



Monitoring and Evaluation Consultancy-

The effectiveness and impact of initiatives aimed at enhancing the capacity of The Government of The Gambia to respond to the COVID-19 pandemic.

End of Project Evaluation Report
November 2021



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End of Project Evaluation (EPE) of the Project 'Enhancing Gambian Authorities' Preparedness and Response to COVID-19

Implemented by the International Organisation for Migration
(IOM) - *The UN Migration Agency*

November 2021



LIST OF ACRONYMS

CRR	Central River Region	MOH	Ministry of Health
CSOs	Civil Society Organisations	MOI	Ministry of Interior
DAC	Development Aid Committee	MOTIE	Ministry of Trade, Industry, Regional Integration and Employment
EPE	End Project Evaluation	NBR	North Bank Region
FGDs	Focus Group Discussions	NHRC	National Human Rights Commission
GBA	Greater Banjul Area	NEVDP	National Ebola Virus Disease Plan
GID	The Gambia Immigration Department	OECD	Organisation for Economic Cooperation and Development
GoTG	Government of The Gambia	OED	Operations Evaluation Department of The World bank
IABCC	Inter-Agency Border Coordination Committee	POEs	Points of Entry
IOM	International Organisation for Migration	RCCE	Risk Communication and Community Engagement
ICR	Implementation Completion Report	SMEs	Small and Medium Enterprises
IPs	Implementing Partners	ToC	Theory of Change
IPC	Infection Prevention and Control	URR	Upper River Region
LRR	Lower River Region	VfM	Value for Money
MDFTs	Multidisciplinary Facilitation Teams	WaSH	Water, Sanitation and Hygiene
MOFEA	Ministry of Finance and Economic Affairs	WHO	World Health Organisation

EXECUTIVE SUMMARY

“Enhancing Gambian Authorities’ Preparedness and Response to COVID-19”, is a USD 200,000 project financed by the Swiss State Secretariat for Migration. It was implemented over a 12-month period. The project, which closed on August 31, 2021, was meant to assist the Government of The Gambia, to prepare and respond to the COVID-19 outbreak by providing operational and technical support in migration and health. The project focused on achieving five key outcomes:

- (1) Improved coordination and partnership among key actors working at POEs
- (2) Through the Risk Communication and Community Engagement, improved hygiene practices and barrier measures and decrease stigma and discrimination among migrants, mobile populations, and border communities.
- (3) Enhanced surveillance and preparedness at select points of entry (POEs) and border communities
- (4) Enhanced Water, Sanitation and Hygiene (WaSH) at border communities to promote Infection Prevention and Control (IPC), and
- (5) Improved household incomes for informal cross-border traders and households.

The International Organization for Migration (IOM) was the implementing agency, in partnership with national actors. The overall objectives of the end of Project evaluation (EPE) were to assess the effectiveness, efficiency, relevance, and sustainability of project initiatives; build evidence of the results, and highlight the strategies that have contributed to, or hindered, the achievement of set results. The evaluation was carried out over a period of two months, used a combination of data collection modalities¹ and covered all four geographic areas where project activities were carried out². To respond to the evaluation requirements, Gender, and human rights - considered as crosscutting issues - were given particular attention.

The evaluation concludes that the project was highly relevant to The Government of The Gambia (GoTG) and successfully responded to community needs and priorities arising from the COVID-19 pandemic. The project benefitted from the experience gathered through the IOM Global Strategic Preparedness and Response Plan, which is also aligned with the WHO Strategic Preparedness Plan and the UN Framework for the immediate socio-economic response to COVID-19. This alignment ensured that The Gambia profited from the latest and best experience in confronting the pandemic.

¹ A combination of qualitative and quantitative methods for data collection were used. This involved literature reviews, key informant interviews and focus group discussions with the executing agency, beneficiaries, and partners. There were no limiting factors that impacted on the outcome of the EPE exercise.

² These are North Bank Region (NBR), Central River Region (CRR), West Coast Region (WCR), Lower River Region (LRR) and Upper River Region (URR).

The project activities effectively responded to both the health and humanitarian dimensions of the Government of The Gambia (GoTG)'s COVID-19 response plan. The Government successfully incorporated lessons learned from its implementation of the National Ebola Virus Disease Plan (NEVDP, 2015), and as a result was more prepared to confront COVID-19. At the local level, the project appropriately targeted its interventions to border communities, who were potential carriers as well as likely victims of an airborne virus. Such emphasis reduced the health and socio-economic impact of the pandemic on these vulnerable communities. Overall, the project presents a robust design, a unified approach, and a well-structured strategy. There is strong coherence between the outputs and activities, which reinforced the achievement of improved synergies. The Theory of Change (ToC) incorporates initiatives that are strongly interconnected.

Under Outcome 1, the project supported inter-agency cooperation and collaboration to ensure that migrants and border communities were included in cross-border coordination and in a more coherent manner. **The outcome is rated as satisfactory.** **Under Outcome 2**, more specifically the RCCE pillar, the project developed strategies that guaranteed that migrants and mobile communities have access to timely and coherent information. Five more Points of Entry (POEs) were identified & supported. Inter-Agency Border Coordination Committees (IABCC) were established at four land border posts. **This outcome is also rated as satisfactory.** **Under Outcome 3**, the project supported health and immigration authorities, and other key partners in enhancing border surveillance of migrants and mobile communities crossing the borders. Referral reports of suspected ill- travellers at POEs were available, but the lack of a treatment center for suspected ill travelers posed a challenge. In addition, due to the porous nature of the borders in the project intervention areas, surveillance and control of travelers' entry and exit processes were ineffective. **Outcome 3 is rated as moderately satisfactory.** **Under Outcome 4**, the project provided water source to select border communities³ through the construction of solar-powered boreholes and handwashing station. **Outcome 4 is also rated as moderately satisfactory.** **Under outcome 5**, In collaboration with MOTIE, the project funded an assessment⁴ to quantify the likely impact of COVID-19, focusing on informal female cross-border traders. In terms of the financial implications of COVID on SMEs. A key finding of the study was that before the outbreak, 87% of the SMEs operated with profit, and only 13% were losing money. Since the pandemic, about 91.3% of the SMEs experienced some loss of revenue. A survey of traders from 80 small-scale informal enterprises was conducted during the rapid assessment.

³ Fatoto, Gunjur, Tabanding (CRR), Sabi and Missera.

⁴ Rapid Assessment of the Impacts of COVID-19 on Informal Female Cross-Border Traders at Selected Border Communities in The Gambia, Final Report - August 9, 2021

Only twenty-seven (27) women-led households/cross-border traders were supported in selected border communities. The outcome is rated as moderately satisfactory due to the number of SMEs provided with financial support.

Overall, this evaluation assesses the likelihood of sustainability as likely. The project has shown signs of impact and the capacities and coordination mechanisms developed can be considered adequate.

Consistent with the project design, mainstreaming of gender into the project activities is considered satisfactory. The project activities are well aligned with the objectives pursued in the national blueprint (2018-2021). This was reinforced through project activities focusing on sensitizing women on critical issues including preventing Covid-19, and the financial support provided to women-led households and female cross-border informal traders.

Several lessons were learnt from the implementation of the project. Twelve are presented in this report and key amongst them: 1. the project was anchored on **both international and national COVID-19 policies and plans** which has guaranteed ownership 2. **Effective collaboration** with key stakeholders brought about efficacy and coherence in approach 3. **Community leaders and VDC members** led the design and implementation of community engagement activities that promoted good hygiene practices 4. **The lack of treatment centres and ambulances as well as the non-identification of primary health care centres** were shortcomings that contributed to the ineffective surveillance and control of travellers crossing the border.⁵

1. INTRODUCTION

The World Health Organization (WHO) declared COVID-19⁶ as a Public Health Emergency of International Concern on January 30, 2020. Under its leadership, a Global Preparedness and Response Plan for COVID-19 was launched on 3 February, emphasizing the criticality for the United Nations and partners to urgently contribute to preparedness and response efforts.

The first COVID-19 confirmed diagnosis occurred in March 2020. The first, imported case, increased to 3 confirmed cases and 1 death within the space of one week: this rapid growth in a short timespan led Gambia's authorities to call for the official closure of airspace and land borders between The Gambia and Senegal on 23 March 2020.

⁵ An infectious disease spread mainly through droplets of saliva or discharge from the nose when an infected person coughs or sneezes

1.1. Project Context

The project “Enhancing Gambian Authorities’ Preparedness and Response to COVID-19”, **with a USD 200,000 budget financed under Swiss State Secretariat for Migration** was implemented within a 12-month period, officially closing on 12 August 2021.

The project’s overall objective was to assist the Government of The Gambia prepare and respond to the COVID-19 outbreak by providing operational and technical support in migration and health. The expected impact was to halt further transmission of COVID-19 and mitigate the public health, social and economic impacts of the outbreak.

The project had four key objectives:

- Reduce and delay the transmission of COVID-19,
- Minimize serious disease due to COVID-19 and reduce associated deaths,
- Ensure ongoing essential health services particularly during epidemic peak periods, and
- Minimize social and economic impact through multisectoral partnerships.

Accordingly, the project worked to achieve five key outcomes:

1. **Improved coordination and partnership** among key actors working at points of entry (POEs).
2. Through the Risk Communication and Community Engagement (RCCE):
 - a. **Improved hygiene practices and barrier measures** and
 - b. decrease stigma and discrimination among migrants, mobile populations, and border communities.
3. **Enhanced surveillance and preparedness** at select points of entry (PoEs) and border communities.
4. **Enhanced Water, Sanitation and Hygiene (WaSH)** at border communities to promote Infection Prevention and Control (IPC).
5. **Improved levels of household incomes** for informal cross-border traders and households.

The project was implemented by the International Organization for Migration (IOM) in partnership with national actors which included the Ministries of Health, Interior, Trade and Employment, The Gambia Immigration Department and Civil Society Organizations (CSOs). In total twelve (12) institutions and organizations cooperated to achieve the project’s objective.

1.2. Rationale and Purpose of the Evaluation

The present assignment consisted in carrying out an end of project evaluation (EPE) of the subject project. Consistent with OECD/DAC guidelines, the overall objective was to assess the effectiveness, efficiency, relevance, outcomes, and sustainability of initiatives aimed at enhancing the capacity of The

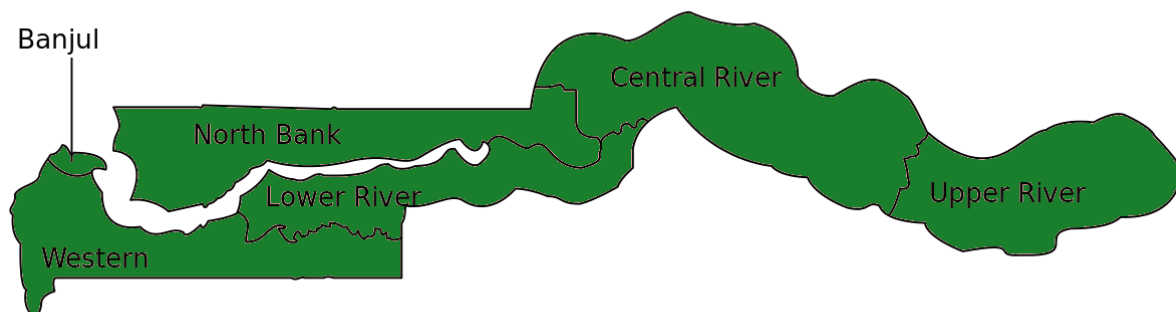
Government of The Gambia to respond to the COVID-19 pandemic; build evidence of the results, and highlight the strategies that have contributed to, or hindered, the achievement of set results.

Specifically, the end evaluation:

1. Assessed the project's effectiveness and potential measurable impact on Points of Entry (POEs) and border communities.
2. Assessed project implementation and associated challenges.
3. Assessed the extent to which the outcomes of the project have been achieved.
4. Assessed the effectiveness of beneficiary accountability system and mechanisms that were used during the project implementation period.
5. Assessed whether the resources (financial, human, and material) were efficiently and effectively used for the desired impact on the target groups.

1.3. Scope and Structure of the Report

The end project evaluation **covers all five geographical regions where project activities were carried out**. These are North bank Region (NBR), Central River Region (CRR), West Coast Region (WCR), Lower River Region (LRR) and Upper River Region (URR) as shown in Figure 1 below:



The EPE report is structured as follows: **Section 2** describes our approach to the assignment including the evaluation criteria, evaluation methods and the limitations for the evaluation. It is followed by **Section 3**, main findings, which provides an assessment of the project results in line with the OECD/DAC evaluation criteria of relevance, effectiveness, efficiency, and sustainability. Cross-cutting issues of gender and human rights are also assessed. **In Section 4**, key lessons learned are underlined. Finally, recommendations are provided in **Section 5**. The EPE report is also supported by several annexes, including the minutes of the stakeholder consultations and the FGDs, to complete evidence to the results.

2. METHODOLOGY

The evaluation was conducted in four phases described in figure 2 below:



It included an inception phase, an analysis and evaluation phase and finally a validation and closure phase. This section presents in more detail the methodology that was followed in the conduct of the EPE. Accordingly, we first discuss the evaluation criteria (Section 2.1), the evaluation methods (Section 2.2) as well as the limitations for the EPE (Section 2.3). The Inception report, which was a key deliverable of this assignment, describes in further detail the principles, approach, and evaluation methodology.

2.1. Evaluation Criteria

To respond to the evaluation objectives, an Evaluation Matrix was produced at inception. This is provided in **Annex 1**. It focuses on four key criteria⁷: relevance, effectiveness, efficiency, and sustainability. Gender and human rights were additional crosscutting evaluation criteria. For each of these evaluation criteria, the matrix features key evaluation questions to be addressed, including data and information sources, data collection methods, etc. For each of these criteria several questions were identified and agreed with the implementing agency. These questions guided the evaluator carry out the assessment. Additionally, project effectiveness was measured with reference to the harmonized evaluation criteria for Implementation Completion Reports (ICR) and OED Evaluations. The rating scale⁸ is included in the **annex 2**.

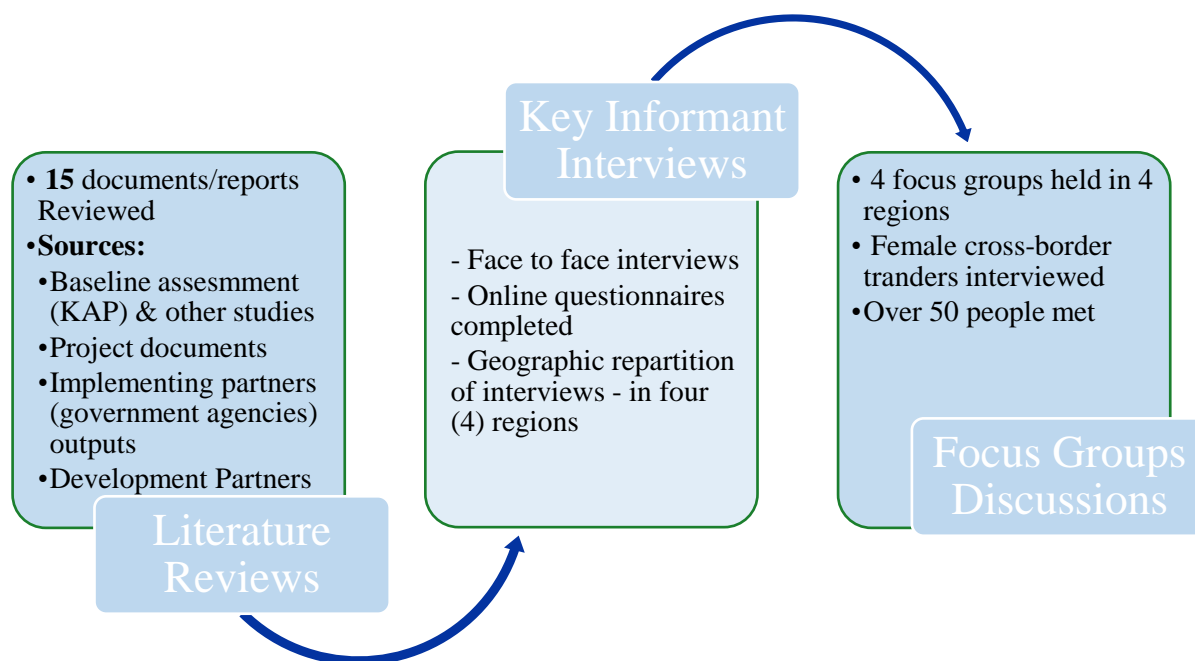
2.2. Evaluation Methods

A combination of qualitative and quantitative methods for data collection were used for this EPE.

Qualitative methods involved literature reviews, key informant interviews (KIIs) and focus group discussions (FGDs) with the executing agency, beneficiaries, and partners. The baseline assessment of knowledge, attitudes, and practices (KAP) towards Covid-19 and the rapid assessment of the impacts of Covid-19 on female cross-border traders (August 2021), were specifically useful sources of information for this EPE. **Figure 3 below** describes how the evaluation was conducted.

⁷ The evaluation matrix follows the OECD/DAC evaluation criteria for the evaluation of development interventions

⁸ <https://ieg.worldbankgroup.org/sites/default/files/Data/reports/harmonizeevalcriteria.pdf>



At inception, emphasis was placed on reviewing key documents made available by the IOM, the executing agency, which included: the project proposal document and work plan; summary status report; outputs and reports from the project’s activities; baseline assessment report (KAP); government policy documents and reports; project field visit reports; and various outputs and reports from key partners. Consultation with partners and beneficiaries was organized at both the central (GBA) and regional levels. At the central level, interviews were conducted with the executing agency, IOM and with representatives of government agencies closely involved with the project. Follow-up telephone inquiries were also carried out with some of the partners. Furthermore, the team endeavoured to systematically include women representatives in each region to ensure that the gender perspective was considered.

2.3. Limitations for the Evaluation

Despite progress made in containing Covid-19 pandemic, WHO guidelines and GoTG regulations were still in force limiting travel and public gathering with multiple stakeholders. Consequently, while the evaluation was careful in ensuring that, the number of consulted stakeholders during the different meetings was regrettably limited. This eventuality was foreseen during inception and mitigation measures were identified. Accordingly, the evaluator was able to gather information to corroborate evidence collected during the field visits. Therefore, no discernible negative impact was identified. The evaluator is satisfied that it was able to have access to a diverse group of stakeholders and benefitted from information coming from a large spectrum of stakeholders. The project was not yet due for

financial audits. Thus, the evaluator has not received the audit report or any other detailed financial analysis report of project. **There were no other significant limiting factors.**

FINDINGS

In this section, we present our findings in line with the Organization for Economic Co-operation and Development's (OECD) Development Assistance Committee's (DAC) evaluation criteria of Relevance, Effectiveness, Efficiency and Sustainability.

2.4. Relevance

The pandemic was an event of global proportions. Accordingly, addressing COVID in The Gambia can be seen as relevant not only to Gambian stakeholders, nationally and locally, but also to the world. At the international level, the efforts of The Gambia were recognized. Its ability to maintain stricter and better controls at their Points of Entry earned it international recognition for its efforts.

In reviewing project design, the evaluator considered the alignment with good international practices. The project document highlighted how project components were anchored on the **IOM Global Strategic Preparedness and Response Plan** and aligned with the **WHO Strategic Preparedness Plan** and the **UN Framework for the immediate socio-economic response to COVID-19**. Accordingly, part of the evaluation process was to determine how this alignment was cascaded down to outcomes and outputs. Overall, this evaluation finds that the conceptual alignment of the project to good international practices as highlighted by the above-mentioned strategies was significant:

- **Outcome 1** focused on ensuring appropriate coordination and timely responses to the pandemic. This is consistent with **Strategic Priority 1 of the IOM Global Strategic Preparedness and Response Plan**⁹.
- **Outcomes 2 and 3** were focused on ensuring constructive participation of The Gambian authorities with international preparedness priorities; accordingly, they are aligned with Strategic Priority 2¹⁰:
- **Outcome 5** focused on identifying and mitigating the economic impact of the pandemic on at-risk populations, and accordingly it is relevant to **Strategic Priority 4**¹¹ of the IOM Global Preparedness and Response plan.

⁹ : Ensure a well-coordinated, informed, and timely response through mobility tracking systems and strengthening partnership and coordination structures established at the community, national and regional levels

¹⁰ Contribute to global, regional, national and community preparedness and response effort

¹¹ : Support in responding to the socio-economic impacts of COVID-19.

At the national level, the project activities undoubtedly responded to both the **health and humanitarian dimensions** of the **GoTG’s COVID-19** response plan, which was anchored on lessons learned from the successful implementation of the National Ebola Virus Disease Plan (NEVDP, 2015). The plan seeks to amongst other things, strengthen surveillance, risk communication, community engagement, logistics support and the safety of health workers. Etc.

At the local level, due to the global extent of the virus and the imminent risks to the border communities, the project interventions were relevant in minimising the health and socio-economic impact on these vulnerable communities. With migrant and mobile populations moving across porous borders, **Outcome 2** was quite relevant in **decreasing stigma and discrimination as well as protecting communities from further spread of the disease**.

Overall, the project presents a robust design, a unified approach, and a well-structured strategy. There is strong coherence between the components and activities, which reinforced the achievement of improved synergies. The Theory of Change (ToC) incorporates initiatives that are strongly interconnected. During project design, the Ministry of Health, a key partner, was involved in the needs assessment.

2.5. Effectiveness

In terms of results achievement, this section shows areas where there have been real successes and areas where success has been elusive. The sub-sections below present the effectiveness of the five project outcomes and the six outputs in terms of their progress towards achieving the end project targets.

2.5.1. Outcome 1: Improved coordination and partnership among key actors working at points of entry (POEs)

Strategic Priority 1 of the IOM’s COVID-19 Global Strategic Preparedness and Response Plan, seeks to ensure a well-coordinated, informed, and timely response through mobility tracking systems and **strengthening partnership and coordination structures** established at the community, national and regional levels. Strengthened partner coordination helps to enhance resource mobilization, create synergies, and harmonise activities for an effective covid-19 response. **Under Outcome 1, the project supported inter-agency cooperation and collaboration** to ensure that migrants and border communities were included in cross-border coordination and in a more coherent manner.

Table 1: Assessment of targets under Outcome 1

Indicator	Baseline	Target	End project
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			Actuals	Assessment
Outcome 1: Improved coordination and partnership among key actors working at points of entry (PoE).				
% Increase in POEs with strengthened inter-agency coordination and reviewed contingency plans	0	40%	100%	Overall Assessment: Highly Satisfactory¹² <ul style="list-style-type: none"> ◆ Five more Points of Entry (POEs) were identified & supported ◆ Inter-Agency Border Coordination Committees (IABCC) established at five land border posts - Nyamanarr, Misera, Dimbaya, Darsilameh and Kartong. ◆ Detailed Terms of Reference were developed for the IABCC ◆ Review of sample minutes of monthly IABCC meetings provide evidence that effective contingency planning and review in terms of preparedness, was carried out.

2.5.2. Output 1.1: Border officials regularly exchange information and review contingency preparedness and response plans at borders

Interagency border coordination meetings were held each month and minutes were provided as a basis for the regular reviewing of response plans. Leveraging on technology, a WhatsApp group was created, which facilitated effective collaboration with Senegalese border officials as well as sharing operational information with IOM. **For the Director of Public Health¹³**, a key lesson learnt was that preventing and controlling disease outbreaks requires that the key partners collaborate effectively towards this common goal.

Table 2: Assessment of targets under Output 1.1

Indicator	Baseline	Target	End project	
			Actuals	Assessment
Output 1.1: Border officials regularly exchange information and review sub-national preparedness and response plans at borders.				
Number of POEs holding inter-agency coordination committee meetings and regularly exchanging information on preparedness and response to COVID-19	0	4	4	Overall Assessment: Highly Satisfactory <ul style="list-style-type: none"> ◆ The IABCCs were effective: (i) regular monthly meetings were held (ii) strengthened operational capacities of border management, and (iii) regular exchange on border security and disease surveillance. ◆ A WhatsApp group was created to facilitate the sharing of information between IOM and the operational teams.

¹² Evidence for this outcome was completed by the FGD with the GID – the Commissioner and team, as co-chair and secretariat for the IABCC, provided valuable information on the establishment of the POEs and the functioning and effectiveness of the committees.

¹³ During stakeholder consultations held virtually

2.5.3. Outcome 2: Improved hygiene practices and barrier measures and decreased stigma and discrimination among migrants, mobile populations, and border communities

Under Outcome 2, and more specifically the **RCCE pillar**, the project developed strategies that guaranteed that migrants and mobile communities have access to timely and coherent information. This is in line with **Strategic Priority 2**¹⁴: Contribution to global, regional, national and community preparedness and response efforts. ‘‘Public adherence to Infection Prevention and Control (IPC) measures is of prime importance to mitigating the spread of the Novel Coronavirus Disease-2019 (COVID-19). **Adherence, however, is largely influenced by their knowledge, attitudes, and practices (KAP) towards the disease**’’ (Knowledge, Attitudes and Practices towards Covid-19 among birder communities in The Gambia: A baseline Assessment. Feb. 2021)

Table 3: Assessment of targets under Outcome 2

Indicator	Baseline	Target	End project	
			Actuals	Assessment
Outcome 2: Improved hygiene practices and decreased stigma and discrimination are solidified among migrants, mobile populations, and border communities.				
Percentage shift in knowledge, attitudes, and practices (KAP) toward COVID-19	KAP assessment	+10% measured increase in KAP	>50%¹⁵ increase in KAP	Overall Assessment: Highly Satisfactory <ul style="list-style-type: none"> ◆ The KAP assessment ¹⁶ revealed at baseline, that the survey respondents were generally knowledgeable about COVID-19. Almost all the respondents 378 (94.5%) have heard about COVID-19 ◆ FGDs: In all the communities visited, members are aware of the virus due to the sensitization activities carried out particularly through the community radios¹⁷ ◆ FGDs have confirmed that despite the inadequate supply of clean water, COVID-19 protocols were mainly adhered to. ◆ FGDs in Misera and Kerr Ali: Travelers were asked to observe handwashing and similar COVID-19 hygiene practices

2.5.4. Output 2.1: Migrants, mobile populations and border communities receive timely and accurate information on how to enact context-appropriate hygiene practices and barrier measures

¹⁴ IOM’s COVID-19 Global Strategic Preparedness and Response Plan

¹⁵ Based on qualitative assessment during FGDs.

¹⁶ (Knowledge, Attitudes and Practices towards Covid-19 among border communities in The Gambia: A baseline Assessment. Feb. 2021)

¹⁷ 11 community radios

The project developed and disseminated **fit-for-purpose Information, Education, and Communication (IEC) material** as well as messages that were culturally “acceptable” to avoid stigmatization. These included the production of short audio-visual material in two major local languages and providing support to border community leaders to lead the design and implementation of the community engagement activities. All the above were aimed at promoting good hygiene practices and barrier measures.

Table 4: Assessment of targets under Output 2.1

Indicator	Baseline	Target	End project	
			Actuals	Assessment
Output 2.1: Migrants, mobile populations, and border communities receive timely and accurate information on how to enact context-appropriate hygiene practices and barrier measures				
2.1.1 Number of multimedia products produced	0	1	1	Overall Assessment: Highly Satisfactory <ul style="list-style-type: none"> ◆ Each video produced in two versions – Wolof and Mandinka with English sub-titles ◆ Community leaders and VDC members led the design and implementation of community engagement activities ◆ The Multi-Disciplinary Facilitation Teams (MDFTs) comprising of GRCS volunteers, health workers and security personnel, were used to disseminate key COVID-19 messages in border communities. ◆ GRCS volunteers played a critical role in reaching out and sensitizing communities. ◆ More than 100 Red Cross volunteers benefited from the capacity building activities funded by this project.
2.1.2 Number of media stakeholders engaged to disseminate key messages on COVID-19	0	15	15 ¹⁸	
2.1.3 Number of border community leaders engaged to design, lead, and implement community engagement initiatives	0	120	221	

2.5.5. Output 2.2: Migrants, mobile populations and border communities sensitized on combatting COVID-related stigma and discrimination

Under Output 2.2, similar activities (disseminating audio-visual material and supporting community leaders in taking the leadership) were carried out as in output 2.1. However, the messaging here aimed at reducing COVID-related stigma and discrimination. In total, fifteen (15) stakeholders (TV and community radios) and two hundred twenty one (221) border community leaders were engaged.

Table 5: Assessment of targets under Output 2.2

Indicator	Baseline	Target	End project	
			Actuals	Assessment
Output 2.2: Migrants, mobile populations and border communities sensitized on combatting COVID-related stigma and discrimination				

¹⁸ 2 national TV, 2 national Radio and 11 community radios

2.2.1 Number of multimedia products produced	0	1	1	Overall Assessment: Highly Satisfactory <ul style="list-style-type: none"> ◆ In NBR, 96 community leaders were involved in leading and implementing community engagement initiatives, 17 in URR, 15 in CRR and 10 in LRR ◆ The Regional Health Directorate (RHD) of North Bank East conducted community engagement on COVID-19 Prevention and Control in border villages ◆ There was no stigma and discrimination towards people that contracted the virus because health officers ensured that these cases were treated confidentially. ◆ FGDs revealed that GRCS volunteers, Health Worker (HW) or officials of the MOH, and information from the radio are the most trusted source for COVID-19 information in the border communities ◆ CRR: Sensitization activities were carried out with the involvement of public health officers
2.2.2 Number of media stakeholders engaged to disseminate key messages on COVID-19	0	15	15 ¹⁹	
2.2.3 Number of border community leaders engaged to design, lead, and implement community engagement initiatives	0	120	221	

2.5.6. Outcome 3: Enhanced surveillance and preparedness at select points of entry (POEs) and border communities

Under Outcome 3, the project supported the Ministry of Health, the Gambia Immigration Department, and other key partners in enhancing border surveillance of migrants and mobile communities crossing the borders. **Surveillance and preparedness at select POEs contributed to health screening, referrals, and data collection.** Referral reports of suspected ill- travellers at POEs were available, but the lack of a treatment center for suspected ill travelers posed a challenge. In addition, due to the porous nature of the borders in the project intervention areas, surveillance and control of travelers' entry and exit processes were ineffective.

Table 6: Assessment of targets under Outcome 3

Indicator	Baseline	Target	End project	
			Actuals	Assessment
Outcome 3: Enhanced surveillance and preparedness at select points of entry (POEs) and border communities				
Referral reports of suspected ill-travellers/migrants at POEs and other unofficial crossing points	No	Yes	Yes	Overall Assessment: Moderately Satisfactory <ul style="list-style-type: none"> ◆ The lack of a treatment center for suspected ill travelers posed a challenge. Blood samples were sent to Kotu which took 2-3 days before results are received. Consequently, travelers were merely guided to adhere to the hygiene protocols; mainly handwashing and the wearing of mask.

2.5.7. Output 3.1: Points of entry (PoEs) provided with border security and medical equipment to support effective surveillance and control of travellers' entry and exit processes

¹⁹ 2 national TV, 2 national Radio and 11 community radios

Under Output 3.1, six (6) motorcycles were provided for regular border patrols and surveillance. Queue lines, data collection kits and hygiene kits were provided for border patrol units²⁰. The timely intervention of the project at the onset of the outbreak, in providing personal protective equipment (PPE), was highly welcomed by partners - both the GID and the MOH. Our consultations revealed that the number of motorcycles provided under the project were not adequate for effective surveillance. Furthermore, due to the erratic nature of electricity supply, the computer provided for the Missera border post was barely functional.

Table 7: Assessment of targets under Output 3.1

Indicator	Baseline	Target	End project	
			Actuals	Assessment
Output 3:1: POEs provided with border equipment to support effective surveillance and control of travelers’ entry and exit processes				
Number of POEs supplied with border equipment for surveillance and control of travellers	0	4	4	Overall Assessment: Moderately Satisfactory <ul style="list-style-type: none"> ◆ 6 motorcycles were received and distributed to border posts ◆ Border posts such as Nyamanarr, Misera, Kartong and Darsilameh received equipment for surveillance. ◆ Consultation at Misera border post revealed that the computer provided for data input was not of much use because electricity supply remains erratic.

2.5.8. Outcome 4: Enhanced Water, Sanitation and Hygiene (WaSH) at border communities to promote Infection Prevention and Control (IPC)

“The provision of safe water, sanitation and hygiene is an essential part of prevention efforts during infectious disease outbreaks, including the COVID-19. Combined with improved access to WaSH services, infection prevention and control measures are an effective way to prevent or limit transmission of the disease” (IOM’s COVID-19 Global Strategic Preparedness and Response Plan). **Under Outcome 4**, the project provided adequate water source to select border communities²¹ through the construction of solar-powered boreholes.

Table 8: Assessment of targets under Outcome 4

Indicator	Baseline	Target	End project	
			Actuals	Assessment
Outcome 4: Water, Sanitation and Hygiene (WaSH) is enhanced at border communities to promote Infection Prevention and Control (IPC)				

²⁰ Dell Inspiron 54002 in 1 Laptop, Surgical face mask, Queue poles with lines (0.90M), etc.

²¹ Fatoto, Gunjur, Tabanding (CRR) and Missera.

Number of people gaining access to adequate and safe water facilities and services through new construction and rehabilitation of water systems	N/A	500	>1000	Overall Assessment: Satisfactory 4 boreholes and 3 handwashing stations were constructed in Fatoto, Missera, Tabanding and Gunjur with over >1000 community members.
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2.5.9. **Output 4.1:** Migrants, mobile populations and border communities are provided with adequate water and sanitation services

Under output 4.1, the project provided (i) water supply to select border communities through the construction of solar-powered boreholes and (ii) hygiene kits to household members of border communities.

Table 9: Assessment of targets under Output 4.1

Indicator	Baseline	Target	End project	
			Actuals	Assessment
Output 4.1: Migrants, mobile populations, and border communities are provided with adequate water and sanitation services				
4.1.1 Number of boreholes constructed	N/A	2	4	Overall Assessment: Satisfactory ◆ 4 boreholes and 3 handwashing stations were constructed in Fatoto, Missera, Tabanding and Gunjur
4.1.2 Number of households provided with hygiene kits	N/A	200	>200	Overall Assessment: Satisfactory ◆ FGDs confirm that out of 77 households, 70 were provided hygiene kits in Misera border community- LRR, and up to 100 households in Tabanding- CRR. ◆ 48 border communities were provided with hygiene kits in NBE and 41 communities in URR

2.5.10. **Outcome 5:** Improved household incomes for cross-border traders and households

In collaboration with MOTIE, the project funded an assessment²² to quantify the likely impact of COVID-19, focusing on informal female cross-border traders. In terms of the financial implications of COVID on SMEs. A key finding of the study was that before the outbreak, 87% of the SMEs operated with profit, and only 13% were losing money. Since the pandemic, about 91.3% of the SMEs experienced some loss of revenue. The study further identified areas where a short term-boost to sustain cross-border income-generating activities can mitigate further damage to livelihoods as well as recommending short to long term measures necessary to sustain the intervention.

²² Rapid Assessment of the Impacts of COVID-19 on Informal Female Cross-Border Traders at Selected Border Communities in The Gambia, Final Report - August 9, 2021

Table 10: Assessment of targets under Outcome 5

Indicator	Baseline	Target	End project	
			Actuals	Assessment
Outcome 5: Improved household incomes for cross-border traders and households				
Change in households with improved incomes	0	70	27	Overall Assessment: Moderately Satisfactory <ul style="list-style-type: none"> ◆ FGD/ MOTIE confirm that 27 people were supported to improve their incomes. ◆ FGDs with most of the beneficiaries show that the cash received helped to stabilize these informal businesses.

2.5.11. Output: 5.1 Informal cross-border traders and households cushioned by the impacts of the pandemic

A survey of traders from 80 small-scale informal enterprises was conducted during the rapid assessment. Twenty-seven (27) women-led households/cross-border traders were supported in selected border communities.

Table 11: Assessment of targets under Output 5.1

Indicator	Baseline	Target	End project	
			Actuals	Assessment
Output: 5.1 Cross-border traders and households cushioned by the impacts of the pandemic				
5.1.1 Number of assessments done on COVID -19 impact on informal cross-border trade	0	1	1	Overall Assessment: Moderately Satisfactory <ul style="list-style-type: none"> ◆ In collaboration with MOTIE, the project funded an assessment to quantify the likely impact of COVID-19, focusing on informal female cross-border traders.
5.1.2 Number of cross-border traders or households provided with livelihoods support	0	70	27	<ul style="list-style-type: none"> ◆ 27 female cross-border traders received cash disbursement. ◆ FGDs with beneficiaries in North Bank and URR confirm that each one of them received a sum of GMD 46,000.00 (equivalent of US\$1000)

2.5.12. Management

Overall, project management is assessed as being effective. The establishment and the functioning of the inter-agency coordination committees has strengthened operations in terms of the review of contingency plans and for rapid intervention. IOM has leveraged on its experience in migration management both nationally and internationally, in effectively coordinating the intervention of partners' efforts. During the key informant interviews, partners have expressed satisfaction with the management in particular, the timely intervention in making PPEs and other essential supplies available. They however lamented the fact that the lack of a project steering committee may negatively affect sustainability of outcomes. The project has achieved a disbursement rate of over 90% at closure. This is a very satisfactory performance.

2.5.13. Communication

Communication is considered satisfactory. Again, the IABCC met regularly and leveraged on technology to share timely operational information amongst themselves, with the Senegalese border authorities, and with the IOM. The partners also had experience of previous working relations (GID, DPH, IOM, GRCS) and the IABCC activities further strengthened the collaboration. The evaluation team reviewed minutes of monthly IABCC meetings and IOM project updates as part of this assessment.

2.5.14. Reporting

Project reporting Satisfactory. Reporting on the project activities was provided for through an interim report covering the initial six months of project implementation and a final cumulative report. Both reports should include cumulative financial information. The evaluation team received a 3-page report entitled “summary of key activities under the project”. This summary does not include cumulative financial information to enable us to assess the efficiency or otherwise of the project. Nonetheless, it is the evaluator’s assessment that the report provides an accurate description of what has been done over the life of the project. This was substantiated from the activity reports provided by the partners, the minutes of the IABCC and from information gathered during the FGDs

2.5.15. Partnership

Given IOM’s extensive experience in partnering with governments and communities to prevent, detect and respond to health threats along the mobility continuum, the agency is actively participating and contributing to a series of thematic working groups in line with the government’s national response plan. The activities carried out under the project were guided by the response plan, in coordination with other key government and civil society partners²³.

2.6. Efficiency

Under efficiency, the EPE assessed if implementation of project activities were on schedule and on budget, how the M&E system contributed to overall efficiency and effectiveness, and how the collaboration of stakeholders contributed to achieving better outputs and outcomes with less resources. The evidence provided reveal that all the major project activities were completed by the closing date. This is quite an achievement given the context and the operations relating to a pandemic. It is noted that the project budget of US\$200 000 is well below the amount of US\$975 000 funding required for The

²³ Include the Ministry of Health; the Ministry of Interior and The Gambia Immigration Department; the Ministry of Trade, Industry, Employment and Regional Integration; the National Youth Council and The Gambia Red Cross Society

Gambia as per IOM's COVID-19 Global Strategic Preparedness and Response Plan²⁴. This ostensibly explains the shortfall in the provision of essential equipment such as motorcycles, inadequate access to water supply and the level of financial and technical assistance provided to female cross-border traders, amongst others.

2.7.Sustainability

Overall, this evaluation assesses the likelihood of sustainability as very likely. The project has shown signs of impact and the capacities and coordination mechanisms developed can be considered adequate. Partners' performance is likely to be sustained. Further adoption and scaling up of the activities are possible. The commitment demonstrated by the partner institutions has been strong.

2.7.1. Activities and mechanisms in place

The project has succeeded in reinforcing coordination among key actors operating in the health and security sector. The IABCC has the potential of being institutionalised given the benefits that accrued from one year of project implementation. It has been the main highlight of the FGDs with the GID, the Ministry of Health and the operational teams at the borders. We have not received any evidence to demonstrate that the project activities include plans to sustain the coordination mechanisms post-project implementation.

2.7.2. Capacity Building

Training and capacity building was a key component of the project. The project supported the Ministry of Health, The GRCS, and other border authorities and partners to enhance prevention and response measures at POEs, through training immigration and border health staff on management of ill travellers and on best practices on infections prevention and control. Going forward, strengthening the capacities of frontline workers at POEs would help reduce the risk of infection.

2.7.3. Community Participation

Community participation in designing and leading key intervention efforts has been a feature of this project, as is highlighted in previous sections of this report. About 148 border community leaders were engaged to design, lead, and implement community engagement initiatives. A dozen community radios participated in the sensitization activities. The VDC and other direct beneficiaries in the communities

²⁴ We have received information on a project funded by the Japanese government - strengthening operational capacities for Gambian authorities to manage borders, respond to health crisis and socio-economic impacts of covid-19, for US\$750 000, which has similar components and activities as the project under review.

were equally involved. These are critical success factors for buy-in, ownership and the sustainability of the ensuing project outcomes.

2.7.4. Financial resources

Sustaining project outputs and outcomes largely depends on the institutional capacity developed by the project as well as government allocating adequate resources in the post project phase. Despite the many useful achievements, our assessment suggests that sustainability of some successful project outputs is at risk.

Cross cutting Issues

2.7.5. Gender

Consistent with the project design, mainstreaming of gender into the project activities is considered satisfactory. The project activities are well aligned with the objectives pursued in the national blueprint (2018-2021): to promote gender equity, and empowerment of women for sustained socio-economic development. This was reinforced through project activities focusing on sensitizing women on critical issues including preventing Covid-19, and the financial support provided to women-led households and female cross-border informal traders. Twenty-seven (27) women-led households/cross-border traders were supported in selected border communities. Additionally, project design and activities ensured that gender disaggregated information was generated for evidence-based decision-making. About US\$29 280 (15%) of the total project budget was allocated to supporting SMEs to mitigate the socio-economic impact of Covid-19. This is in line with the principles of gender responsive budgeting.

2.7.6. Human Rights

Overall, the evaluation considers that human rights issues have been satisfactorily addressed. There is no evidence to the contrary even though the National Human Rights Commission (NHRC) was not involved as a partner. Project activities have ensured that human rights have been addressed and have contributed to increased beneficiary inclusion, more equitable access to project resources and the involvement of community leaders and other members in designing, planning, and implementing project activities and in decision-making.

3. LESSONS LEARNED

The following lessons have been derived from the findings in this report:

1. **Anchored on both international and national COVID-19 policies and plans, there is a clearly strong coherence** between the project activities, outputs, and outcomes. A strong alignment of project outcomes with national and local needs and priorities results to a sustainable impact.
2. The number of motorcycles provided to facilitate border surveillance were grossly inadequate.
3. **Collaboration with other stakeholders brought about efficacy and coherence in approach.** Useful information such as challenges encountered by different POEs was shared during the inter-agency meetings and follow-up actions agreed to.
4. **Community leaders and VDC members led the design and implementation of community engagement activities that promoted good hygiene practices.** This contributed to an increased number of community members who believe in the existence of the virus.
5. FGDs revealed that the GRCS volunteers, Health Workers (HW) or officials of the MOH, as well as information received from the radio, **are the most trusted sources of COVID-19 information in the border communities.**
6. **Sensitising communities to adhere to “stay-home” regulations, should be accompanied by financial or other forms of support.** Communities did not fully comply with strict protocols as their livelihoods depend on daily income from menial jobs and informal trade with neighbouring Senegal.
7. **The lack of treatment centres and ambulances as well as the non-identification of primary health care centres** were shortcomings that contributed to the ineffective surveillance and control of travellers crossing the border.
8. **Because 12% of SMEs expressed their need for technical assistance on business plan development, the rapid assessment of the COVID-19 impacts** recommended that the project consider technical support and mentorship schemes for informal cross-border traders. Technical assistance and training support was not provided to the women-led SMEs; therefore, funds were utilised for purposes not related to sustaining their informal businesses.

9. **Project partners were limited to institutions that are involved in the operational aspects of Coivid-19** and in border management. Government institutions operating at a more strategic level were not involved.

4. RECOMMENDATIONS

The recommendations presented here aim to enhance the relevance, effectiveness, efficiency, and sustainability of future and ongoing IOM-implemented projects. The recommendations presented (i) are made with the intention of enhancing and sustaining project outcomes and (ii) relate to interventions that will improve the quality of programming of future IOM and partner efforts. The following key recommendations should be considered:

Recommendation 1: The inter-agency committees were effective in coordinating the operations of the project. Continuous coordination beyond project closure should be done by the members of the committee.

Recommendation 2: To harmonise donor interventions, enhance aid coordination and increase the potential of resource mobilisation

Recommendations 3: In addition to the financial support, training and technical assistance in business and financial management should be provided to the SMEs. This would facilitate proper management of their fledging businesses and more importantly, help them transition to formal trade.

Annex 1: Evaluation Matrix, Criteria, Questions, Respondents and Data Source

CRITERIA	EVALUATION QUESTIONS	Development partners	Project Management Team	Government Partners	Beneficiary Groups	DATA SOURCE
RELEVANCE	Were the needs of the project beneficiaries (COVID-19 Affected Population, Travelers, Migrants, The Gambia Immigration Department Officers, Public Health Officers, Border Communities, and Informal cross border traders) adequately assessed and factored in the project design?					Documentary data, Semi-structured individual interviews, focus groups with stakeholders
	Have national (NDP) and development partners (IOM, WHO, United Nations) priorities been factored in the project design?					
	Have all relevant due diligence considerations been carried out or incorporated into the project design?					
	To what extent have lessons or best practices from similar projects been incorporated?					
EFFECTIVENESS	To what extent were the objectives of the project achieved?					Documentary sources Secondary
	Were the set objectives achieved within the allotted time?					
	Is there sufficient institutional capacity of the actors, in terms of resources, logistics, management and the monitoring of activities to continue the provision of services?					
IMPACT	How has project activities changed the perspectives of the people towards Covid-19?					Interviews with resource persons Focus groups
	To what extent has the project contributed to the delay of the transmission of Covid-19?					
INTEGRATION OF HUMAN RIGHTS	To what extent have the project design and implementation process influenced human rights of children, youth, women, persons with disabilities, older persons, and other marginalized groups?					Baseline surveys Focus group Interviews
INTEGRATION OF GENDER EQUALITY	To what extent has gender equality been addressed in the design, implementation, and monitoring of the Project?					Baseline surveys Focus group Interviews
CREATION OF PARTNERSHIP	To what extent has the project maintained and supported meaningful partnerships with relevant and targeted institutions to achieve its objectives?					Interviews with resource persons Focus groups

Annex 2

Harmonized evaluation criteria for ICR and OED Evaluations - these guidelines apply to both investment and development policy lending. they were developed by a working group comprising staff from OPCS, OED and the regions.

SCALE	DEFINITION
<i>Highly Satisfactory</i>	There were no shortcomings in the operation's achievement of its objectives, in its efficiency, or in its relevance.
<i>Satisfactory</i>	There were minor shortcomings in the operation's achievement of its objectives, in its efficiency, or in its relevance.
<i>Moderately Satisfactory</i>	There were moderate shortcomings in the operation's achievement of its objectives, in its efficiency, or in its relevance.
<i>Moderately Unsatisfactory</i>	There were significant shortcomings in the operation's achievement of its objectives, in its efficiency, or in its relevance.
<i>Unsatisfactory</i>	There were major shortcomings in the operation's achievement of its objectives, in its efficiency, or in its relevance.
<i>Highly Unsatisfactory</i>	There were severe shortcomings in the operation's achievement of its objectives, in its efficiency, or in its relevance.

