUX	KLOTO	NYAKU	MANA AYOVI	APS	MASCF	KPELE ELE	-	-	22-Mar-92
PLATEAUX	KLOTO	MEGBEWOK PO	BLEWUSSI	IDE	MSP	KPELE GOUDEVE	01-Ao-90	28-Mar-91	11-Mar-92
PLATEAUX	KLOTO	KODJO	ASSAMOU A	ACCOUCHEUSE	MSP	KPELE TUTU	05-Ao-90	08-Mar-91	11-Mar-92
PLATEAUX	KLOTO	KEDYA	ESSODEIN A	IDE	MSP	KPIME-HLOM	01-Ao-90	23-Mar-91	-
PLATEAUX	KLOTO	GOKA	AMA	ACCOUCHEUSE	MSP	KPOGANDJI	-	28-Mar-91	16-Mar-92
PLATEAUX	KLOTO	NYANYI	ABRA	MATRONE	MSP	KUMA ADAME	-	28-Mar-91	16-Mar-92
PLATEAUX	KLOTO	AMETEPE	YAWA	MATRONE	MSP	KUMA APOTI	05-Jul-90	01-Mar-91	11-Mar-92
PLATEAUX	KLOTO	DOWU	KODZO	IDE	MSP	KUMA APOTI	-	-	11-Mar-92
PLATEAUX	KLOTO	DAVIE	AKOKO	ACCOUCHEUSE	MSP	KUMA KONDA	31-Jul-90	15-F'v-91	11-Mar-92
PLATEAUX	KLOTO	GUIDI	KODZO	AGENT D'HYGIENE	MSP	KUMA KONDA	02-Ao-90	24-Avr-91	18-Mar-92
PLATEAUX	KLOTO	SAKPA	AKPEDJE	ACCOUCHEUSE	MSP	KUMA KONDA	01-Ao-90	-	-
PLATEAUX	KLOTO	AGBANDA	YOMAH	INFIRMIER	MSP	LAVIE	02-Ao-90	01-F'v-89	15-Mar-92
PLATEAUX	KLOTO	ALOKPA	AFOUA	MATRONE	MSP	LAVIE	01-Ao-90	28-Mar-91	11-Mar-92
PLATEAUX	KLOTO	WAUADI	AMA	MATRONE	MSP	LAVIE	-	-	11-Mar-92
PLATEAUX	KLOTO	EDOKOSSI	ADJO	MATRONE	MSP	WAMAKOPE	-	01-Mar-91	11-Mar-92
PLATEAUX	KLOTO	AKPAWU	MENDAH	IDE	MSP	NYGBO	01-Ao-90	-	-
PLATEAUX	KLOTO	DOUTSONO U	AMA	MATRONE	MSP	NYIVE	-	19-Mar-91	16-Mar-92
PLATEAUX	KLOTO	SOKPO	AFI	MATRONE	MSP	NYIVE	-	28-Mar-91	23-Mar-92
PLATEAUX	KLOTO	TEKPOR	KOMLAVI	INFIRMIER	MSP	NYUEMABU	01-Ao-90	28-Mar-91	11-Mar-92
PLATEAUX	KLOTO	GBLOKPOR	KWAKOU	APS	MASCF	WAME	02-Ao-90	24-Avr-91	18-Mar-92
PLATEAUX	KLOTO	LATEVI	ABRA	ACCOUCHEUSE	MSP	WAME	-	-	23-Mar-92
PLATEAUX	KLOTO	ADETOU	DZOWONU	IDE	MSP	YIKPA	-	27-Oct-90	-
PLATEAUX	KLOTO	KAGLA	AMA	ACCOUCHEUSE	MSP	YOKELE	-	28-Mar-91	15-Mar-92
PLATEAUX	VOYEN MONO	AMOZOU	ADJO	ACCOUCHEUSE	MSP	AHASSOME	31-Jul-90	01-D'c-90	06-Jun-92
PLATEAUX	VOYEN MONO	ESSEDO	YAWO	INFIRMIER	MSP	AHASSOME	05-D'c-90	14-Mar-91	06-Jun-92
PLATEAUX	VOYEN MONO	AMEGOUYIB OR	ABLAVI	MATRONE	MSP	KPEKPLEME	-	05-Mar-90	06-Jun-92
PLATEAUX	VOYEN MONO	DZIGBE	KOSSI	IDE	MSP	KPEKPLEME	-	01-Jan-89	06-Jun-92
PLATEAUX	VOYEN MONO	AKODEDJR O	TCHOEDE	AGENT D'HYGIENE	MSP	NYAMASSILA	24-Jul-90	10-Avr-91	24-Avr-92
PLATEAUX	VOYEN MONO	GBOBADA	KOSSI	IDE	MSP	TADO	-	24-Avr-91	06-Jun-92
PLATEAUX	VOYEN MONO	AGLE	SEWONOU	AGENT D'HYGIENE	MSP	TOHOUN	27-Jul-90	-	26-Oct-91
PLATEAUX	VOYEN MONO	AMEGADJE	KUMA	AGENT D'HYGIENE	MSP	TOHOUN	05-D'c-90	14-Mar-91	26-Oct-91
PLATEAUX	VOYEN MONO	BOKO	AFOUA	INFIRMIER	MSP	TOHOUN	-	24-Avr-91	-
PLATEAUX	VOYEN MONO	D'ALMEIDA	AKOUAVI	SAGE FEMME	MSP	TOHOUN	01-Avr-90	24-Oct-90	25-Oct-91
PLATEAUX	VOYEN MONO	GBEKE	ESSEINAM	AGENT D'HYGIENE	MSP	TOHOUN	31-Jul-90	01-Oct-90	25-Oct-91

ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	Dates des formations recus		
							PEV	LMD/Palu	CPC/PF
PLATEAUX	VOYEN	KOKOU-ABI	DJITO	AM	MSP	TOHOUN	01-Avr-90	02-Fv-89	25-Oct-91
PLATEAUX	VOYEN	KOLOU	ABALO	AGENT D'HYGIENE	MSP	TOHOUN	01-Avr-90	27-Oct-90	.
PLATEAUX	VOYEN	KOUDAYA	KOKOU	AGENT D'HYGIENE	MSP	TOHOUN	24-Jul-90	24-Oct-90	.
PLATEAUX	VOYEN	MESSAN	AYAYI	IDE	MSP	TOHOUN	.	.	06-Jun-92
PLATEAUX	VOYEN	MODJINOU	KODJOKU	APS	MASCF	TOHOUN	01-Avr-90	27-Oct-90	26-Oct-91
PLATEAUX	VOYEN	VIGLO	ABRA	ACCOUCHEUSE	MSP	TOHOUN	01-Avr-90	31-Oct-90	05-Jun-92
PLATEAUX	OGOU	ABOU	HADETE	ACCOUCHEUSE	MSP	ADOGBENON	01-Ao-90	14-D'c-90	18-Mai-92
PLATEAUX	OGOU	ALOSSE	MATUWO	IDE	MSP	ADOGBENON	01-Ao-90	14-D'c-90	18-Mai-92
PLATEAUX	OGOU	BAKOMA	GNIKOUMA	IDE	MSP	AGBONOU	02-Ao-90	21-Mar-91	18-Mai-92
PLATEAUX	OGOU	LIASSOU	SOUMANO	AGENT ITINERANT	MSP	AGBONOU	02-Ao-90	.	.
PLATEAUX	OGOU	MANEDI	ALODOME	ACCOUCHEUSE	MSP	AGBONOU	.	05-Mar-91	18-Mai-92
PLATEAUX	OGOU	BODE	ATAKORA	INFIRMIER	MSP	AKOBA	22-Jun-90	24-Avr-91	18-Mai-92
PLATEAUX	OGOU	ETCHE OFLY	YAWA	ACCOUCHEUSE	MSP	AKOBA	.	.	18-Mai-92
PLATEAUX	OGOU	BOUKPESSI	PAOULAM E	INFIRMIER	MSP	AKPARE	22-Jun-90	21-Mai-91	18-Mai-92
PLATEAUX	OGOU	NABASSI	AMINA	MATRONE	MSP	AKPARE	02-Ao-90	21-Mai-91	18-Mai-92
PLATEAUX	OGOU	ASSAGBA	AYABA	SAGE FEMME	MSP	ANIE	.	21-Nov-90	.
PLATEAUX	OGOU	BANABOKO	SATO	APS	MASCF	ANIE	01-Avr-90	10-Avr-91	26-Oct-91
PLATEAUX	OGOU	BAYODA	ABONGO	IDE	MSP	ANIE	02-Ao-90	.	.
PLATEAUX	OGOU	ETCHOU	KENOUVI	IDE	MSP	ANIE	02-Ao-90	20-Mar-91	18-Mai-92
PLATEAUX	OGOU	KOFFI	DELAKO	AGENT D'HYGIENE	MSP	ANIE	.	25-Nov-90	20-Oct-91
PLATEAUX	OGOU	TOGBE	YABA	SAGE FEMME	MSP	ANIE	05-Mar-90	25-Mar-91	18-Mai-92
PLATEAUX	OGOU	ABOTSI	KOSSI	APS	MASCF	ATAKPAME	24-Jul-90	.	20-Avr-92
PLATEAUX	OGOU	ADJEDDA	CELESTIN E	MATRONE	MSP	ATAKPAME	.	.	18-Mai-92
PLATEAUX	OGOU	AGBOKPA	ATSOU	AGENT D'HYGIENE	MSP	ATAKPAME	17-Jul-90	08-Mar-91	20-Avr-92
PLATEAUX	OGOU	AGOUSSE	KINALIA	APS	MASCF	ATAKPAME	01-Sep-90	10-Avr-91	20-Avr-92
PLATEAUX	OGOU	AHARRH-GN AMA	DONIME	APS	MASCF	ATAKPAME	24-Jul-90	10-Avr-91	20-Mai-92
PLATEAUX	OGOU	AJAVON	KOMI	AGENT D'HYGIENE	MSP	ATAKPAME	.	24-Avr-91	.
PLATEAUX	OGOU	AKOGO	YAWA	APS	MASCF	ATAKPAME	24-Jul-90	10-Avr-91	.
PLATEAUX	OGOU	AKOLOR	DJATOUGB E	IDE	MSP	ATAKPAME	01-Avr-90	24-Oct-90	.
PLATEAUX	OGOU	AMEGAN	ABLEWA	APS	MASCF	ATAKPAME	01-Ao-90	10-Avr-91	20-Avr-92
PLATEAUX	OGOU	APEDO-ATTI	OBIDON	ATBEF	ONG	ATAKPAME	.	24-Oct-90	24-Oct-91
PLATEAUX	OGOU	ASSAGBA	DJIGBODI	AGENT D'HYGIENE	MSP	ATAKPAME	01-Mar-91	24-Oct-90	20-Avr-92
PLATEAUX	OGOU	AYENA	KOSSI	APS	MASCF	ATAKPAME	24-Jul-90	10-Avr-91	.
PLATEAUX	OGOU	BOUARI	SOULEMA NE	APS	MASCF	ATAKPAME	.	24-Oct-90	25-Oct-91
PLATEAUX	OGOU	BOYODE	MANI	IDE	MSP	ATAKPAME	02-Ao-90	.	.
PLATEAUX	OGOU	BRUCE	DODJI	AGENT D'HYGIENE	MSP	ATAKPAME	01-Ao-90	10-Avr-91	22-Oct-91
PLATEAUX	OGOU	DAGBENYO	MAWALI	APS	MASCF	ATAKPAME	24-Jul-90	10-Avr-91	.
PLATEAUX	OGOU	EWOVON-M ENSAH	SENYA	APS	MASCF	ATAKPAME	01-Ao-90	.	20-Avr-92
PLATEAUX	OGOU	FANTODJI	ABOYI	APS	MASCF	ATAKPAME	.	10-Avr-91	.
PLATEAUX	OGOU	GNAMASSO U	AWOKOU	CSS	MASCF	ATAKPAME	24-Jul-90	24-Oct-90	26-Oct-91
PLATEAUX	OGOU	HOEDE	OBOYI	APS	MASCF	ATAKPAME	01-Ao-90	01-Avr-91	20-Avr-92
PLATEAUX	OGOU	KAGNI	ADJOA	AGENT D'HYGIENE	MSP	ATAKPAME	24-Jul-90	.	20-Avr-92
PLATEAUX	OGOU	KASSIME	OSSEYI	APS	MASCF	ATAKPAME	.	.	20-Avr-92
PLATEAUX	OGOU	KLUTSE	ABLEWA	APS	MASCF	ATAKPAME	24-Jul-90	.	.
PLATEAUX	OGOU	KOFFI	AFATSAW O	TSGS	MSP	ATAKPAME	24-Jul-90	10-Avr-91	20-Avr-92

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	dates des formations recues		
							PEV	LMD/Palu	CPC/PF
PLATEAUX	OGOU	KPELTI	KOSSIKUM A	APS	MASCF	ATAKPAME	-	10-Avr-91	20-Avr-92
PLATEAUX	OGOU	KPETSU	AKUM	IDE	MSP	ATAKPAME	02-Ao-90	-	18-Mai-92
PLATEAUX	OGOU	KPODAR	AYCKO	SAGE FEMME	MSP	ATAKPAME	05-Mar-90	-	18-Mai-92
PLATEAUX	OGOU	MENSAH	SENYA	APS	MASCF	ATAKPAME	24-Jul-90	10-Avr-91	-
PLATEAUX	OGOU	MAMA	ATEMA	APS	MASCF	ATAKPAME	01-Mar-90	10-Avr-91	20-Avr-92
PLATEAUX	OGOU	ODJABA	AMA	INFIRMIER	MSP	ATAKPAME	02-Ao-90	-	-
PLATEAUX	OGOU	OKOUTA	BIAYEWA	AM	MSP	ATAKPAME	01-Avr-90	24-Oct-90	26-Oct-91
PLATEAUX	OGOU	SODOKE	KAFUI	APS	MASCF	ATAKPAME	01-Ao-90	10-Avr-91	20-Avr-92
PLATEAUX	OGOU	TOMFAYA	YANDI	AGENT D'HYGIENE	MSP	ATAKPAME	24-Jul-90	-	-
PLATEAUX	OGOU	TOSSOU	AFOUA	ACCOUCHEUSE	MSP	ATAKPAME	-	28-D'c-90	-
PLATEAUX	OGOU	WOLOU	DJAMBA	AGENT D'HYGIENE	MSP	ATAKPAME	24-Jul-90	-	-
PLATEAUX	OGOU	TIGNOKPA	LAMATOU	ACCOUCHEUSE	MSP	ATCHINEDE	01-Ao-90	14-D'c-90	-
PLATEAUX	OGOU	ZIDAH	TONYEVA DJ	INFIRMIER	MSP	ATCHINEDE	01-Ao-90	23-Mar-91	18-Mai-92
PLATEAUX	OGOU	APEKOU	AMOUZOU	AGENT D'HYGIENE	MSP	BOCCO	02-Ao-90	-	-
PLATEAUX	OGOU	DABONI	KOFFI	INFIRMIER	MSP	BOCCO	01-Oct-90	25-Mar-91	18-Mai-92
PLATEAUX	OGOU	SEDOU	ADJAWA	ACCOUCHEUSE	MSP	DATCHA	05-Mar-90	-	18-Mai-92
PLATEAUX	OGOU	SEWODO	KOMLA	IDE	MSP	DATCHA	02-Ao-90	-	18-Mai-92
PLATEAUX	OGOU	DALARE	TABOEUO	APS	MASCF	GLEI	24-Jul-90	10-Avr-91	-
PLATEAUX	OGOU	DJOKO	MAWULI	AGENT D'HYGIENE	MSP	GLEI	01-Avr-90	24-Oct-90	26-Oct-91
PLATEAUX	OGOU	DOH	ELI	ACCOUCHEUSE	MSP	GLEI	02-Ao-90	14-Mai-91	18-Mai-92
PLATEAUX	OGOU	FIAWUMO	YAWO	IDE	MSP	GLEI	02-Ao-90	27-Jul-90	18-Mai-92
PLATEAUX	OGOU	HESSOU	MAWULE	APS	MASCF	GLEI	01-Avr-90	24-Oct-90	26-Oct-91
PLATEAUX	OGOU	KOUAMI	TABOENO	APS	MASCF	GLEI	01-Ao-90	01-Oct-91	20-Avr-92
PLATEAUX	OGOU	MANDJE	ESSEHO	MATRONE	MSP	GLITTO	-	-	18-Mai-92
PLATEAUX	OGOU	TCHALLA	AKODA	AGENT ITINERANT	MSP	GLITTO	02-Ao-90	14-Mai-91	18-Mai-92
PLATEAUX	OGOU	ABALO	YAOU	INFIRMIER	MSP	KAMINA	-	01-Jul-91	15-Mai-92
PLATEAUX	OGOU	KOUNOUGB E	KOMI	AGENT ITINERANT	MSP	KELEKPE	02-Ao-90	-	-
PLATEAUX	OGOU	OTOUFO	KOSSI	AGENT ITINERANT	MSP	KELEKPE	02-Ao-90	21-Mar-91	18-Mai-92
PLATEAUX	OGOU	AMEDEKPO	ADIGLA	IDE	MSP	KOLOKOPE	02-Ao-90	24-Mai-91	18-Mai-92
PLATEAUX	OGOU	DAWOU	AKOSSIAWA	MATRONE	MSP	KOLOKOPE	01-Ao-90	14-D'c-90	18-Mai-92
PLATEAUX	OGOU	SAMA	KORIKO	MATRONE	MSP	KPELEKPE	-	-	18-Mai-92
PLATEAUX	OGOU	ASSOGBA	AKOUAVI	MATRONE	MSP	KPESSI	26-Jan-90	23-Mar-91	18-Mai-92
PLATEAUX	OGOU	YOLA	KOUAMI	IDE	MSP	KPESSI	01-Ao-90	14-D'c-90	-
PLATEAUX	OGOU	AMOUZOU	AFIWA	MATRONE	MSP	MORETAN	-	-	18-Mai-92
PLATEAUX	OGOU	ATTROH	ABDOU	INFIRMIER	MSP	MORETAN	01-Ao-90	14-D'c-90	-
PLATEAUX	OGOU	DJANGBO	KOKOU	AGENT ITINERANT	MSP	MORETAN	01-Ao-90	14-D'c-90	-
PLATEAUX	OGOU	GAGNE	KOMLAVI	IDE	MSP	MORETAN	01-Ao-90	14-D'c-90	18-Mai-92
PLATEAUX	OGOU	BAWENA	ALIDJATO	AGENT ITINERANT	MSP	NYAMASSI	-	-	18-Mai-92
PLATEAUX	OGOU	HELIM	ESSOHAN AM	IDE	MSP	NYAMASSI	01-Ao-90	-	-
PLATEAUX	OGOU	KOURA	YAWA	MATRONE	MSP	NYAMASSI	01-Ao-90	25-Mar-91	18-Mai-92
PLATEAUX	OGOU	ALODO	KOSSI	IDE	MSP	OGOUKINK	-	14-D'c-90	-
PLATEAUX	OGOU	AWADI	FORIA	AGENT ITINERANT	MSP	OGOUKINK	01-Ao-90	14-D'c-90	-
PLATEAUX	OGOU	ALI DJATO	LAMBELOU	MATRONE	MSP	OUINTVOU	-	-	18-Mai-92
PLATEAUX	OGOU	AZALEKO	AYAOWAVI	IDE	MSP	OUINTVOU	02-Ao-90	-	-
PLATEAUX	OGOU	DOSSE	N'BOUKE	IDE	MSP	OUINTVOU	01-Ao-90	05-Mar-91	18-Mai-92
PLATEAUX	OGOU	FOLLY	KOUDOYO R	AGENT ITINERANT	MSP	OUINTVOU	-	16-Mar-91	-
PLATEAUX	OGOU	AMEVO	HOUÉVI	MATRONE	MSP	PALLAKOKO	01-Mar-90	21-Mar-91	18-Mai-92
PLATEAUX	OGOU	FALOU	YAMOA	INFIRMIER	MSP	PALLAKOKO	02-Ao-90	21-Mar-91	18-Mai-92
PLATEAUX	WAWA	KODOGBE	UDIA	MATRONE	MSP	ADOMI ABRA	-	08-Mar-91	25-Mar-92
PLATEAUX	WAWA	OGA	ADJOWARI	MATRONE	MSP	AGBOKOPE	-	-	25-Mar-92
PLATEAUX	WAWA	ADOSSI	MENSAH	IDE	MSP	BADOU	31-Jul-90	15-F'v-91	18-Mai-92
PLATEAUX	WAWA	AGBENANU AME	AMEDZAM E	APS	MASCF	BADOU	01-Ao-90	10-Avr-91	20-Avr-92

ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	dates des formations recues		
							PEV	LMD/Palu	CPC/PF
PLATEAUX	WAWA	AGORO	SEIBOU	IDE	MSP	BADOU	-	-	18-Mar-92
PLATEAUX	WAWA	AKPE	SOKPOLI	AGENT	MSP	BADOU	01-Jul-90	17-Mar-91	24-Mar-92
PLATEAUX	WAWA	ATSOU	ZEWOU	D'HYGIENE					
PLATEAUX	WAWA	MALEKPO	ACCOCHEUSE	MSP	BADOU	02-Ao-90	-	-	
PLATEAUX	WAWA	BANOUGNIN	DJIMA	AGENT	MSP	BADOU	24-Jul-90	-	-
PLATEAUX	WAWA	BENYO	KOUASSI	D'HYGIENE					
PLATEAUX	WAWA	BESSAH	AGENT	MSP	BADOU	01-Avr-90	21-Oct-90	25-Oct-91	
PLATEAUX	WAWA	BESSAH	WAWULI	SAGE FEMME	MSP	BADOU	02-Ao-90	-	-
PLATEAUX	WAWA	BIYAO	ALEDJI	AGENT	MSP	BADOU	02-Ao-90	-	18-Mar-92
PLATEAUX	WAWA	BONOUGNIN	DJIMA	ITINERANT					
PLATEAUX	WAWA	BONOUGNIN	DJIMA	AGENT	MSP	BADOU	-	10-Avr-91	-
PLATEAUX	WAWA	BOSSIADÉ	ABRA	D'HYGIENE					
PLATEAUX	WAWA	BOURAIMA	ACCOCHEUSE	MSP	BADOU	02-Ao-90	-	-	
PLATEAUX	WAWA	BOURAIMA	SSAKA	IDE	MSP	BADOU	02-Ao-90	-	-
PLATEAUX	WAWA	BYAO	ALEDJI	AM	MSP	BADOU	02-Ao-90	-	-
PLATEAUX	WAWA	D'ALMEIDA	KOKOE	AM	MSP	BADOU	01-Jul-90	24-Oct-90	24-Oct-91
PLATEAUX	WAWA	DODJI	DODJI						
PLATEAUX	WAWA	EFOE-AGOZOH	DJATOUGBE	SAGE FEMME	MSP	BADOU	-	-	18-Mar-92
PLATEAUX	WAWA	EGLELOH	ALOLI	MATRONE	MSP	BADOU	-	05-Mai-91	25-Mar-92
PLATEAUX	WAWA	KPOGNO	EYA	SAGE FEMME	MSP	BADOU	01-Ao-90	-	-
PLATEAUX	WAWA	LAWADAN	KOFFI	LASS	MASCF	BADOU	01-Avr-90	24-Oct-90	26-Oct-91
PLATEAUX	WAWA	LELOUA	ANKOU	LABORANTIN	MSP	BADOU	02-Ao-90	-	-
PLATEAUX	WAWA	MELEBOU	AKPENG	IDE	MSP	BADOU	02-Ao-90	-	-
PLATEAUX	WAWA	MYASSEM	KOMLAN	AGENT	MSP	BADOU	02-Ao-90	-	-
PLATEAUX	WAWA	NYAMESSI	AMEYO	ITINERANT					
PLATEAUX	WAWA	NYAZOZO	PKANDA	APS	MASCF	BADOU	01-Sep-90	10-Avr-91	20-Avr-92
PLATEAUX	WAWA	NYAZOZO	PKANDA	ACCOCHEUSE	MSP	BADOU	-	-	25-Mai-92
PLATEAUX	WAWA	OKOUMA	AKOSSI	ATBEF	ONG	BADOU	-	-	20-Avr-92
PLATEAUX	WAWA	SOGBADJI	COMLAN	IDE	MSP	BADOU	02-Ao-90	-	-
PLATEAUX	WAWA	ZOZO	KOSSI	TSGS	MSP	BADOU	01-Avr-90	21-Oct-90	-
PLATEAUX	WAWA	DEKAKPATEMA	KELOU	APS	MASCF	BENALI	01-Jan-91	10-Avr-91	20-Avr-92
PLATEAUX	WAWA	KOKO	AKOSSIWA	ACCOCHEUSE	MSP	BENALI	-	30-Mar-91	18-Mai-92
PLATEAUX	WAWA	KOUGBLENOU	KOSSIWA	ACCOCHEUSE	MSP	BENALI	-	08-Mar-91	-
PLATEAUX	WAWA	DJAGBAVI	AMAVI	ACCOCHEUSE	MSP	BROUNFOU	02-Ao-90	-	-
PLATEAUX	WAWA	TSE-KWAMI	DEGBEO	AGENT	MSP	BROUNFOU	01-Mar-91	30-Mar-90	18-Mai-92
PLATEAUX	WAWA	AGBEYEGI	ADJOA	ITINERANT					
PLATEAUX	WAWA	AGBEYEGI	ADJOA	ACCOCHEUSE	MSP	DJON	-	-	25-Mai-92
PLATEAUX	WAWA	ABOTCHI	KOFFI	IDE	MSP	DJON KOTORA	31-Jul-90	25-Avr-91	18-Mai-92
PLATEAUX	WAWA	AGBENYEGAN	ADJOA	ACCOCHEUSE	MSP	DJON-KOTOR	-	08-Mar-91	-
PLATEAUX	WAWA	EPOH	AMAVI	MATRONE	MSP	DOUME	-	08-Mar-91	18-Mai-92
PLATEAUX	WAWA	HOBIAH	ADJOA	ACCOCHEUSE	MSP	EKETO	-	30-Mar-91	25-Mai-92
PLATEAUX	WAWA	KLOU	AKOUI	ACCOCHEUSE	MSP	EKETO	-	08-Mar-91	25-Mai-92
PLATEAUX	WAWA	KALIDJE	DJIGBODI	ACCOCHEUSE	MSP	ENAWOE	-	08-Mar-91	-
PLATEAUX	WAWA	AYIBIAKOU	AKOUA	MATRONE	MSP	GAWOITE	-	05-Mar-91	25-Mai-92
PLATEAUX	WAWA	AHLOU	EGBELE	ACCOCHEUSE	MSP	GOBE	02-Ao-90	05-Mar-89	25-Mai-92
PLATEAUX	WAWA	SASSOU	KOSSI	IDE	MSP	GOBE	02-Ao-90	-	-
PLATEAUX	WAWA	BODJONA	BASSAI	INFIRMIER	MSP	MOUSE-OU DJE	05-Avr-90	-	18-Mai-92
PLATEAUX	WAWA	AMOUZOU	AKLESSI	AGENT	MSP	INOUSSA	12-Jun-88	-	18-Mai-92
PLATEAUX	WAWA	DIAPENA	AMAVI	ITINERANT					
PLATEAUX	WAWA	DIAPENA	AMAVI	ACCOCHEUSE	MSP	INOUSSA	02-Ao-90	-	-
PLATEAUX	WAWA	DOTCHE	KOWUH	IDE	MSP	KAMINA	-	30-Mar-91	18-Mai-92
PLATEAUX	WAWA	AGOSSA	KOSSIWA	ACCOCHEUSE	MSP	KLABE	02-Ao-90	-	25-Mai-92
PLATEAUX	WAWA	BOGNON	KOFFI	INFIRMIER	MSP	KLABE	-	01-Mar-90	18-Mai-92
PLATEAUX	WAWA	KOULOUMA	KOSSI	IDE	MSP	KLABE	02-Ao-90	-	-
PLATEAUX	WAWA	MAETSOKO	YAUANI	ACCOCHEUSE	MSP	KLABE	-	-	25-Mai-92
PLATEAUX	WAWA	TOUGAN	KOMI	APS	MASCF	KLABE	24-Jul-90	10-Avr-91	04-Mai-92
PLATEAUX	WAWA	TOULEASSI	KOSSIWA	ACCOCHEUSE	MSP	KLABE	02-Ao-90	-	-
PLATEAUX	WAWA	AHALEY	YAWO	IDE	MSP	KOUGNOHOU	02-Ao-90	08-Mar-91	21-Mai-92
PLATEAUX	WAWA	AZIATROGA	TOGBE	AGENT	MSP	KOUGNOHOU	24-Jul-90	10-Avr-91	-
PLATEAUX	WAWA	BASSIADÉ	ABRA	D'HYGIENE					
PLATEAUX	WAWA	BASSIADÉ	ABRA	ACCOCHEUSE	MSP	KOUGNOHOU	04-Mar-89	-	25-Mai-92
PLATEAUX	WAWA	DELALI	DELALI						

ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	dates des formations recus		
							PEV	LMD/Palu	CPC/PF
PLATEAUX	WAWA	BOATENG	YAO	AGENT ITINERANT	MSP	KOUGNOHOU	02-Ao-90	-	-
PLATEAUX	WAWA	OLANLO	KOUTNOU	APS	MASCF	KOUGNOHOU	24-Jul-90	10-Avr-91	-
PLATEAUX	WAWA	TOGBE	AZIATROG A	AGENT D'HYGIENE	MSP	KOUGNOHOU	-	-	04-Mai-92
PLATEAUX	WAWA	ATTIOGBE	ASSIONGB ON	IDE	MSP	KPETE BENA	01-Sep-91	14-Mar-91	18-Mar-92
PLATEAUX	WAWA	DZODZABU	ANKU	AGENT D'HYGIENE	MSP	KPETE BENA	02-Ao-90	-	-
PLATEAUX	WAWA	EDOUTSO	ATSU	AGENT D'HYGIENE	MASCF	KPETE BENA	-	10-Avr-91	04-Mai-92
PLATEAUX	WAWA	KODJENE	KOSSIWA	MATRONE	MSP	KPETE BENA	02-Ao-90	-	25-Mai-92
PLATEAUX	WAWA	AKUATSE	WOTSA	ACCOUCHEUSE	MSP	OKOU	02-Ao-90	-	22-Mai-92
PLATEAUX	WAWA	KOFFI	AGOWU	IDE	MSP	OKOU	-	24-Avr-91	18-Mai-92
PLATEAUX	WAWA	KODJO	YAWA	ACCOUCHEUSE	MSP	OUNABE	-	30-Mar-91	25-Mai-92
PLATEAUX	WAWA	FIAKE	EYA	ACCOUCHEUSE	MSP	SEREBBENE	-	08-Mar-91	18-Mai-92
PLATEAUX	WAWA	PARGO	BAMAZE	INFIRMIER	MSP	SEREBBENE	01-Sep-91	-	18-Mar-92
PLATEAUX	WAWA	TAGNEDI	AKOUA	MATRONE	MSP	TODOME	-	08-Mar-91	18-Mai-92
PLATEAUX	WAWA	AZOU	KPEHOU	APS	MASCF	TOMEGBE	01-Avr-90	24-Oct-90	26-Oct-91
PLATEAUX	WAWA	DAKU	NUTEPE	IDE	MSP	TOMEGBE	02-Ao-90	-	18-Mar-92
PLATEAUX	WAWA	DOTCHE	KOWUH	IDE	MSP	TOMEGBE	02-Ao-90	-	-
PLATEAUX	WAWA	FADOU	ABRA	SAGE FEMME	MSP	TOMEGBE	-	-	25-Mai-92
PLATEAUX	WAWA	LAWSON-HE LLU	KAYSSAN	SAGE FEMME	MSP	TOMEGBE	-	08-Mar-91	-
PLATEAUX	WAWA	AKPENE	KOSSI	ACCOUCHEUSE	MSP	VEH N KOUGNA	-	08-Mar-91	25-Mai-92
PLATEAUX	WAWA	FRICOH	KOKOU	AGENT ITINERANT	MSP	WODAGNI	02-Ao-90	01-Oct-90	18-Mai-92
PLATEAUX	WAWA	MISRE	ANYONAM	MATRONE	MSP	WODAGNI	02-Ao-90	-	25-Mai-92
PLATEAUX	WAWA	AMENDE	AKON	MATRONE	MSP	YALLA	-	-	25-Mai-92
PLATEAUX	WAWA	LANZO	AKAKPO	IDE	MSP	YALLA	02-Ao-90	30-Mai-91	18-Mai-92
PLATEAUX	WAWA	YAKPO	AFUA	MATRONE	MSP	ZOGBEGAN	12-Jul-88	08-Mar-91	18-Mai-92

ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	Dates des formations reçues		
							REV	LMD/Palu	CPC/PF
SAVANES	KPENDJAL	ALDOULAYE	SEYDOU	MANOEUVRE	MSP	BORGOU	-	-	04-Mai-92
SAVANES	KPENDJAL	DANWOUR	YAMOE	ACCOUCHEUSE	MSP	BORGOU	-	07-Mai-91	-
SAVANES	KPENDJAL	WARDJA	DJASSIBE	AGENT ITINERANT	MSP	BORGOU	31-Jul-90	-	-
SAVANES	KPENDJAL	YANEYO	TCHABINANDE	ACCOUCHEUSE	MSP	BORGOU	-	-	04-Mai-92
SAVANES	KPENDJAL	BAGANE	SANGUIDAME	MATRONE	MSP	KANDOURI	31-Jul-90	07-Mai-91	04-Mai-92
SAVANES	KPENDJAL	NABAGOU	SAOUN	MATRONE	MSP	KANDOURI	31-Jul-90	05-Mai-91	04-Mai-92
SAVANES	KPENDJAL	TIANE	AMADOU	MANOEUVRE	MSP	KANSIL BANG	05-Mai-90	05-Mai-91	04-Mai-92
SAVANES	KPENDJAL	LAMBONI	TOTI	AGENT ITINERANT	MSP	KOUNDOJARE	-	-	16-Oct-91
SAVANES	KPENDJAL	PONTY	TIPANGUE	AGENT ITINERANT	MSP	KOUNDOJARE	31-Jul-90	07-Mai-91	-
SAVANES	KPENDJAL	YAObU	DJAGOUPO	AGENT ITINERANT	MSP	KWAMPITE	-	-	04-Mai-92
SAVANES	KPENDJAL	AWANYO	MENSAH	IDE	MSP	MANDOURI	31-Jul-90	07-Avr-91	19-Oct-91
SAVANES	KPENDJAL	MAMMANGUE	BAGUINANI	APS	MASCF	MANDOURI	-	10-Mai-91	-
SAVANES	KPENDJAL	NAMMANGUE	BAGUINANI	APS	MASCF	MANDOURI	01-Avr-90	29-Nov-90	-
SAVANES	KPENDJAL	SANWOGOU	SOUNI	ACCOUCHEUSE	MSP	MANDOURI	-	07-Mai-91	-
SAVANES	KPENDJAL	TCHOUAFEI	EKPAO	APS	MASCF	MANDOURI	-	-	14-Avr-92
SAVANES	KPENDJAL	YARBONDJOA	MATHIEYENDOU	AGENT D'HYGIENE	MSP	MANDOURI	01-Avr-90	29-Nov-90	19-Oct-91
SAVANES	KPENDJAL	DJAGBA	SAMBOH	APS	MASCF	NAKI-EST	24-Jul-90	10-Mai-91	14-Avr-92
SAVANES	KPENDJAL	N'GUMBI	DJAGRI	IDE	MSP	NAKI-EST	31-Jul-90	07-Mai-91	04-Mai-92
SAVANES	KPENDJAL	YENDABRE	PALIBE	MATRONE	MSP	NAKI-EST	31-Jul-90	07-Mai-91	04-Mai-92
SAVANES	KPENDJAL	EZA	KOKOUMI	IDE	MSP	NAMOUDJOGA	31-Jul-90	07-Mai-91	04-Mai-92
SAVANES	KPENDJAL	DAMOUNI	YARPAKA	APS	MASCF	OGABO	-	-	20-Avr-92
SAVANES	KPENDJAL	WAGOU	MIRKAHAM	AGENT ITINERANT	MSP	OGABO	-	-	04-Mai-92
SAVANES	KPENDJAL	YEBU	ARZOUA	MATRONE	MSP	PAPRI	31-Jul-90	07-Mai-91	04-Mai-92
SAVANES	KPENDJAL	DONI	MIGNOME	MANOEUVRE	MSP	POGNO	11-Avr-90	-	20-Avr-92
SAVANES	KPENDJAL	NAGBORABA	AWA	MATRONE	MSP	POGNO	-	-	04-Mai-92
SAVANES	KPENDJAL	YEMPABOU	HALI	ACCOUCHEUSE	MSP	SANFATOUTE	-	-	20-Avr-92
SAVANES	OTI	AGODE	KCKOU	AGENT D'HYGIENE	MSP	BARKOISSI	24-Jul-90	10-Mai-91	-
SAVANES	OTI	BELEYI	BAYAKI	IDE	MSP	BARKOISSI	27-Ao-90	07-Mai-91	24-Avr-92
SAVANES	OTI	NAJUE	MAKO	MATRONE	MSP	BARKOISSI	31-Jul-90	-	24-Avr-92
SAVANES	OTI	GOUNYTIENE	LENE	INFIRMIER	MSP	BOUGOU	31-Jul-90	-	-
SAVANES	OTI	PATOUPEPERE	AKLESSO	IDE	MSP	BOUGOU	31-Jul-90	15-Avr-91	-
SAVANES	OTI	FAMBARE	REKIA	MATRONE	MSP	FARE	31-Jul-90	07-Mai-91	24-Avr-92
SAVANES	OTI	FANIBARE	REKIA	MATRONE	MSP	FARE	-	-	11-Avr-92
SAVANES	OTI	KATANGA	MANAWE	IDE	MSP	FARE	31-Jul-90	07-Mai-91	-
SAVANES	OTI	NANAWENDE	ADAMA	MATRONE	MSP	FARE	31-Jul-90	07-Mai-91	24-Avr-92
SAVANES	OTI	BOUYOU	KPATCHA	INFIRMIER	MSP	GALANGASHI	-	-	20-Avr-92
SAVANES	OTI	AKLAMANO	KOFFI	AGENT D'HYGIENE	MSP	GANDO	24-Jul-90	10-Mai-91	14-Avr-92
SAVANES	OTI	KANTCHATI	ABIBA	ACCOUCHEUSE	MSP	GANDO	31-Jul-90	-	20-Avr-92
SAVANES	OTI	KENACU	LASSABALO	APS	MASCF	GANDO	24-Jul-90	10-Mai-91	14-Avr-92
SAVANES	OTI	OKOUROU	KANTCHATI	MATRONE	MSP	GANDO	-	-	24-Avr-92
SAVANES	OTI	TOGLO	LOGOSSOU	IDE	MSP	GANDO	31-Jul-90	07-Mai-91	01-Avr-92
SAVANES	OTI	LAMBONI	NIBAGUE	IDE	MSP	KANTINDI	01-Avr-90	20-Nov-90	19-Oct-91
SAVANES	OTI	KADJASSOU	HOUNDETE	IDE	MSP	KORBONGOU	31-Jul-90	07-Mai-91	-
SAVANES	OTI	MOLGOU	ALAWI	ACCOUCHEUSE	MSP	KORBONGOU	-	07-Mai-91	-
SAVANES	OTI	OUBANOU	AGUIKI	ACCOUCHEUSE	MSP	KORBONGOU	31-Jul-90	-	-
SAVANES	OTI	NAMOROU	AMISSETOU	MATRONE	MSP	KOUMARGOU	31-Jul-90	07-Mai-91	24-Avr-92
SAVANES	OTI	N'BIEMA	ABDOULAYE	IDE	MSP	KOUMARGOU	01-Jan-89	-	24-Avr-92
SAVANES	OTI	DAIDE	MAMOUDDOU	MANOEUVRE	MSP	KOURIENTRE	31-Jul-90	07-Mai-91	-
SAVANES	OTI	LALLE	TCHINTCHI	AGENT ITINERANT	MSP	KOURIENTRE	31-Jul-90	-	-
SAVANES	OTI	KPEDA	YAO PORONBOZOU	INFIRMIER	MSP	KPAHA	-	-	24-Avr-92
SAVANES	OTI	ADAMA	ASSANATOU	IDE	MSP	MANGO	-	-	09-Nov-91
SAVANES	OTI	AKOH	NAYAO	CSS	MASCF	MANGO	01-Avr-90	29-Nov-90	19-Oct-91
SAVANES	OTI	ALI	AMINA	ATBEF	ONG	MANGO	-	-	14-Oct-91
SAVANES	OTI	AMEGBLE	KOMLAN	IDE	MSP	MANGO	31-Jul-90	15-Fev-91	-
SAVANES	OTI	AWOUTE	NABARA	ACCOUCHEUSE	MSP	MANGO	-	07-Mai-91	20-Mai-92
SAVANES	OTI	BENYOM	KPATCHA	INFIRMIER	MSP	MANGO	-	-	25-Avr-92
SAVANES	OTI	DJAKO	AKOU	AM	MSP	MANGO	-	-	24-Avr-92

ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	Dates des formations reçues		
							FEV	LMD/Palu	CPC/PF
SAVANES	OTI	KODJO	KOKOE	SAGE FEMME	MSP	MANGO	-	-	14-Oct-91
SAVANES	OTI	KOUMANA	MELAN-NI	AGENT D'HYGIENE	MSP	MANGO	01-Avr-90	29-Nov-90	19-Oct-91
SAVANES	OTI	KOYE	KEZIE	AGENT D'HYGIENE	MSP	MANGO	-	01-Nov-90	04-Nov-91
SAVANES	OTI	LAKOUGNON	TCHA	APS	MASCF	MANGO	01-Jul-90	10-Mar-91	14-Oct-91
SAVANES	OTI	LAROUGNON	KOSSI	APS	MASCF	MANGO	-	29-Nov-90	-
SAVANES	OTI	NANDA	AKOH	CSS	MASCF	MANGO	24-Jul-90	29-Nov-90	-
SAVANES	OTI	NASSOMA	DINDARE	MATRONE	MSP	MANGO	-	-	11-Avr-92
SAVANES	OTI	NIKOE		SAGE FEMME	MSP	MANGO	-	07-Mai-91	-
SAVANES	OTI	OURO-KOURA	ADJEWE	ACCOUCHEUSE	MSP	MANGO	31-Jul-90	-	24-Avr-92
SAVANES	OTI	PAKOUYOWOU	TCHALLA	TSGS	MSP	MANGO	01-Avr-90	29-Nov-90	19-Oct-91
SAVANES	OTI	PALANGA	MANANI	ACCOUCHEUSE	MSP	MANGO	-	25-Avr-91	24-Avr-92
SAVANES	OTI	SIMWAJ	PANABALO	IDE	MSP	MANGO	31-Jul-90	07-Mai-91	24-Avr-92
SAVANES	OTI	TAMBILA	NABARA	MATRONE	MSP	MANGO	-	-	24-Avr-92
SAVANES	OTI	YAO	SENGUE	ACCOUCHEUSE	MSP	MANGO	31-Jul-90	-	-
SAVANES	OTI	FALANI	MOUKUROUI	MATRONE	MSP	MOGOU	-	-	24-Avr-92
SAVANES	OTI	ITCHIEM	TIDJIBA	ACCOUCHEUSE	MSP	MOGOU	31-Jul-90	07-Mai-91	-
SAVANES	OTI	AZIATI	KOFFI	APS	MASCF	NAGBENI	24-Jul-90	10-Mai-91	14-Avr-92
SAVANES	OTI	SIWOU	ESSOHOUNA	IDE	MSP	NAGBENI	01-Jan-83	07-Mai-91	20-Avr-92
SAVANES	OTI	TCHOKOURA	REKUYA	MATRONE	MSP	NAGBENI	31-Jul-90	07-Mai-91	24-Avr-92
SAVANES	OTI	KOLANI	TALATA	ACCOUCHEUSE	MSP	NALI	-	07-Mai-91	-
SAVANES	OTI	KPELEVI	KOFFI	IDE	MSP	NALI	-	-	23-Avr-92
SAVANES	OTI	MANANGO	AFANI	MATRONE	MSP	NALI	31-Jul-90	07-Mai-91	24-Avr-92
SAVANES	OTI	ASSI	BAGADISSOU	IDE	MSP	TAKPAMBA	31-Jul-90	07-Mai-91	-
SAVANES	OTI	BANLJOMA	DJANGBALEN	ACCOUCHEUSE	MSP	TAMMANG	31-Jul-90	-	-
SAVANES	TANDJOUARE	BANMARINE	YAMOE	ACCOUCHEUSE	MSP	BISSENOURE	31-Jul-90	-	16-Mai-92
SAVANES	TANDJOUARE	KONOU	FO-KOZO	IDE	MSP	BOGOU	-	-	04-Mai-92
SAVANES	TANDJOUARE	KOUDOUNGOU	BANGOLI	APS	MASCF	BOGOU	01-Avr-90	20-Nov-90	14-Avr-92
SAVANES	TANDJOUARE	LARE	NIMOME	ACCOUCHEUSE	MSP	BOGOU	-	-	20-Avr-92
SAVANES	TANDJOUARE	AMEGAVI	KOMLANVI	LABORANTIN	MSP	BOMBOUAKA	-	07-Mai-91	-
SAVANES	TANDJOUARE	AMETEPE	KOSSI	IDE	MSP	BOMBOUAKA	-	29-Nov-90	14-Oct-91
SAVANES	TANDJOUARE	BOMBOMA	BAMLA	ACCOUCHEUSE	MSP	BOMBOUAKA	31-Jul-90	07-Mai-91	04-Mai-92
SAVANES	TANDJOUARE	CANTO	AME	SAGE FEMME	MSP	BOMBOUAKA	31-Jul-90	-	-
SAVANES	TANDJOUARE	GOZO	AME	SAGE FEMME	MSP	BOMBOUAKA	-	07-Mai-91	-
SAVANES	TANDJOUARE	MOKLI	YAO	LABORANTIN	MSP	BOMBOUAKA	31-Jul-90	-	-
SAVANES	TANDJOUARE	POUWAKA	KPATCHA	AGENT D'HYGIENE	MSP	BOMBOUAKA	24-Jul-90	01-Nov-90	14-Oct-91
SAVANES	TANDJOUARE	SAMBIANI	ADJOUA	INFIRMIER	MSP	BOMBOUAKA	-	10-Mai-91	04-Mai-92
SAVANES	TANDJOUARE	LARE	YEMPABE	MATRONE	MSP	LOKANOU	-	10-Avr-91	20-Avr-92
SAVANES	TANDJOUARE	HODABALO	HAI	IDE	MSP	LOKO	01-Sep-91	01-Mar-91	04-Mai-92
SAVANES	TANDJOUARE	LAMBONI	LARI	MATRONE	MSP	LOKO	02-Jul-90	02-Jul-90	04-Mai-92
SAVANES	TANDJOUARE	GUYDAYEME	MADJA	APS	MASCF	NAMOUNDJOG UA	24-Jul-90	20-Nov-90	-
SAVANES	TANDJOUARE	TIEM	LENLE	APS	MASCF	NAMOUNDJOG UA	24-Jul-90	10-Mar-91	14-Avr-92
SAVANES	TANDJOUARE	OTOYI	KOKOU	APS	MASCF	NANO	24-Jul-90	29-Nov-90	19-Oct-91
SAVANES	TANDJOUARE	PELALOUNA	KOMLAN	IDE	MSP	NANO	31-Jul-90	07-Mai-91	-
SAVANES	TANDJOUARE	KONG	GAMI	MATRONE	MSP	SISSIAK	31-Jul-90	07-Mai-91	04-Mai-92
SAVANES	TANDJOUARE	YOUMA	SALAM	MANOEUVRE	MSP	SISSIAK	31-Jul-90	-	04-Mai-92
SAVANES	TANDJOUARE	BOKOTSE	KOMI	IDE	MSP	TAMPALUM	31-Jul-90	-	04-Mai-92
SAVANES	TANDJOUARE	ALASSANI	ISSIFOU	IDE	MSP	TANDJOUARE	-	-	20-Avr-92
SAVANES	TANDJOUARE	KOKO	AYENA	APS	MASCF	TANDJOUARE	-	10-Mar-91	14-Avr-92
SAVANES	TANDJOUARE	KONLANI	ALI	MANOEUVRE	MSP	TANDJOUARE	-	-	04-Mai-92
SAVANES	TANDJOUARE	LARE	DJOUGHALENGU E	MATRONE	MSP	YIMBOUR	-	-	04-Mai-92
SAVANES	TANDJOUARE	MARDJOA	SANEBRIE	AGENT ITINERANT	MSP	YIMBOUR	01-Avr-90	29-Nov-90	19-Oct-91
SAVANES	TONE	SANKARDJA	KOATIDJA	APS	MASCF	BARKOISSI	01-Jul-90	10-Mar-91	14-Avr-92
SAVANES	TONE	MINGBIME	KPANKPANDJA	AGENT AUX	MSP	BIANKOURI	-	-	04-Mai-92
SAVANES	TONE	YANNONE	YAO	MATRONE	MSP	BIANKOURI	-	-	20-Avr-92
SAVANES	TONE	BIANLA	TADANJOA	MANOEUVRE	MSP	BIDJENGA	-	01-Mar-91	04-Mai-92
SAVANES	TONE	NANDJA	NIKABOU	IDE	MSP	BIDJENGA	31-Jul-90	07-Mai-91	20-Avr-92
SAVANES	TONE	LAMBOUI	PILEAGNE	MANOEUVRE	MSP	BOADE	01-Jul-90	01-Jul-91	04-Mai-92
SAVANES	TONE	MINTRE	PENOO	MATRONE	MSP	BOUGOU	-	-	04-Mai-92
SAVANES	TONE	PAKOUPEHERE	AKLESSO	IDE	MSP	BOUGOU	01-Avr-90	01-Avr-91	04-Mai-92
SAVANES	TONE	ADI	ESSO	APS	MASCF	CINKASSE	24-Jul-90	10-Mar-91	14-Avr-92

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ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	Dates des formations reçues		
							PEV	LMD/Palu	CPC/PP
SAVANES	ZONE	ATIKAKO	KOKOU	IDE	MSP	CINKASSE	31-Jul-90	07-Mar-91	04-Mar-92
SAVANES	ZONE	NAGNANGA	GNANDE	MATRONE	MSP	CINKASSE	31-Jul-90	07-Mar-90	20-Avr-92
SAVANES	ZONE	SOLI	PAWINEMA	AGENT D'HYGIENE	MSP	CINKASSE	01-Avr-90	21-Nov-90	09-Nov-91
SAVANES	ZONE	ABALA-SAMA	BEGUIEDOU	TSGS	MSP	DAPAONG	-	-	14-Avr-92
SAVANES	ZONE	ATAYARA	TAWOUNTIGA	APS	MASCF	DAPAONG	24-Jul-90	25-Nov-90	19-Oct-91
SAVANES	ZONE	ATCHOLE	HOBLY	APS	MASCF	DAPAONG	01-Avr-91	-	14-Avr-92
SAVANES	ZONE	ATSOU	HOUGNON	AM	MSP	DAPAONG	01-Avr-90	29-Nov-90	19-Oct-91
SAVANES	ZONE	AM	KOSSI	APS	MASCF	DAPAONG	24-Jul-90	10-Mai-91	-
SAVANES	ZONE	BABISSILANA	HABA	AGENT D'HYGIENE	MSP	DAPAONG	02-Ao-90	01-F'v-91	14-Avr-92
SAVANES	ZONE	BAKA	KASSIRVA	INFIRMIER	MSP	DAPAONG	-	-	04-Mai-92
SAVANES	ZONE	DAMBIEL	TADAMPO	APS	MASCF	DAPAONG	-	10-Mai-91	14-Avr-92
SAVANES	ZONE	DOUTI	TIFOURNA	APS	MASCF	DAPAONG	01-Jul-90	10-Mai-91	14-Avr-92
SAVANES	ZONE	D'ALMEIDA	DEDE KAFUI	SAGE FEMME	MSP	DAPAONG	-	-	04-Mai-92
SAVANES	ZONE	GAMBILA	TAKSDASSIDA	ACCOUCHEUSE	MSP	DAPAONG	-	30-Mar-91	19-Oct-91
SAVANES	ZONE	GBATI	TCHEDRE	AM	MSP	DAPAONG	-	01-F'v-89	04-Mai-92
SAVANES	ZONE	GNASSIM	TCHAO	AGENT D'HYGIENE	MSP	DAPAONG	24-Jul-90	10-Mai-91	14-Avr-92
SAVANES	ZONE	HONKOU	MIMPABE	APS	MASCF	DAPAONG	24-Jul-90	10-Mai-91	14-Avr-92
SAVANES	ZONE	JIMONGOU	SANHA	APS	MASCF	DAPAONG	01-Jul-90	10-Mai-91	14-Avr-92
SAVANES	ZONE	KANGBENI	MINTRE	APS	MASCF	DAPAONG	24-Jul-90	10-Mai-91	14-Avr-92
SAVANES	ZONE	KANTOUTI	YENDOUBAN	INFIRMIER	MSP	DAPAONG	-	07-Mai-91	-
SAVANES	ZONE	KEGBEVI	SOKPOLU	AGENT D'HYGIENE	MSP	DAPAONG	24-Jul-90	10-Mai-91	-
SAVANES	ZONE	KOMBATE	YENTOURPOA	ATBEF	ONG	DAPAONG	-	-	14-Avr-92
SAVANES	ZONE	KOMBATE	BOUKARI	APS	MASCF	DAPAONG	-	-	14-Avr-92
SAVANES	ZONE	KOTEDJA	LACKYI	APS	MASCF	DAPAONG	24-Jul-90	10-Mai-91	14-Avr-92
SAVANES	ZONE	KOUNTIENI	AKPIERI	INFIRMIER	MSP	DAPAONG	-	29-Nov-90	14-Oct-91
SAVANES	ZONE	KOUNTOUTI	GBARTCHETE	APS	MASCF	DAPAONG	01-Avr-90	20-Nov-90	19-Oct-91
SAVANES	ZONE	KOUTOUMA	PREYAO	AGENT D'HYGIENE	MSP	DAPAONG	01-Jul-90	10-Avr-91	14-Avr-92
SAVANES	ZONE	LARE	SAFOURA	ACCOUCHEUSE	MSP	DAPAONG	-	-	04-Mai-92
SAVANES	ZONE	LAWSON-BODY	DOSSEH	TSGS	MSP	DAPAONG	01-Avr-90	29-Nov-90	19-Oct-91
SAVANES	ZONE	MALOU	KOSSIWA	ACCOUCHEUSE	MSP	DAPAONG	-	-	20-Avr-92
SAVANES	ZONE	NADIOMBE	KOSSIWA	ACCOUCHEUSE	MSP	DAPAONG	-	07-Mar-91	-
SAVANES	ZONE	PATABOU	MANGUISSIW	ACCOUCHEUSE	MSP	DAPAONG	31-Jul-90	07-Mai-91	04-Mai-92
SAVANES	ZONE	SAMBO	PREWE	APS	MASCF	DAPAONG	01-Avr-90	29-Nov-90	19-Oct-91
SAVANES	ZONE	SOMOKO	YAWA	APS	MASCF	DAPAONG	01-Avr-90	29-Nov-90	19-Oct-91
SAVANES	ZONE	SONGHAI	TCHAAKIM	AGENT D'HYGIENE	MSP	DAPAONG	24-Jul-90	10-Mai-91	14-Avr-92
SAVANES	ZONE	TCHABLI	GNONOUGO	APS	MASCF	DAPAONG	01-Jul-90	10-Mai-91	14-Avr-92
SAVANES	ZONE	TCHAGANDI	ESSOH-SAM	AGENT D'HYGIENE	MSP	DAPAONG	01-Avr-91	-	14-Avr-92
SAVANES	ZONE	TITONE	N'MOTIEBE	APS	MASCF	DAPAONG	24-Jul-90	-	-
SAVANES	ZONE	TODDJALLA	NDJA	SAGE FEMME	MSP	DAPAONG	-	07-Mai-91	-
SAVANES	ZONE	WABGOU	N'MOTIEBE	APS	MASCF	DAPAONG	-	10-Mai-91	14-Avr-92
SAVANES	ZONE	WELENGUETI	KPATCHA	AGENT D'HYGIENE	MSP	DAPAONG	01-Avr-90	29-Nov-90	19-Oct-91
SAVANES	ZONE	ISSAKA	MOUSTAPHA	AGENT D'HYGIENE	MSP	DAPAONG	24-Jul-90	-	-
SAVANES	ZONE	KADJASSOU	HOUNDETE	IDE	MSP	KABONGOU	-	-	04-Mai-92
SAVANES	ZONE	TIEM	DE PANA	ACCOUCHEUSE	MSP	KANTINDI	31-Jul-90	07-Mar-91	04-Mai-92
SAVANES	ZONE	KANGBENI	KONDARGUE	MATRONE	MSP	KAREIYETIE	31-Jul-90	-	04-Mai-92
SAVANES	ZONE	PONTY	TCHYANGA	AIDE SOIGNANTE	MSP	KOUNDJARE	-	01-Avr-91	04-Mai-92
SAVANES	ZONE	GALINABA	NOUNFOU	AGENT ITINERANT	MSP	KOURIENTRI	-	07-Mar-91	20-Avr-92
SAVANES	ZONE	LARE	AMADOU	MANOEUVRE	MSP	KWANPITBAN	31-Jul-90	07-Mar-91	-
SAVANES	ZONE	KOUDAYA	KOKOU	IDE	MSP	LOKANOU	-	-	04-Mai-92
SAVANES	ZONE	LAMBIME	YIRME	ACCOUCHEUSE	MSP	LOTOGOU	31-Jul-90	07-Mar-91	20-Avr-92
SAVANES	ZONE	TOMELAMBON	KPENDJO	MANOEUVRE	MSP	LOTOGOU	31-Jul-90	-	04-Mai-92
SAVANES	ZONE	DJAGARE	VEDOUKOA	AIDE SOIGNANTE	MSP	NADJONDI	-	-	04-Mai-92
SAVANES	ZONE	RAVAOMIHANT A	YVONNE	INFIRMIER	MSP	NADJONDI	-	01-Nov-90	04-Mai-92
SAVANES	ZONE	KOLANI	MINCHA	INFIRMIER	MSP	NAKI OUEST	01-Avr-90	01-Avr-91	04-Mai-92
SAVANES	ZONE	AGBLEWONOU	EWLUI	APS	MASCF	NAKI-EST	24-Jul-90	29-Nov-90	19-Oct-91

ANNEX E

Region	Prefecture	Nom	Prenom	Titre	Ministry	Ville	dates des formation recus		
							PEV	LMD/Patu	CPC/PF
SAVANES	ZONE	ETSELESSOU	KOUDJO	IDE	MSP	NAKI-OUEST	31-Jul-90	07-Mai-91	-
SAVANES	ZONE	MISSJAMBA	SANKANPO	MATRONE	MSP	NAKI-OUEST	31-Jul-90	-	04-Mai-92
SAVANES	ZONE	GOUNYATIENE	SENE	MANOEUVRE	MSP	NANERGOU	-	-	04-Mai-92
SAVANES	ZONE	KATAMASINA	ANAGO	APS	MASCF	NANERGOU	24-Jul-90	10-Mai-91	14-Avr-92
SAVANES	ZONE	WALAKO	YOUUTETIBE	MATRONE	MSP	NANERGOU	-	-	04-Mai-92
SAVANES	ZONE	CONSUELO	SOEUR	AIDE SOIGNANTE	ONG	PANA	-	-	04-Mai-92
SAVANES	ZONE	KONIPO	GOUMBAN	AGENT	MSP	PANA	31-Jul-90	-	04-Mai-92
				ITINERANT					
SAVANES	ZONE	LARE	SANAGBEME	MATRONE	MSP	PANA	-	-	20-Avr-92
SAVANES	ZONE	ANKOU	IKA	IDE	MSP	PAPRI	01-Ao-90	14-D'c-90	-
SAVANES	ZONE	KOMBATE	GNGATE	IDE	MSP	PAPRI	27-Jul-90	17-Mai-91	04-Mai-92
SAVANES	ZONE	BOUKARI	YENDOUBAN	IDE	MSP	SANFATOUTE	31-Jul-90	07-Mai-91	04-Mai-92
SAVANES	ZONE	BARIYENE	GNIMPAL	IDE	MSP	TAMI	30-Avr-90	12-Avr-91	20-Avr-92
SAVANES	ZONE	DAMETARE	FATI	MATRONE	MSP	TAMI	-	07-Mai-91	04-Mai-92
SAVANES	ZONE	KOLANI	BOMMELLA	ATBEF	ONG	TAMI	-	-	14-Avr-92
SAVANES	ZONE	LAGBEMA	WARKATINTA	IDE	MSP	TAMI	31-Jul-90	07-Mai-91	04-Mai-92
SAVANES	ZONE	YANYO	TCHABINAND	ACCOUCHEUSE	MSP	TAMI	31-Jul-90	-	-
SAVANES	ZONE	DOUTI	POMANO	MATRONE	MSP	TAMPIALIM	01-Avr-90	21-Nov-90	16-Mai-92
SAVANES	ZONE	BOULINABA	ALIZATA	MATRONE	MSP	TIMBOU	-	-	20-Avr-92
SAVANES	ZONE	LARE	SAKPAHOH	INFIRMIER	MSP	TIMBOU	-	-	04-Mai-92
SAVANES	ZONE	SONGRE	YOUUTOTI	ATBEF	ONG	TIMBOU	-	-	14-Avr-92
SAVANES	ZONE	DOGOTIEBE	DABEKOA	AGENT	MSP	WARKAMBOU	-	-	04-Mai-92
				ITINERANT					
SAVANES	ZONE	KOMLAN	KOKOU	IDE	MSP	WARKAMBOU	-	-	16-Mai-92
SAVANES	ZONE	SANTARE	FATI	ACCOUCHEUSE	MSP	WARKAMBOU	31-Jul-90	-	-
SAVANES	ZONE	GOROU	KOJO	IDE	MSP	YIMBOUR	28-Avr-90	28-Avr-90	20-Avr-92

LIST OF PARTICIPANTS TO THE PLANNING AND BUDGET TRAINING

name	title	service	1st series			2nd series				
			juin 1990	aout 1990	aout 1990	mars 1991	avril 1991	mai 1991	mai 1991	
Acakpo Akouete	Medecin	SS Tchaoudjo								X
Adewusi Gbadegesin	Dir Reg	Plan Plateaux		X						
Adjogble Sowonou	Medecin	SS Bassar								X
Aflagah Komlan	Medecin	SS Tchaoudjo	X							
Agbabozi Konate	Dir	CH Kpalime		X						
Agbekponou Kokou	Medecin	Poly Lome				X				
Agla Koffi	Dir	CHR Aneho		X						
Akata Tcha	Chef section	MASCF			X					
Ali Bossa	AS	DGCF Lome				X				
Amegah Koami	Medecin	SS Haho				X			X	
Ametohoun Adodossi	Chef section	MASCF			X					
Amouzou Djanikpo	Dir.	CHR Dapaong	X							
Assih Palakassi	Medecin	SS Tone	X							
Attisso Kossi	Medecin	SS Zio		X		X			X	
Attitso Kodjo	Medecin	SS Amcu		X		X			X	
Awade M'ma	Coord. Reg.	DRAS Kara	X							X

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Awi Kossi	Dir. Reg. Adj.	DRAS Dapaong	X				X		X
Bagana Nadjombe	TSGS	SNES			X				
Bakpessi Kossiwa	APS	DRAS Lome		X		X		X	
Batchassi Essosiem	Medecin	SS Kozah	X						
Bayor Moctar	Chef service	SNPalu			X				
Bonfoh Bossa	Asst Sociale	DGCF Lome		X					
Boukari Sopho	Directeur	ENAM			X				
Budema Fissima	Chef sector	MASCF			X			X	
Cisse Cayamaya	Medecin	SS Keran	X				X		
Dahoegnon Kossi	Animateur	DGCF Lome		X					
Dalare Mayiba	comptable	MASCF			X				
Dare Aboudou	Medecin	SS Pagouda	X				X		X
Djagbassou Yoka	Medecin	SS Lacs		X		X		X	
Djbririne Aboulaye	Medecin	CS Pya	X				X		X
ElHadji Tairou	Medecin	SS Sotouboua	X				X		X
Fetor KwasiKuma	Dir	CH Tsevie		X					
Gaba Adama	Medecin	CHR Tchamba	X				X		X
Gavon Komi	Chef division	MF/Budget			X				
Gbengbertane	Gestionnaire	CHR Kara	X						
Gnamassou Awokou	Chef secteur	DRAS Ogou		X					

Goeh-Akue Kpakpo	Dir Reg	Plan Dapaong	X						
Johnson Kafui	Encadreur	OMS			X				
Kamaga Koubalekota	Chef Division/SLPR	MPM			X				
Kanyi Akuete	AAS	DRAS Lome		X					
Karabou Potchozio	Medecin	SS Assoli	X				X		X
Keddagni Sedegnan	Ing.	DR du Plan Kara	X						
Kende Kossivi	Directeur	Clinique Bon Secours			X				
Ketoglo Yao	ENFS	UB Lome				X			
Kolagbe Koamivi	Comptable	MASCF			X				
Kombate-Noudjo Dinmuy	Medecin	SS Oti	X				X		X
Koulouma Kpatcha	Dir	CHU Lome		X					
Kpegba Komi	Medecin	SS Yoto		X		X		X	
Kpinsaga Djarba	Medecin	SS Haho		X			X		X
Kwassi Tossou	Charge d'etudes	MPM Lome		X					
Lemou Kpohou	Dir Reg	DRAS Kara							X
Lenlipo Bandassoudi	Dir Reg Adj	DRAS Sokode	X						
Manaoba M'Pena	Dir	CHR Sokode	X						
Marfa Ayc	Ing. Sanitaire	SNA			X				
Morgah Kodjo	Medecin	SS Badou		X		X		X	
Nabilou Komlan	Medecin	SS Ogou		X		X		X	

Pana Assimawe	Medecin	SS Doufelgou	X				X		X
Sankaredja Tadampo	Coord. Reg.	DRAS Dapaong	X						
Sant'ana Moushine	Dir	CHR Plateaux		X					
Sidikou Essowavana	Superviseur	DRAS Sokode	X						
Simtokna Dago	Dir. Reg.	DRAS Kara	X				X		X
Sodoke Kodjo	Dir Reg	DRAS Plateaux		X		X		X	
Sonhaye Antchoko	Dir. Reg.	Plan et Develop. Sokode	X						
Tafamba-Dabou Napo	Chef service	SN Med Scolaire			X				
Tcha-Koura Koly	Chef Secteur	DRAS Tchaoudjo					X		X
Telou Essodina	Dir Adj	DGAS		X					
Todjalla M'Bao	Dir Reg	DRAS Dapaong							X
Tougan Kodjo	Medecin	CS Bassar	X				X		X
Toulan Foli	Dir	DGAS/DC Lome		X		X			
Trom Komla	Medecin	SS Kloto		X		X		X	
Viagbo Kokouvi	Directeur	Division Formation/MSP			X				
Viegninou-Agbenyo Kodzo	Chef Division/Org. Spat.	MPM			X				
Viviti Yawa	Planif.	CERAD Kpalime				X		X	
Wagbe Kokou	Dir Adj	CHU Lome		X					
Yibor Amatsu	Medecin	SS Vo		X		X		X	
Yodo Kodjo	Chef section	MASCF/DGAS			X				

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AND MATERIALS PUBLISHED**A. Quarterly activity reports**

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ANNEX F

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PLACE DE L'EQUIPE PREFECTORALE

SCHEMA DE FORMATION/EDUCATION POUR LA SANTE

NIVEAU CONCEPTUEL
ET DE COORDINATION

COMITE NATIONAL D'EDUCATION POUR LA SANTE

(Sous Commission Nationale d'IEC, SNES, DEPD, Divisions, Org. Internationales, Org. Non Gouvernementales, Media etc.)

SERVICE NATIONAL D'EDUCATION POUR LA SANTE

NIVEAU OPERATIONNEL

SERVICE REGIONAL D'EDUCATION POUR LA SANTE (ONG)

EQUIPE PREFECTORALE DE COORDINATION

Préfet/DRDR/Enseignement
 Médecin Chef de Subdivision
 Chef Secteur des Affaires Sociales
 Chef Secteur de l'Assainissement
 Chef Régional du SNES (Secrétaire)
 Dir. Aff. Soc. et DR Assainissement

EQUIPE PREFECTORALE DE FORMATION ET EPS

1 Assistant Médical
 2 Coordonnateurs Préfectoraux du SNES
 2 Agents des Affaires Sociales
 1 Représentant d'ONG

EQUIPES DE ZONE

AGENTS FIXES	AGENTS MOBILES	CENTRES DE SANTE CENTRES SOCIAUX
Infirmiers	Ag de Prom. Soc.	■
Accoucheuses	Ag d'Assainissement	■
Enseignants	Ag Itinérants	■
Autres	Autres (Mobilisations)	■
■	■	■

LES COMMUNAUTES

La Chefferie Traditionnelle
 Comités Villageois de Développement (CVD)
 Ecole, Eglises, et Autres Associations

CONTENU DE LA FORMATION

Formation Technique:

- Programmes Nationaux
(LMD, PEV, Palu, PF, SIDA/MST, etc.)

Formation en matière d'organisation communautaires:

- Etude du milieu (Développement Communautaire)
- Organisation Communautaire

Formation Pédagogique:

- Andragogie
- Conception et élaboration des programmes de formation
- Techniques d'IEC
- Supervision

PERSONNEL FORME A L'ENAM

1.1. à LOME, Personnel qualifié:

Infirmiers d'Etat
Assistants d'Hygiène d'Etat
Techniciens de Laboratoires
Orthopédistes

1.2. à SOKODE, Personnel formé:

Infirmiers
Accoucheuses Auxiliaires

LISTE DE DISTRIBUTION DES DOCUMENTS DE FORMATION EN IEC
LMD/Palu, CPC/Nut, PF

NOM DU SERVICE	ET DESTINATAIRE
AFVP	Dr Sicard
ATBEF	Mr Agbodan
CARE	Mme Kambou
CCCD	Mme Karen Wilkins
CEE	Mme Guillaud
CHU	Dr Hodonou
CHU	Pr Assimadi, Tatagan, Sce Pédiatrie
CRS/Togo	Mr John Corrao, Mme Tsogbe
DAC	Louis O'Brien
DEpi	Dr Kassankogno
DPFR	Drs Salami, Kotowogbe, Mr Viagbo
DSF	Dr Kampatibe, Mr Akago
ENAM Sokode	Mmes Gbodui, Capochichi, Sossou
ENAM Lomé	Directeur, Dépt Inf., Aux. Acc.
ENAS	Pr Boukari, Dépt Inf. AHE, Lab.
ENSF	Mme Nana
Fac Med. UB	Mme Ayassou, Biblio, Direction
FAC	Pr Kessié, Dépt Péd., SP, OG, Bibli
FNUAP	Dr Floury
GTZ	Dr Ayessou
INTRAH	Dr Schmidt Ehry, CS de Bè
MCDI	Mme Hounzah
OMS	Mr Joseph Carter
Peace Corps	Dr Barry
PNLS	Mr Bamaze
Projet ECHOPPE	Dr Grunitzky, Mr Devotsu
SEATS	Mme Beverly Ott
SNES	Mme B. Shane
Sub-divisions Sanitaire (30)	Dr Akolly, Mr Amouzou, Lawson-body
UNICEF	Mme Potcho, Mr Bagna
UPC	Medecin Chef
USAID	Dr Musinde
	bibliotheque
	Mr Ehmer

HAMEAUX, VILLAGES ET CVDS DU TOGO EN SEPTEMBRE 1991

REGION/	CENTRALE	%	KARA	%	MARITIME	%	PLATEAUX	%	SAVANES	%	TOTAL	%
no. villages dans la région ¹	193	96	428	61	399	31	929	59	595	98	2544	58
no. hameaux dans la région	9	4	274	39	890	69	648	41	15	2	1836	42
total	202	100	702	100	1289	100	1577	100	610	100	4380	100
no. villages et hameaux recensés ²	77	38	128	18	340	26	664	42	451	74	1660	38
no. CVDs formés	77	38	128	18	216	17	546	35	287	47	1254	29
no. CVDs fonctionnel	73	95	128	100	216	100	363	66	259	90	1039	55
no. CVDs avec argent en caisse	20	26					279	51	83	29		
% des CVDs dans la région par rapport aux total dans le pays		6		10		17		44		23		100

¹ Ministère du Plan, Direction de la Statistique, 1981, Recensement Général de la Population et de l'Habitat

² résultats fournis par les Affaires Sociales pour les régions de Kara, Centrale, et Maritime; enquête conduite par l'UPC-SE en février 1991 pour les régions des Plateaux et Savanes