

Final Evaluation Report on COVID-19 Preparedness and Responses Project Implemented with the support of Sida in Six countries of Southern and the Horn of Africa.

An Internal Evaluation

Project Information

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Evaluation Information

Evaluation Commissioner	IOM Ethiopia
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TITLE PAGE

Final Evaluation Report on the Relevance, Effectiveness, Efficiency, and Accountability of COVID-19 Preparedness and Responses Project Implemented with the support of Sida in Six countries of Southern and the Horn of Africa.

ABBREVIATIONS

BCPs	Border Controlling Points
DAC	Development Assistance Committee
DTM	Displacement Tracking Matrix
FMR	Flow Monitoring Registry
IDPs	Internally Displaced Persons
IEC	Information and Education Communication
IGAD	Inter-Governmental Authority for Development
INGOs	International Non-Governmental Organizations
INSD	Djibouti National Institute of Statistic
IOM	International Organization for Migration
IPC	Infection Prevention Control
MoH	Ministry of Health
MoU	Memorandum of understanding
OECD	Organization for Economic Co-operation and Development
ONARS	National Office for the Assistance of Refugees and Disaster Victims
PM	population mobility mapping
PoEs	Points of Entry
PPE	Personal Protective Equipment
PRISM	Process, Resources, Integrated System Management
RCCE	Risk Communication and Community Engagements
RMMS	Regional Mixed Migration Secretariat
SADC	South African Development Community
SEGRC	Executive Secretariat for Risk and Disaster Management
Sida	Swedish International Development Cooperation Agency
SNNP	Southern Nations, Nationalities, and Peoples'
SOPs	Standard Operating Procedures
SPRP	Strategic Preparedness and Response Plan
ToR	Terms of Reference
UN	United Nation
WASH	Water, Sanitation and Hygiene
WHO	World Health Organization

EXECUTIVE SUMMARY

In response to the COVID-19 pandemic, IOM in coordination with Sida had been implementing a COVID-19 response and preparedness project from 10 July 2020 to 31 March 2021 in six countries of Southern and the Horn of Africa (Djibouti, Ethiopia, Kenya, United Republic of Tanzania, Mozambique, and Malawi). The project aimed to support these Member States' COVID-19 response and preparedness efforts along two pillars of collaboration-access to information and capacity building.

To determine project relevance, effectiveness, efficiency, coordination and accountability, IOM conducted an internal final project evaluation. To meet the evaluation objectives, the study employed a qualitative content analysis method. Primary data was collected from Member State Project Focal Persons, IOM Project Managers, Border Management Officials, Stranded Migrants, and Border Controlling Points/Points of Entry (PoEs). Data were collected through a key informant and in-depth individual interviews, and facility assessments. Relevant secondary information such as project documents, project reports, literature, government reports and records, national surveys, etc. were also consulted to substantiate the final evaluation. Finally, the information collected through these methods were later categorized, coded by theme, analysed, and narrated in a meaningful way.

Findings:

Relevance

The project was found relevant to the target Member States and vulnerable migrants. It was based on consultation and need assessments, and addressed the priority needs of Member States. However, the project faced challenges to meet Government demands with the available resources. Some human resources and material assistance particularly PPE were reported as unmet needs. Member States' project focal person also reported that they were satisfied with the project deliverables, particularly, access to information and capacity to manage migrants improved due to the project implementation.

Effectiveness

The project effectiveness was found very good with an average achievement of 99 per cent. All the outputs were achieved, in many cases, more than what was originally planned. Of the 24 project output indicators, 22 achieved 100 per cent and above, two indicators achieved with a range of 80 to 90 per cent. In some of the project areas, indicators were also timely modified to fit into the context and address government partners priority gaps. In most of the project target areas, the migrant flow monitoring exercise and information provision about the COVID-19 pandemic was new and couldn't be delivered with the existing government capacity. Therefore, the project support was found effective in filling those gaps in the target areas.

Efficiency

The final evaluation found that the project budget burn rate was 100 per cent. In most cases, budget vs activities and outputs expenditure went as planned. However, the final evaluation found that some of the project budget lines either overspend or underspent despite all the monthly coordination meetings and follow ups. Delayed project start up also reported. In most of the Missions, the project started on average after two months of delays.

Coordination

Coordination meetings both at the central and mission's levels were successful in supporting the project staff to implement the project activities in a short period. At the mission level, the project managers support the field staff through direct supportive supervision to ensure the quality implementation of project activities. The project coordination with government partners was also effective in promoting their active participation in planning, implementing, and monitoring and evaluating the project activities.

Accountability

The project accountability to its target Member States and vulnerable migrants, and the donors was found satisfactory. All accountability indicators such as Memorandum of Understanding (MoU) signed off by all Missions; in most of the mission project kick off meeting conducted taking all the necessary COVID-19 measures, and using different approaches, like virtual meeting platforms; project reports and flow monitoring updates were shared to government partners, stakeholders and the donor on monthly basis. However, few governments partners project focal persons didn't get information about all the commitments and deliverables of the project except DTM dashboards.

Lesson Learned

The population mobility mapping exercise supported government partners to identify high traffic mobility corridors including irregular mobility corridors and then established border control points. In some of the Member States, DTM was implemented for the first time with the support of this project and becoming the major source of information about displacement affected persons, the COVID-19 pandemic, and migrants on move. Due to this project, multi-sectoral coordination platforms among partners and across governments were also reinforced. In some of the project target areas, project indicators were modified in consultation with the donor to meet the priorities of the Member States and vulnerable migrants.

Recommendation:

Based on the findings described above, the following recommendations are provided for consideration by Project Managers and Programme/Project Support Unit staff in the implementation of ongoing similar projects and designing of new projects in the future.

- IOM needs to strengthen need assessment to the population affected by the crisis to effectively prioritize their needs. During the final evaluation, according to some of the government partners, some of their critical needs were not covered by the project.
- IOM also need to strengthen DTM and flow monitoring activities as this has become a vital source for planning and responding to emergency situations for Governments, partners and other

stakeholders. Adapting DTM exercises to the context is also very important to meet the information needs of the Governments, partners and other stakeholders.

- Project Managers should inform all project target groups about the project commitments and deliverables through project kick off meetings, meetings, social media, posters and banners.
- Considering the back-and-forth communication in the signing of project agreements which creates a delay in project start-up, internal procedures and processes need to be geared up in a way that allows programme support unit staff to take proactive measures as some of the projects are time sensitive to respond to the needs of the population affected by crisis timely. For instance, a temporary project activation system could help to solve this matter. Many organizations are also using internal flexible funds to address such issues until they received the official signed donor agreement.
- As most of the activities supported by this project are still sensitive and very important for the Member States in fighting the COVID-19 pandemic and supporting vulnerable migrants, and given their manpower and financial capacity to sustain these activities, the IOM Programme Support Unit should mobilize resources either with the current donor or others to cover Member States' priority needs in these areas.

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1. INTRODUCTION

1.1. PROJECT CONTEXT AND PURPOSE OF THE EVALUATION

1.1.1. Context

Following the COVID-19 pandemic, many countries put restrictions such as the closure of borders and schools; travel restrictions, trade, and mass gatherings; reduction of economic productivity (like the closure of factories) and public services are some among others. As a result of these measures, communities have been severely affected socially and economically. Since the detection of the first corona case in Africa, the total cases, as of this project concluded, reached about 3,039,220 (WHO, 30 March 2021). Thousands of deaths are also recorded.

Migrants are among the most vulnerable groups that are facing the worst socio-economic impact of the pandemic, compared to non-migrants. According to the UN World Migration report (2020), 271.1 million global migrants were registered. Migration both within and from the African continent has also steadily increased, with 15 to 22 million people annually migrating within Africa alone (IOM 2019). The growing migrants living in different regions of the continent lack social protection on many fronts and would-be victims of prolonged social and economic impacts of the pandemic. Migrants and those living in displacement settings are also more exposed to the conditions in which COVID-19 spreads, which includes limited access to sanitation, poorer living conditions, and overcrowded settings. These groups may also have an over-representation of preexisting health issues and lack access to COVID-19 prevention supports, such as Personal Protective Equipment (PPE), including a face mask, sanitizer, and gloves. Usually, it would also be challenging for them to practice social distancing. Migrants were and are also at greater risk of being returned to their countries of origin against their will and thereby highly impacted economically and socially.

The same holds true for migrants stranded in Southern and the Horn of Africa. In 2017, the Regional Mixed Migration Secretariat (RMMS) estimated that the yearly flows of migrants from the Horn of Africa to South Africa amounted to 14,000 - 16,000. Thousands of migrants across this region were stranded, during the time of border closures and movement restrictions. Again, thousands of migrants are forced to cross borders through an informal crossing point. This continual unmanaged movement of people has impacted the trajectory of the COVID-19 pandemic in many of the South and the Horn African countries.

Given the scenario, it was important that the movement of people across borders, both through Points of Entry (PoEs) and other informal crossings needed to be monitored, relevant COVID-19 mitigation measures put in place, information about the flow of migrants collected and timely shared, and border officials' capacity enhanced. By so doing, the transmission of COVID-19 can be minimized.

However, discussions with the Member States throughout the continent have highlighted the limited capacity of the workforce and migration management technical areas. Considering the above, IOM in coordination with Sida implemented a COVID-19 preparedness project from 10 July 2020 to 31 March

2021 to strengthen the support provided to the Member States along two pillars of collaboration, in alignment with IOM's Strategic Preparedness and Response Plan (SPRP). These were:

Information Management: 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.

Capacity Building: Contribute to global, regional, national and community preparedness and response efforts for COVID-19 to reduce associated morbidity and mortality.

Geographical, the project covered six countries in Southern and the Horn of Africa, namely: Djibouti, Ethiopia, Kenya, United Republic of Tanzania, Mozambique, and Malawi.

To determine project relevance, effectiveness, efficiency, coordination and accountability, IOM has conducted a final evaluation through an internal staff, independent of project implementation.

1.1.2. Evaluation Purpose

The overall purpose of the final evaluation was to assess whether the project objectives achieved and brought the expected results in the lives of the vulnerable migrants by improving Member States' COVID-19 preparedness and response capacity. The evaluation findings will be used for learning for future programming and accountability. Moreover, the evaluation study also intended to document key achievements, lessons learned, and recommendations to facilitate learning in similar programming, which would be shared with partners, key government stakeholders, donors, and other organizations working on this area.

Finally, the findings of the evaluation are believed to contributing to guiding future interventions of IOM's integrated migration response in emergency programming and continued discussions with relevant government stakeholders to promote evidence-based policy level discussions.

1.3. OBJECTIVE OF THE FINAL EVALUATION

1.3.1. Major Objective

The major objective of the final evaluation is to measure relevance, effectiveness, efficiency, coordination and accountability of the project outcomes against the intended target; and draw lessons learned from the project implementation in improving Member States' capacity in accessing and managing migrant flow monitoring information to support their efforts to reduce COVID-19 pandemic impacts.

1.3.2. Specific Objectives

The specific objectives of the evaluation include but are not limited to the following.

- (a) To what extent the project is appropriate to policies and the priorities of Member States of the two RECs in Southern and Horn of Africa, and donor.
- (b) To measure to what extent the project achieved its intended objectives and activities compared to the target set.

- (c) To what extent the project adaptation was efficient (in terms of time and cost, compared to the initial plan) in achieving the intended project objectives and activities.
- (d) To assess the degree of participation and coordination of various stakeholders and involvement in the project design, implementation, and evaluation.
- (e) Assess the extent to which the project has been accountable to the target groups (vulnerable migrants, and SADC and IGAD Member States).
- (f) To identify and document lessons learned due to the project implementation and recommend the best practices to improve the designing and implementation of similar future programming.

1.2. EVALUATION SCOPE

This evaluation focused on changes brought to the Member States' capacity to access, manage and use migrant flow information due to the project implementation in the period between July 2020 and January 2020. The main targets of the project included border management officials, vulnerable migrants, and other stakeholders who benefited from the project in six countries of South African Development Community (SADC) and Inter-Governmental Authority for Development (IGAD) the Member States, in Southern and the Horn Africa.

1.3. EVALUATION CRITERIA

The evaluation study was consistent somewhat with the Organisation for Economic Co-operation and Development/Development Assistance Committee (OECD/DAC) criteria for the evaluation of humanitarian action. However, given the duration of the project implementation, the final evaluation focused on relevance, effectiveness, efficiency, and coordination of the OECD/DAC evaluation criteria to realize the evaluation objectives.

2. EVALUATION METHODS AND MATERIALS

The study employed a qualitative content analysis method to answer the evaluation questions. To select samples for the study, first, we did activity mapping for each mission in discussion with the project team. Then data sources applicable for each country mission were identified. To select samples for key informants, qualifying criteria such as experience and knowledge of the project were considered. Accordingly, Member State Project Focal Persons, IOM Project Managers, Border Management Officials, Stranded Migrants, and Border Controlling Points/Points of Entry (PoEs) were selected and assessed for this study. Data were collected through a key informant and in-depth individual interviews, and facility assessments. Interview guides and checklists were prepared to guide the evaluation exercise before the actual evaluation. The data collection tools were also translated into local languages by professional translators. Back translation was also done to check whether the translation is accurate. Then, data collectors and supervisors were trained with the data collection tools.

During the interview, data collectors kept both audio records and notes, and then all interviews were transcribed later in a meaningful way. Evaluation coordinators and supervisors were also ensured field supervision during the time of data collection. Efforts were made to represent views of all target groups

(partners and stakeholders targeted by the programme including Member States' PoEs focal persons, IOM project staff, migrants at PoEs, flow monitoring points, quarantine facilities) in the evaluation.

Relevant secondary information such as project documents, project reports, literature, government reports and records, national surveys, etc. were also consulted to substantiate the final evaluation.

Finally, the information collected through these methods were later categorized, coded by theme, analysed, and narrated in a meaningful way.

IOM is very serious in ethical issues considerations during evaluation. The study ToRs were approved by the project manager and Member State focal persons to clear any issues pertaining to quality. IOM sought consent from key informants orally during the assessment.

Moreover, movement restrictions limited evaluation teams' efforts to reach all concerned stakeholders. Short project period and implementation make it difficult for the evaluation team to evaluate beyond project output. However, as much as the communication system allows, the evaluation team reached the sampled key informant and PoEs to assess the project effectiveness.

3. FINDINGS

3.1. RELEVANCE

Member States of Africa Union were preparing themselves to reduce the transmission and minimize the socio-economic impacts of COVID-19 since the day World Health Organization (WHO) declared COVID-19 as a world pandemic. Regional, sub-regional and national COVID-19 task forces were established. IOM as the lead UN agency on migration was a member of these task forces where it was operational through its country offices. To support the national and regional economic communities COVID-19 preparedness and response efforts, IOM had conducted consultation with the Member States on their priorities and gaps in fighting the pandemic, according to the project managers. In some Missions, a detail need assessment was also conducted to identify gaps and priority needs of the government. For instance, in Kenya, joint need assessment was conducted with the government in main border controlling points and PoEs. As a member of national COVID-19 preparedness and response coordination forums, IOM has been actively participating in leading returnee migrants and PoEs activities. This also helped IOM to identify the priority needs of government partners and other stakeholders in fighting the COVID-19 pandemic.

Hence, most of Member States' capacity in managing migration issues was limited, so, IOM involvement in migration information management and PoEs capacity building activities were very much appreciated by the Member States. Therefore, the project objective, outcomes, outputs and activities were found very much relevant to Member States priorities, and migration and border management rules. Moreover, the project was also in line with IOM's Strategic Preparedness and Response Plan (SPRP), and migration management frameworks.

For instance, a Member State focal person in the United Republic of Tanzania described the project relevancy and appropriateness as follows.

“...When the pandemic came in, the first thing we need was [information] ... Who were the most vulnerable? Where were they from? What were their demographic characteristic and socio-economic condition looks like? All those kinds of information were required by then, even now, and the project was all about those people who were travelling [migrants] but with different demographic characteristics and [vulnerability status] ...”

The Project Managers for this project was also confirmed the above fact. According to them, to ensure a well-coordinated and informed COVID-19 responses, the Displacement Tracking Matrix (DTM) tool had revised to incorporate COVID-19 related indicators in its mobility tracking and flow monitoring components. The information collected through DTM¹ the tool was shared with the target Governments and various humanitarian agencies that were part of the COVID-19 response to support their informed planning and decision. Accordingly, government partners established temporary quarantine facilities, set border controlling points where there were critical movements of migrants, and direct resources to their priority needs. INGOs and NGOs had also used the information to mobilize resources to fill gaps of the priority needs of the Government.

Moreover, IOM’s capacity building activities on PoEs, such as establishing new border controlling points, training of border officials in COVID-19 prevention and response, returnee migrants’ management, basic materials assistance were found supportive to at least slow down the COVID-19 transmission in the Member States. IOM also supported the Member States in developing Standard Operating Procedures (SOPs) for migration flow management at PoEs in a structured and organized way.

In summary, the project was found relevant to the target Governments and vulnerable migrants. The project, to a greater extent, was based on consultation and need assessments. However, to some extent, the project faced challenges to meet Government demands with the available resources. For instance, there was a human resource demand for PoEs activities in Mozambique. Similarly, in some country offices, material assistance particularly PPE were raised as unmet demands. This indicates gaps in resource allocation to priority needs and a lack of detail need assessment at the start of the project implementation as responses should be need based.

3.2. EFFECTIVENESS

Ethiopia

Output 1. DTM data will inform COVID-19 response in Ethiopia.

The final evaluation found that the project target, Output 1, was achieved by 100 per cent. Accordingly, throughout the life of the project, two rounds of Displacement Tracking Matrix (DTM) mobility tracking and 24 rounds of event tracking were conducted. To ensure that the information collected through DTM effectively inform the COVID-19 responses, the DTM in Ethiopia has incorporated COVID-19 related

¹ DTM is a multi-sectoral information gathering tool that can provide essential insight into the location, vulnerabilities, demographic breakdown and needs of migrants and internally displaced persons. It also helps to Identify humanitarian response gaps to the urgent needs of people in displacement. This exercise was new and implemented during COVID-19 time for the first time even to some of the Member states with the support of the project under evaluation.

indicators in its mobility tracking and flow monitoring components. A sample of the DTM report can be found [here](#). Through this Sida funded project, 24 Event Tracking Tool dashboards were produced and shared for government partners, INGOs and other stakeholders, and thereby over 60 organizations were reached. In addition to the DTM reports, capacity building activities for local governments were provided by the project. One DTM familiarization workshop/training was conducted in Southern Nations Nationalities and Peoples (SNNPs) and Sidama Regions, and 27 government officials participated in the DTM familiarization workshop. Training on data quality and relevance was also provided for 15 DTM Field Project Assistants and 120 enumerators. The training and workshop organized initially at the start of the project helped to establish good communication with government officials and data quality collected through the DTM tool. For instance, before 2020, DTM did not have access to carry out its Site Assessment in Southern Nations, Nationalities, and Peoples' (SNNPs) and Sidama regions. This workshop helped to inform the government on DTM's methodologies and operations and how to use DTM data.

Output 2. The government of Ethiopia's COVID-19 preparedness and response capacity is strengthened.

Table 1. Output 2 Indicators-Ethiopia by Target and Achievement

Indicator	Target	Actual	Achievement %	Remarks
Number of Border Controlling Points (BCPs) established	4	4	100%	
Number of Border Controlling Points equipped/furnished	4	4	100%	

Source: Project Proposal (July 2020).

The final evaluation found that the project constructed four border controlling points where Ethiopia shares borders with Kenya, South Sudan, Sudan and Somalia. The border controlling points were also furnished with the necessary office furniture and information technology equipment².



Figure 1. Inauguration of Nebrepuz and Pagag Border Controlling Points in Ethiopia's SNNPs and Gambella Regions, Respectively.

Whereas delay of the project implementation, particularly with construction and furnishing of the border points makes it difficult to realize the project objectives within the project period. Insecurity and

² IOM provided with computers, printer, office tables and chairs, heavy duty electric generator, water tanker, water dispenser, refrigerator, bunk beds with mattresses for staff, stationaries, Bajaj (three-wheel small cars), shelves, file cabinets, staff drawers, etc.

movement restriction had reported the challenges that affect the full realization of the project objective, according to the Project Manager.

Djibouti

Output 1. DTM data will inform COVID-19 response in Djibouti.

According to the Project Manager, through this project six Flow Monitoring Registry (FMR) dashboards were produced and shared to inform the Government of Djibouti, UN agencies, INGOs and other stakeholders about migrant flow into and out of Djibouti, and their priority needs. Under this project, five additional flow monitoring points were added to better capture the movements of stranded migrants along the major mobility routes in Djibouti.

In partnership with the Djibouti National Institute of Statistic (INSD), the socio-economic impact of the COVID-19 study on migrants living in Djibouti City was also conducted. The results from this study provided information on the health and socioeconomic impact of COVID-19 on migrants and communities that could be used in the future design and implementation of comprehensive responses.

Table 2. Output 1 Indicators-Djibouti by Target and Achievement.

Indicator	Target	Actual	Achievement %	Remarks
Number of DTM exercises conducted assessing the migrant presence	1	6	Over 100%	
Number of Socio-economic studies conducted	1	1	100%	

Source: Project Proposal (July 2020).

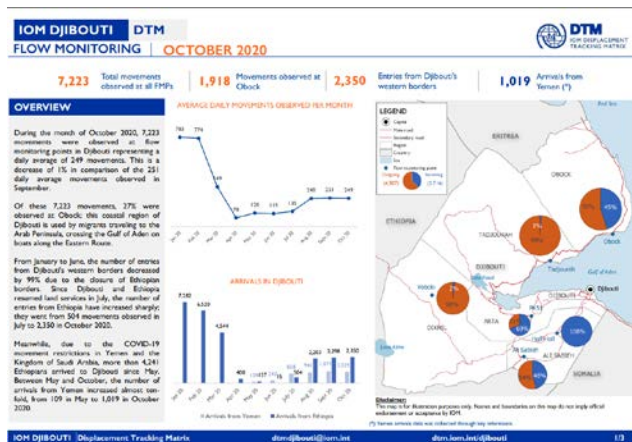


Figure 2. DTM Dashboard-Djibouti

The monthly dashboards include a demographic breakdown by age and sex, place of origin and destination, nationalities, means of transport, the reason for travel, as well as vulnerabilities. The dashboards were regularly shared to partners to inform their COVID-19 response considering the stranded migrants in the country.

In collaboration with the National Institute for Statistics of Djibouti (INSD), COVID-19 socio-economic impact assessment was also

Output 2. The government of Djibouti's COVID-19 preparedness and response capacity is strengthened.

Under this output, the project achieved more than 100 per cent of its target. 25 enumerators (Female 3, Male 22) trained and deployed to regularly monitor and assess the needs of flowing migrants throughout the project period. The capacity of partners on migration data collection, analysis and reporting was also improved through this project. Two rounds of training, three days for each, with people working in different areas including Djibouti’s National Office for the Assistance of Refugees and Disaster Victims (ONARS), National Institute for Statistics of Djibouti (INSD), Executive Secretariat for Risk and Disaster Management (SEGRC), Prefecture as well as Regional Council of all five regions had participated in the training. In total, 30 individuals (5 Females, 25 Male) participated in the training. During the training, protection principles, protection of migrants and IOM data protection principles were incorporated.

Table 3. Output 2 Indicator-Djibouti by Target and Achievement.

Indicator	Target	Actual	Achievement %	Remarks
Number of days of training conducted	3	6	Over 100%	Two rounds of training, each for three days.

Source: Project Proposal (July 2020).



Figure 3. Government Partners Capacity Building-A Three Day Training on Migrant Data Collection, Analysis and Reporting.

IOM’s effective communication with the local authorities was one of the major contributing factors for the good achievement of the project.

On the other hand, movement, and activity restrictions due to the pandemic contributed to some extent to the delay of some of the project activities implementation such as training, workshops and meetings.

An exceptional experience of this project in Djibouti, enumerators hired to collect vulnerable migrants’ data were involved in many instances saving lives of migrants arriving from Yemen.

Kenya

Output 1. DTM data will inform COVID-19 response in Kenya.

The project had able to map out population flows and identify the key drivers of cross border migration through joint site visits and assessment with the Government of Kenya. Accordingly, key gaps at the Points of Entry such as an insufficient supply of Personal Protective Equipment (PPE), lack or shortage of Infection Prevention Control (IPC) supplies, lack of Standard Operating Procedures (SOPs) for managing migrants, lack of training on management of vulnerable migrants among border controlling officials, and inadequate infrastructure like temporary accommodations were identified. The assessment report informed the government's COVID-19 response and preparedness plan, particularly, in consideration of vulnerable migrants.

Table 4. Output 1 indicator-Kenya by Target and Achievement.

Indicator	Target	Actual	Achievement %	Remarks
Number of Dashboards produced	3	3	100%	
Number of Training conducted on Flow Monitoring Points (FMP) methodology.	3	6	Over 100%	Six rounds of training were conducted on flow monitoring.

Source: Project Proposal (July 2020).



Flow monitoring informs on population movements, origin and intended destinations, reasons for moving and population profiles. In the project life period, three dashboards were produced and shared with the relevant government partners. The dashboard captures information about the vulnerable migrants to inform government COVID-19 responses.

Figure 4. IOM Staff Assisting flow migrants.

Output 2. The government of Kenya's COVID-19 preparedness and response capacity is strengthened.

Table 5. Output 2 Indicator-Kenya by Target and Achievement.

Indicator	Target	Actual	Achievement %	Remarks
Number of training conducted for border officials	4	6	100%	105 (Female 15, Male 90) frontline workers were trained.
Number of Joint COVID IMPACT assessments conducted ³	1	0		The indicator was modified into printing and dissemination of IEC materials and achieved by 100 per cent.

Source: Project Proposal (July 2020).

In addition to the timely information provision, the project had assisted with the capacity building of frontline border staff through IPC and border management training. The final evaluation found 105 (Female 15, Male 90) frontline workers were trained on Infection prevention and control, disease surveillance and handling of sick migrants and overall border coordination and management. The project had also provided consignment PPE to frontline workers including masks, gloves, gowns, face shields and WASH supplies including soap and Chlorine.

The project also supported the Government risk communication and community engagement activities in the vulnerable border communities by printing and disseminating 23,900 copies of Information and Education Communication (IEC) materials in collaboration with the Ministry of health. Additionally, the project developed two SOPs for all ground crossings PoEs to harmonize the COVID-19 response efforts by the Government.

From this, we can conclude that the target project activities had addressed the critical gaps identified in terms of providing regular data on migration patterns as well as strengthening IPC at the borders hence contributing towards strengthened COVID-19 surveillance and response activities.

According to the Project Manager, involving the Government partners in the implementation right away from the project start is very vital for the success of a project. The project had been closely working with the government partners and made a necessary modification in the project course.

Malawi

Output 1. DTM data will inform COVID-19 response in Malawi.

According to the project Manager, one round of flow monitoring was conducted, and results were shared with government partners and stakeholders to inform their COVID-19 prevention, preparedness, and responses efforts. The flow monitoring dashboard can be accessed [here](#).

Table 6. Output 1 Indicator-Malawi by Target and Achievement.

³ Indicator modified to IEC material production and dissemination.

Indicator	Target	Actual	Achievement %	Remarks
Number of DTM deployed	1	1	100%	The flow monitoring exercise was conducted at 17 flow monitoring points along key mobility corridors.
Number of population mobility mapping	1	1	100%	

Source: Project Proposal (July 2020).

“The project met its intended outcomes,” the Project Manager said. The Malawian Government couldn't collect data on the movement of migrants in informal crossing points, therefore, the project support in collecting and sharing timely information about migrants was very vital to inform the Government's COVID-19 responses efforts. Through the population mobility mapping exercise, the project was able to map out informal crossing points where people from neighboring countries usually using to enter Malawi. According to the Port Health Officer, the border officials have now been able to reach other potential areas of informal points of entry which were helped and identified during the PME. The flow monitoring tool was also adapted to fit into the context to meet the Government information need related to the COVID-19 pandemic.

Output 2. The government of Malawi's COVID-19 preparedness and response capacity is strengthened.

Table 7. Output 2 Indicator-Malawi by Target and Achievement.

Indicator	Target	Actual	Achievement %	Remarks
Number of training conducted for border officials	5	5	100%	295 (Female 79, Male 216) Frontline government health workers trained.
Number of community engagement campaigns deployed	1	1	100%	321 (Female 93, Male 228) people reached through RCCE.
Number of returnee migrants provided reintegration livelihood assistance	312 ⁴	253	83%	Movement restriction and mobility of target beneficiaries were some of the challenges to achieving the project target.

Source: Project Proposal (July 2020).

The final evaluation found that through the support of this project 295 (Female 79, Male 216) frontline government health workers from priority PoEs trained on COVID-19 screening, management, and referral of suspected cases. “The knowledge shared during training had cleared the confusion that has been there in terms of COVID-19 test certification, screening and other misconceptions about COVID-19 pandemic,” the Port Health Officer said. The project also provided livelihood assistance to 253 (83% of the target)

⁴ The initial target was 120.

vulnerable returnee migrants and reached 321 people (93 Females, 228 Males) through Risk Communication and Community Engagements (RCCE) activities.

Movement restriction due to COVID-19, mobility of beneficiaries⁵ after targeted for reintegration livelihood assistant and delayed of the signing of the agreement (time constraint in implementing all activities) were some of the challenges that the project was facing during its implementation in Malawi. From the Government side, shortage of means of transportation to access the informal crossing points, inadequate referral mechanism and shortage of PPE were some of the challenges and unmet needs reported to effectively respond to the COVID-19 pandemic. On the other hand, good communication with government partners and the community was reported contributing factor for the success of the project achievements.

Tanzania

Output 1. DTM data will inform COVID-19 response in Tanzania.

The project established a flow monitoring in the United Republic of Tanzania covering five points. The data from this, provided up-to-date, quality, and comprehensive information pertinent to COVID-19 responses on migrants transiting the country. To facilitate the flow monitoring exercise, the project provides training on DTM and DTM methodology for 39 individuals (Female 15, Male 24).

Table 8. Output 1 Indicator-Tanzania by Target and Achievement.

Indicator	Target	Actual	Achievement %	Remarks
Number of Flow Monitoring exercises conducted	1	3	Over 100%	3 DTM dashboards were produced and shared for Government partners and stakeholders.

Source: Project Proposal (July 2020).

Output 2. The government of Tanzania's COVID-19 preparedness and response capacity is strengthened.

The project installed 500 handwashing stations at high-risk areas in consultation with the Ministry of Health. In addition, the project supported six high-capacity water tanks (5000L) to infectious disease isolation facilities in selected PoEs to strengthen the WASH and IPC measures. The final evaluation found that the tanks ensured uninterrupted access to clean water.

⁵ Some of the target migrants returned from South Africa to Malawi during the shutdown, returned to South Africa after they targeted for the livelihood assistant.

Table 9. Output 2 Indicator-Tanzania by Target and Achievement.

Indicator	Target	Actual	Achievement %	Remarks
Number of handwashing stations deployed	550	500	91%	
Number of RCCE strategies deployed	1	1	100%	

Source: Project Proposal (July 2020).

The project also supported the Government in developing the RCCE strategy and then trained 127 (Female 51, Male 76) border and Port Health Officials to roll out and cascade the RCCE strategy in their respective border points and health facilities. The project also reached 925,193 individuals including migrants crossing PoEs and populations nearby PoEs through RCCE activities.

Delay of project start-up was the major contributing factor for some of the project activities under achievements, according to the project focal person. The Government project focal person also confirmed the above fact that initially the project was planned for six months but due to the delay of start-up, it was implemented only for three months, October, November and December⁶.

On the other hand, good collaboration with the Government partners and IOM's strategic position as the lead agency for Points of Entry (PoEs) was reported as the major contributing factors for the good achievement of the project activities.

Mozambique

Output 1. DTM data will inform COVID-19 response in Mozambique.

The final evaluation found that the target flow monitoring activities were conducted in the identified and prioritized 24 points in two provinces and six districts. The exercise informed Government's evidence-based decision related to disease surveillance and interventions to strengthening the COVID-19 responses along mobility corridors. The project conducted two rounds of Covid-19 impact assessments and a survey on Mozambican migrants returning after South African lockdown. More importantly, the project supported 15 rounds of COVID-19 preparedness assessments and shared the report to government partners to inform every step of the Government's COVID-19 response.

Table 10. Output 1 Indicator-Mozambique by Target and Achievement.

Indicator	Target	Actual	Achievement %	Remarks
Number of Flow Monitoring exercises conducted	1	2	Over 100%	Two rounds of DTM were also conducted.

Source: Project Proposal (July 2020).

With the support of this project, population mobility mapping (PM) was also conducted in Mozambique for the first time. Copy of the report can be found [here](#). According to the project manager, the population mobility mapping supported the government to better understand the flows of regular and irregular

⁶ The interview was conducted before the request for NCE.

migrants, where the most vulnerable points and corridors of people's movement were located and inform the actions that can be implemented to better manage the flow of vulnerable migrants and risks related to COVID-19.

Output 2. The government of Mozambique's COVID-19 preparedness and response capacity is strengthened.

The project supported the Government in developing SOPs for the management of PoEs, and long-distance truck drivers.⁷ The project also supported the Ministry of Health (MoH) in rolling out the SOPs and PoEs' staff training across the country. To this end, 141 (Female 48, Male 93) PoEs managers and frontline health workers, as well as IOM staff, were trained on the SOPs, overall management of infection prevention and control measures, and COVID-19 symptomatic suspected cases practicums and simulation at PoEs. Key informants from the Ministry of Transport and Communication and Ministry of Health also confirmed that the project provided training and builds Government's institutional capacity.

"...As a matter of fact, IOM has played a great role because it strengthened our institutional capacity through training... The knowledge itself of how to deal with this pandemic as a sector, although we already had some knowledge, but IOM reinforced this knowledge..." (Ministry of Transport and Communication Technician, Mozambique, Dec. 2020)

Table 11. Output 2 Indicator-Mozambique by Target and Achievement.

Indicator	Target	Actual	Achievement %	Remarks
Number of SOPs developed	1	3	Over 100%	SOPs for the PoEs was developed and rolled out.
Number of Training conducted	3	7	Over 100%	141 (Female 48, Male 93) PoEs managers and frontline health workers, as well as IOM staff, were trained.

Source: Project Proposal (July 2020).

Moreover, through the support of the project, COVID-19 IEC materials were also distributed for vulnerable migrants at PoEs and other mobility corridors. A key informant from the Ministry of Health, Department of Environmental Health, Head of Sanitation confirmed that the project supported IEC materials.

"We produced and disseminated the information, education and communication materials that are posted at the entry points. People need to be informed about everything regarding the diseases of an international nature, in this case, we have been doing health education as well, we are talking about the entry points where there is a crossing of many people, yes, health must be on top." (Ministry of Health-Head of Sanitation, Mozambique, Dec. 2020).

Coordinating COVID-19 response with neighboring countries and multi-sectoral technical groups and partners of entry points in Mozambique were a little weaker. Delay of project start-up was one of the

⁷ The SoP for the management of long distance-truck drivers is adapted from SADC guidance.

contributing factors for weak coordination, according to the project Manager. Stakeholders and partners engagement at the central and local level, and regular project monitoring exercises were some of the factors for the success of this project.

Overall, in all missions, the project effectiveness was found very good with an average achievement of 99 per cent. All the outputs were achieved, in many cases, over what was originally planned. Of the 24 project output indicators, 22 achieved 100 per cent and above, two indicators achieved with a range of 80 to 90 per cent. In some project areas, indicators were also timely modified to fit into the context and address government partners priority gaps. Government partners and stakeholders were found satisfied with the project deliverables, particularly, their access to information was found improved due to the project implementation. In most of the project target areas, the migrant flow monitoring exercise and information provision about the COVID-19 pandemic was new and couldn't be delivered with the existing government capacity. Moreover, the Project Manager in Mozambique said, 'I think the main gain [of the project] was the availability of information to map the flows of migrants...' and then used by decision makers to effectively respond to the COVID-19 pandemic. Therefore, the project support was found effective in filling those gaps in the target areas.

3.3. COORDINATION

The project management was based in Ethiopia and conducted monthly coordination meetings to follow up on the progress of the project activities. At the country level, the project manager also conducted regular coordination meetings and field supportive supervision to ensure the quality implementation of project activities. The coordination mechanism with government partners was also in place mainly through a multisectoral technical group meeting including the COVID-19 response technical working group. To this end, this project was also used as an opportunity to reinforce multisectoral coordination among the health, transport, migration, police, statistics, and other sectors, according to project managers. To some extent, the final evaluation found that there was cross-country coordination among neighbouring countries, particularly, on Covid-19 responses and preparedness. Through the coordination meetings, government partners and stakeholders were able to participate in planning, implementing, and monitoring and evaluation of the project activities. For instance, in Ethiopia, DTM reports were shared with partners after endorsed by the relevant government offices. In Djibouti, the COVID-19 impact assessment was done in coordination with the National Institute of Statistics of Djibouti. Similarly, in Kenya, Malawi, Mozambique, and Tanzania, they have conducted joint site visits and assessment, supportive supervision, population mobility mapping (PM) with government partners and stakeholders.

3.4. EFFICIENCY

The final evaluation found that the project efficiently delivered most of the intended outputs within the project period. According to the project managers, budgeting and staffing were efficiently utilized to achieve the desired outputs and outcomes. According to their testimony, "Staffing was very important because that the project mainly provides technical support, so, without qualified project staff dedicated to the planned activities and interventions, the project wouldn't be able to achieve its objectives." To this end, the final evaluation found that all intended project staff were hired and deployed in all project target

areas. The final evaluation also found that the project focused on technical support and capacity building of stakeholders and thereby ensures continuity and sustainability of some of the project activities.

However, some project managers, government partners and stakeholders reported that there was a delay in project start up. In some of the Missions, the project didn't start until mid of September. This created some drawbacks in the timely response of the action plan and implementation of all project activities. As a result, an additional two and half months of no-cost extension period was added to the project timeline, which indicates gaps in the timely implementation of activities.

Overall, the final evaluation found that the project budget burn rate was 100 per cent. In most cases, budget vs activities and outputs expenditure went as planned. However, the final evaluation found that some of the project budget lines either overspend or underspend.

3.5. ACCOUNTABILITY

Memorandum of Understanding (MoU) found signed with the Government by all Missions. Following this, in most of the project target areas, the project kick off meeting was conducted taking the necessary COVID-19 measures, and using different approaches, like through virtual meeting platforms. Some project managers also wrote letters to inform government partners about the project due to the COVID-19 restriction. The project managers also shared project reports and flow monitoring updates with Government on monthly basis. At the central level, the Senior Project Managers were also regularly exchanging project updates with the donor virtually. This indicates that the project's accountability to its target beneficiaries, donor and stakeholders.

However, few government partners project focal persons didn't get information about all the commitments and deliverables of the project except DTM dashboards. This suggests that conducting project kick off meetings is very important to share the project commitments and deliverables for project targets and stakeholders and thereby improves accountability to the affected community and donor.

3.6. LESSON LEARNED

The population mobility mapping exercise supported government partners to identify high traffic mobility corridors including irregular mobility corridors and then established border controlling points. In some of the Member States, DTM was implemented for the first time with the support of this project and becoming the major source of information about displacement affected persons, the COVID-19 pandemic, and migrants on move. Due to this project, multi-sectoral coordination platforms among partners and across governments were also reinforced. In some of the project target areas, project indicators were modified in consultation with the donor to meet the priorities of the Member States and vulnerable migrants.

4. CONCLUSIONS AND RECOMMENDATIONS

4.1. CONCLUSIONS

Relevance:

- Project target (target Governments) consultation was done to identify their priorities in fighting the COVID-19 pandemic. In some project target areas, detailed need assessments were also done at the start of the project, for instance, in Kenya and Malawi.
- Therefore, the project was relevant and responsive to the context and needs of the Government and vulnerable Migrants. In some project areas, while the project was implemented, project indicators were also modified to fit into the context and meet Government's and vulnerable migrants' priorities. For instance, in Kenya, the COVID-19 impact assessment changed into the production of IEC materials. Similarly, in Malawi, the target for reintegration and livelihood assistance increased from 120 to 312.
- The project was in line with donor's, Government's and IOM's Strategic Preparedness and Response Plan (SPRP), and migration management frameworks.
- However, some of the Member States reported challenges in meeting their priority needs to effectively respond to the COVID-19 pandemic and managing the movement of migrants. Some of the challenges were the shortage of human resources in accessing informal mobility corridors, inadequate technical and material support (PPE) in strengthening COVID-19 prevention, screening and referral mechanisms.

Effectiveness:

- The project was found effective in achieving most of the outputs and results. Overall, in all missions, the project effectiveness was found very good with an average achievement of 99 per cent according to the project indicators that were established. All the outputs were achieved, in many cases, more than what was originally planned. Of the 24 project output indicators, 22 achieved 100 per cent and above, two indicators were achieved with a range of 80 to 90 per cent.
- Government partners and stakeholders were found satisfied with the project deliverables, particularly, their access to information was found improved due to the project implementation.
- In most of the project target areas, the migrant flow monitoring exercise and information provision about the COVID-19 pandemic was new and couldn't be delivered with the existing government capacity. Therefore, the project filled the major information gap-access to the flow of vulnerable migrants to inform Government COVID-19 responses and preparedness efforts.

Coordination:

- Overall, coordination among government partners, local authorities and project managers was found very good. At the central level, the project managers conducted monthly coordination meetings with country-level project managers. Similarly, each country-level project manager conducts coordination meetings with their project staff to follow the progress of the project activities. Besides, the country-level had participated in multi-sectoral coordination meetings established by the Government to coordinate COVID-19 responses. To this end, most of the project activities were done in coordination with Government and local authorities.
- Financial monitoring reports were also produced on monthly basis, and timely actions were taken to improve the project budget burn rate. Using Process, Resources, Integrated System Management (PRISM) financial reports, the Project Manager can review to assess the project's burn rate and transactions and ascertain if all charges made are posted to the correct budget lines. The Project Manager can also compare the project's budget and expenditure against the

activity schedule to determine if the project is on track, and to plan for the next period of implementation.

Efficiency:

- Overall, the project team well utilized the time available, considering the delayed start up imposed due to the back and forth in signing off the project agreement and internal project activation process. Most of the activities that should have started July to Aug 2020 were delayed until mid of September in most of the project target areas, but eventually completed according to a revised timeline that included two and half months no-cost extension period.
- The final evaluation found that budget and staffing efficiently managed to meet the desired outputs and results. As the project mostly focuses on providing technical support for the target Governments, staffing was found as a very critical component of the project. Accordingly, all the project staff were found hired and deployed. However, few of the government partners reported a shortage of human resources in effectively managing the movement of migrants.
- The project budget burn rate was 100 per cent at the end of the no-cost extension period, but in some budget lines over and under spending were also observed.

Accountability:

- The project's accountability to the affected population and targets were found good. MoU signed with Government in all targeted project areas. Timely, accurate and relevant project information was shared with most Governments and stakeholders through meetings and IEC materials.
- Efforts were made by the project managers to engage Governments, stakeholders and vulnerable migrants in the project planning, implementation and monitoring and evaluation activities to promote participation.
- Periodical reports, DTM dashboards and donor updates were also shared with the Member States and the donor.
- However, gaps were identified in delivering information for government partners and stakeholders about the project activities and commitments. Few of the Government project focal persons didn't know all project commitments and deliverables.

4.2. RECOMMENDATIONS

Based on the findings and conclusions described above, the following recommendations are provided for consideration by Project Managers and Programme/Project Support Unit staff in the implementation of ongoing similar projects and designing of new projects in the future.

- IOM needs to strengthen need assessment to the population affected by the crisis to effectively prioritize their needs. During the final evaluation, according to some of the government partners, some of their critical needs were not covered by the project.
- IOM also need to strengthen DTM and flow monitoring activities as this has become a vital source for planning and responding to emergencies for the Member States, partners and other stakeholders. Adapting DTM exercises to the context is also very important to meet the information needs of the Governments, partners and other stakeholders.
- Project Managers should inform all project target groups about the project commitments and deliverables through project kick off meetings, meetings, social media, posters and banners.
- Considering the back-and-forth communication in the signing of project agreements which creates a delay in project start up, internal procedures and processes need to be geared in a way that allows programme support unit staff to take proactive measures as some of the projects are time sensitive to respond to the needs of the population affected by crisis timely. For instance, a

temporary project activation system could help to solve this matter. Many organizations are also using internal flexible funds to address such issues until they received the official signed donor agreement.

- As most of the activities supported by this project are still sensitive and very important for the Member States in fighting the COVID-19 pandemic and supporting vulnerable migrants and given their manpower and financial capacity to sustain these activities, the IOM Programme Support Unit should mobilize resources either with the current donor or others to cover Member States' priority needs in these areas.

5. ANNEXES

5.1. EVALUATION TERMS OF REFERENCE



Final%20Project%20
Evaluation%20TOR9

5.2. EVALUATION MATRIX



Evaluation%20Matri
x.xlsx

5.3. LIST OF DOCUMENTS REVIEWED

Table 12. List of reviewed documents by the title of document and access.

Document type	Title of document	Where to access the document	Remark
Project Proposal Document	ET10P0592_Proposal.docx	Prima for all	
Project Budget Excel	ET10P0592_Budget.xlsx	Prima for all	
Project Donor Report	Final Project Report to Sida	Prima for all	

5.4. LIST OF PERSONS INTERVIEWED OR CONSULTED

Table 13. List of persons interviewed by Age, Sex, Organization and Title.

Name of the person interviewed	Sex	Age	Organization	Title/position	Mission
Japheth Ogallo	M	48yrs	Kenya Police - Border Management Secretariat	Senior Superintendent	Kenya
Daniel Wambua	M	45yrs	KRA	Border Management Committee Chair	Kenya
Josephine Mukanzi	F	39yrs	Port Health	Port health in charge	Kenya
Milka Chepsom	F	41yrs	Immigration	Immigration Officer	Kenya
Geoffrey Onguso	M	35yrs	Kenya Bureau of standards	Inspection Officer	Kenya
Olivier Balagizi			IOM	Former SIDA PM and headed DTM unit at IOM Djibouti	Djibouti

<i>Name of the person interviewed</i>	<i>Sex</i>	<i>Age</i>	<i>Organization</i>	<i>Title/position</i>	<i>Mission</i>
<i>Saleh</i>			<i>Djibouti's National Office for the Assistance of refugees and Disaster Victims</i>	<i>Officer</i>	<i>Djibouti</i>
<i>Ali Baku</i>			<i>N/A</i>	<i>Migrant</i>	<i>Djibouti</i>
<i>CHOONG Sarah</i>	<i>F</i>	<i>29yrs</i>	<i>IOM</i>	<i>Displacement Tracking Matrix (DTM) Acting Coordinator</i>	<i>Ethiopia</i>
<i>IDRIS Kederalah</i>	<i>M</i>		<i>IOM</i>	<i>National Project Officer</i>	<i>Ethiopia</i>
<i>TESER Martin</i>	<i>M</i>		<i>IOM</i>	<i>IOM Project Focal Person</i>	<i>Malawi</i>
<i>Moses Joshua</i>	<i>M</i>	<i>47</i>	<i>Ministry of Health</i>	<i>Port Health Officer</i>	<i>Malawi</i>
<i>Chimwemwe Chelewani</i>	<i>F</i>	<i>41</i>	<i>Ministry of Health</i>	<i>Port Health Officer</i>	<i>Malawi</i>
<i>Solomon Mulutha</i>	<i>M</i>	<i>36</i>	<i>Ministry of Health</i>	<i>Port Health Officer</i>	<i>Malawi</i>
<i>Misheck Zulu</i>	<i>M</i>	<i>57</i>	<i>Ministry of Health</i>	<i>Port Health Officer</i>	<i>Malawi</i>
<i>SANDRINE Martin</i>			<i>IOM</i>	<i>Migration Health Programme Manager</i>	<i>Mozambique</i>
<i>Américo Ângelo</i>	<i>M</i>	<i>48</i>	<i>Ministry of Health</i>	<i>Head of the hygiene and protection</i>	<i>Mozambique</i>
<i>Calido Naíco</i>	<i>M</i>	<i>33</i>	<i>Ministry of Transport and Communication</i>	<i>Planning Technician</i>	<i>Mozambique</i>
<i>Paulo André Mangué</i>			<i>National Migration Service</i>	<i>Border Management Official</i>	<i>Mozambique</i>
<i>Aisha Omar</i>			<i>Office of the Chief Government Statistician</i>	<i>Head of Migration Unit</i>	<i>Tanzania</i>
<i>Blick Nuwe</i>			<i>IOM</i>	<i>DTM Coordinator</i>	<i>Tanzania</i>

5.5. DATA COLLECTION INSTRUMENTS

Embedded in the evaluation ToR.