

**Evaluation of the IOM's implemented  
Immediate Distribution of Humanitarian Assistance to Internally  
Displaced and Destitute Households in Urban Areas Evicted or  
Affected by Operation 'Restore Order' (Murambatsvina) in  
Zimbabwe and Institutional Strengthening of IOM Capacity to  
Respond to Humanitarian Crises**

**Final Report**

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The compilation of the report was part of the consultative process, which required compromise and, on occasion, difficult decisions. Nevertheless, I hope that the evaluation will provide an agenda for discussion and prioritisation of follow-up actions not only because it records an important success story, but also because policy decisions and actions taken now could affect the lives of thousands of people in the future. Also, the dedication and work ethics of IOM should be singled out for recognition and thanks. This has made the task of the evaluation incomparably easier. And a final and very special thanks to Diana Cartier, the Project M&E Officer who was with me from start to finish. She was at my beck call and ensured access to all essential documents, personnel and logistic arrangements. Further, for keeping an eye on the progress of the evaluation and for her total dedication to this work.

## EXECUTIVE SUMMARY

This report attempts to review and evaluate the Emergency Assistance Programme to Mobile and Vulnerable Populations in Harare in response to Operation Murambatsvina (OM) by IOM specifically the distribution of NFI kits to the 1000 displaced, mobile and vulnerable households. The humanitarian internally displaced persons crisis in Zimbabwe is unique. The end of programme evaluation report is based on existing IOM documentation and supplemented by discussions with IOM staff, Implementing Partners (IPs), beneficiaries, non-beneficiaries and stakeholders of the programme. The lessons learnt and recommendations were reviewed and endorsed by the IOM team responsible for implementation with the evaluator.

Field research to evaluate the programme in Harare was conducted over a two week period (17 July - 1 August, 2006). The project which was funded by ECHO and delivered in 5 sites of in Harare was set within the context of increased vulnerability as a direct result of Operation Murambatsvina (OM) (Operation Restore Order). The principal and specific objectives of the ERP was to *“alleviate human suffering of those displaced in urban areas in Zimbabwe and provide non-food requirements and HIV prevention to affected vulnerable populations through the strengthening of IOM’s capacity to respond to humanitarian crises”*, respectively.

The terms of reference for the evaluation required an assessment of relevance, effectiveness, efficiency of implementation, monitoring and evaluation (M&E), institutional arrangements put in place to effectively and efficiently implement the programme. A set of lessons learnt and recommendations for consideration in future programming was also required.

**Main findings:** findings from the evaluation suggest that the design of many elements of the project was well-thought-out and was proved sound by successful implementation of the project. Four strategies were proposed and implemented to execute this programme. The implementation of programme was generally satisfactory in all sites. The success of the response is attributable to several factors: high degree of confidence and support for IOM Harare, the operational transparency of efficient distribution systems. The achievements demonstrate that there are very effective and efficient capacities in IOM and its partners to address critical emergency needs. The detailed achievements in the emergency response are recorded in the body of this report, but the following are some of the notable factors that made the operation successful.

### **Sector 1: Up to 1000 households (5000 individuals) provided with non-food requirements.**

In order to fulfil this strategy, IOM implemented a host of activities detailed in the programme proposal as follows;

- 1.1 *Liaise with UN, GoZ and the NGO sector to support planning and coordination:* the remarkable degree of coordination and transparency in this complex and unique operating environment was largely attributable to the leadership of IOM, supported by IPs, donors and other stakeholders. IOM has and continues to liaise with various stakeholders such as UN agencies, local- and International NGOs in the delivery of assistance to affected individuals for this and other programmes.
- 1.2 *Organise weekly coordination meetings with implementing partners:* At the height of OM, weekly meetings took place to facilitate effective and efficient delivery of supports to affected communities. However, these were later revised to bi-weekly and later to monthly meetings. It should be noted that this activity was already taking place prior to this programme.
- 1.3 *Create a steering committee and organise monthly donor meetings:* IOM hosted and is still hosting monthly meetings with IPs and has actively been meeting donors in Zimbabwe to keep them abreast of developments. This resulted in IOM inviting donors to undertake a review of IOM Harare.

- 1.4 *Through a participatory framework, continually assess humanitarian needs and respond in the quickest way possible, ensuring the protection of the most vulnerable:* IOM has developed and continues to respond positively in a dynamic fashion to the needs of communities under this grant and others. This has gone a long way in improving information that IOM has which has aided it in developing fundable proposals.
- 1.5 *Prioritise female- and child-headed households, orphans, the elderly and chronically ill:* from discussions held with IPs and beneficiaries it is evident that IOM prioritised female- and child-headed households, orphans, the elderly and chronically ill with supports provided during programme implementation. This process was participatory through the involvement of IPs in the registration, beneficiary verification and selection.
- 1.6 *Establish and maintain a monitoring database of beneficiary households in need of non-food requirements:* through ECHO funding and support from IOM International, IOM Harare has developed a state of the art Microsoft database linked to Microsoft Excel sheets for analysis. This database was used in the selection of beneficiaries of the programme.
- 1.7 *Procure and distribute appropriate non-food requirements kits (blankets, plastic jerry cans, cooking utensils, hygiene items, water purifying tablets, HIV/AIDS information and condoms) in an effective and neutral and transparent manner:* this activity took place at the prescribed time by the procurement department of IOM following and satisfying procurement procedures. All items were locally purchased ensuring cost-effectiveness. Costs saved resulted in IOM surpassing the 1000 households targeted by an additional 394 households.
- 1.8 *Ensure that protection measures, especially for women and children are appropriately implemented:* this component was delivered through the capacitation of IPs and awareness meetings with the general population during distributions. IOM highlighted and enforced strict measures in the adherence to Sphere Standards in the distribution and registration processes by IPs.

## **Sector 2: Increased availability of HIV prevention and Behaviour Change Communication (BCC) materials for populations affected by evictions**

- 2.1 *Develop and distribute Behaviour Change and Communication (BCC) & Information, Education and Communication (IEC) materials that address heightened risk factors specific to current displaced populations to combat the low perception of risk to HIV infection:* IOM reviewed and developed existing IEC material, mainly from PSI. A total of 80.000 HIV and AIDS IEC material was produced covering; (i) personal risk perception, (ii) Voluntary Counselling and Testing (VCT), (iii) early treatment of Sexually Transmitted Infections (STIs) and (iv) consistent and correct use of condoms. The distribution of IEC (BCC) material and NFI's were preceded with dramas, role plays and discussion conducted by Patsime Edutainment Trust a drama group engaged by IOM. It is estimated that 80% of residents of settlements were reached by this activity.
- 2.2 *Establish access to condoms for groups most at risk of exposure:* two delivery methods were used in the enhancing access to both male and female condoms in targeted sites. Firstly NFI kits distributed were accompanied with condoms. Community leaders mainly Home Based Care volunteers stocked condoms provided by IOM to act as replenishments persons during and after programme termination.

**Sector 3: Local communities and NGOs strengthened.** On this activity, IOM has managed to impart knowledge to at least 10 staff directly from the participating IPs. This aspect of the programme was to enhance and promote efficient programme delivery. IOM utilised two approaches in meeting this activity; (i) 'hands on training' and (ii) workshop.

- 3.1 *Capacity building to local NGOs and IPs to ensure efficiency and accountability in grants management, integrating monitoring and evaluation into capacity building relationships, ensuring linkages between financial resources and on-going technical support:* in order to effectively and efficiently implement this programme and build relationships with IPs, IOM produced a comprehensive capacity

building titled ‘*Working with IOM, Implementation Guidelines - Emergency Assistance Programme to Mobile and Vulnerable Population*’ manual that was used to train IPs over a 2<sup>1</sup>/<sub>2</sub> day workshop. This was done from the 22-24<sup>th</sup> of March, 2006, prior to registration and distribution of NFI kits and other supports.

#### **Sector 4: Institutional capacity of IOM Zimbabwe to respond to humanitarian crises strengthened**

- 4.1 *Appoint a Senior Programme Officer (1), Resource Management Officer (1), Monitoring and Evaluation Officer (1), Operations assistants (2), Warehouse Assistants (2) & Drivers (2):* the recruitment of the listed positions took place in January and February as scheduled. Qualified and experienced personnel were recruited and this was pivotal to the success of the programme.
- 4.2 *Restructure the organisation in accordance with the revised Organo-gram in Annex II:* with the recruitment of additional staff, IOM was able to restructure and develop a responsive dynamic team. Units that have capacitated as a result of this action include; (i) Emergency and Reintegration Unit and (ii) Project Development Unit and supported by the M&E unit.
- 4.3 *Review and revise existing guidelines for monitoring and evaluation for IOM:* this activity was executed in February and March and ongoing resulting in IOM producing new guidelines used in the delivery of programmes and reporting. Further, IOM developed guidelines used during the 2<sup>1</sup>/<sub>2</sub> day capacity building workshop. The M&E unit has gone a step further and has developed a clear M&E framework for all programmes detailing plans, indicators, activities and persons responsible for them.
- 4.4 *Develop financial guidelines for Implementing Partners:* the finance department modified existing reporting guidelines for effective and efficient reporting of funds disbursed to IPs. As already stated these used during the capacity building workshop.
- 4.5 *Develop Monitoring and Evaluation guidelines for Implementing Partners:* M&E guidelines were developed timely and these were used effectively in targeting and reporting. Some of the guidelines included beneficiary selection, verification and post distribution assessments. Further, the reporting formats for all IOM activities have been standardised. This consequently resulted in improved reporting and lessening IPs ‘reporting burdens’.
- 4.6 *Procure two field vehicles and build pre-fabricated office space:* two vehicles were procured timely and were used in the delivery of programme. The pre-fabricated buildings are complete. These consist of 8 offices and a boardroom.

**Assessments based on the terms of references:** The following are among the central points in the assessments carried out:-

- **Relevance:** at the purpose/objective level, the programme was very relevant albeit that the priorities and strategies to obtain the objectives seem to have been largely set within the aid community. Beneficiaries were very accepting of supports afforded though application and adoption was similar across programme sites. Needs assessment and UN reports, IOM assessments conducted prior to and during programme implementation clearly support the implementation of this programme as households facing a humanitarian crisis.
- **Efficiency:** though there were delays to starting, the team managed to catch up and complete all actions ahead of schedule. Actual budgetary spend indicates areas of over and under spending but the overall project was implemented within the agreed amount of funding. The delivery system use by the project appears to have been appropriate, efficient and cost-effective. The beneficiaries praised the programme for its speed, efficiency and convenience. IOM’s ability to cost-effectively implement the programme resulted in substantial reductions per funds spent per NFI kit. Consequently, IOM was able to support 394 households because of saved money.
- **Effectiveness:** with regard to effectiveness of the programme, there is strong evidence to suggest that provision of non-food requirements to at least 6000 individuals was achieved

in all operational locations, whilst IOM has been strengthened to respond to humanitarian crises. The accumulated experience in the implementation of the current ERP is shown by the modification of some strategies as the project progressed and continues to be based in finding new formalists to respond effectively to the humanitarian needs of targeted communities. The ERP provided the simplest ways of providing NFI kits, HIV and AIDS information, capacity building and institutional support to IOM.

- **Monitoring and Evaluation mechanism:** IOM's ability to monitor and evaluate has improved significantly as a result of the M&E officer recruited to drive this process. For the most part, the detailed and systematic monitoring of the project delivered results in a timely enough way to influence critical elements of the project. Currently, the general objectives of the monitoring has been (i) to ensure that operations proceed as planned in pursuit of the defined objectives, i.e. to ensure that resources are properly used and that the supports reaches the targeted beneficiaries; (ii) to monitor the output of IOM and IPs interventions; and (iii) to detect changes in the situation that might call for an adjustment of objectives, plans, or procedures.
- **Institutional arrangements: it is clear that the current staffing at IOM is able to cope:** IOM has been able to both effectively and efficiently implement this particular programme because of proper institutional arrangements made. IOM has acted as an implementer in Hopley and as a partner in other sites as supports were delivered through selected implementing partners. The coordination mechanism employed by IOM was adequate and this is a result of the restructuring process IOM has gone through. The team mobilised for this action was well equipped and gave optimal support within IOM and IPs. The relationship between IOM and its partners is very strong resulting in IPs viewing themselves as strategic partners in the delivery of support to affected communities. On this section, the evaluator looked at the following;

### Lessons learnt

- (i) IOM and its partners have practiced a unique and effective style of providing humanitarian assistance in the context of exclusion, responding with adequate solutions to each situation and the unforeseen events.
- (ii) IOM and its partners have given humanitarian assistance responses that are not limited only to strict emergency situations. In this sense, the immediate actions of post emergency have provided the displaced population with minimum conditions of self-sustainability.
- (iii) The intervention style that IOM and its partners have developed, places them in propitious conditions for initiating new processes of action against the problem of displacement; mainly in the formulation of joint interventions strategies.
- (iv) The actions that IOM and its IPs carry out regarding gender equity and relations must not be limited to work with women, by reason of their traditional situation of exclusion.
- (v) When implementing emergency humanitarian assistance, IOM and its IPs are giving direct and objective responses to preserve people's lives.
- (vi) With correct support and capacity building IPs can effectively implement strategies that support vulnerable people.
- (vii) IOM Harare is strategically positioned to provide support to displaced persons in Zimbabwe.
- (viii) Displaced and vulnerable people are fairly organised and are committed in assisting other vulnerable members of their community.
- (ix) With appropriate capacity building and institutional framework developed, IP capacitation can be achieved. Community participation increases the capacity for the service delivery.

- (x) With appropriate capacity building and institutional framework developed, IP capacitation can be achieved. Community participation increases the capacity for the service delivery.

### Recommendations

- (i) The possibility of extending the present -short term- assistance with long term initiatives; mainly if it is a question of finding links that will allow the actions' continuity.
- (ii) The adequate use of logical framework approach should be stressed, emphasising in the elaboration of performance and results indicators by objectives from proposal formulation stage. That is, not only aiming at facilitating the normal monitoring and follow-up process by IOM, but mainly as mechanisms to measure the expected impacts - though relative in most cases - that the project reach and to identify possible links with additional long-term initiatives as well.
- (iii) The relationship between IOM Harare and its IPs should follow two clear and necessarily complementary directions. First, to continue strengthening the existing links, in order to foster and support joint actions between partners, and second, ensuring the transparency of all actions.
- (iv) In future, IOM needs to look at the benefits/challenges associated with providing support to people who are still mobile and are residing in areas where the government deems as illegal. The challenge of providing humanitarian assistance vs. humanitarian rights.
- (v) It is recommended that IOM and other stakeholders especially the donor community address the challenges associated with short term funding as the current practice of short term funding means positions held by other IOM staff (project staff) are compromised.
- (vi) It is advised that NFI kits be responsive to PLWHA. The current one has limitations. Considering that at least 30% of people displaced have chronically ill persons it is important that specific kits are made available and delivered in such a way that it avoids stigma.
- (vii) Mainstreaming of HIV and AIDS issues for BCC can not be achieved in a few hours. Mobile and displaced people are at higher risk for contracting HIV. This should be a process. Messages should be tailored for gender and age categories.
- (viii) The size of the NFI kit should be for a clearly defined period. The dilemma that IOM faces is evident, as consumables provided have been exhausted, however, the problems still exist.
- (ix) Continued capacity building of IPs is be an ongoing process.
- (x) The choice of IPs should be clear so that programme delivery is not compromised.
- (xi) Distribution points should be free and not inclined to specific religious bodies.
- (xii) The top bottom approach should be avoided. The total number of people assisted as a result of the programme are a mere 5% of the total population. Consequently the number still in need is far greater posing a risk of NFI kits provided to vulnerable members of the community especially to children and women. The level of desperation in these communities is alarming.
- (xiii) It is worth considering that limited supports received be distributed in a particular area. The vulnerability criteria used in the ERP is commendable, however, closer

analysis of the population in the targeted areas, the majority of the people fit the stated criteria.

- (xiv) Mobilization and sensitisation should be done over a long period. This is in light of the mobility of the targeted community. This will avoid tension created in the community as those missed feel there were deliberately left out.
- (xv) The quality of jerry cans purchased should go through a rigorous test to ensure durability.

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## **LIST OF ACRONYMS/ABBREVIATIONS**

AIDS	Acquired Human Immuno-deficiency Syndrome
BCC	Behavioural Change Communication
ECHO	European Commission Humanitarian Aid Office
ERP	Emergency Response Programme
FBO	Faith Based Organisation
FDG	Focus Group Discussion
GoZ	Government of Zimbabwe
HH	Household
HIV	Human Immuno-deficiency Virus
IEC	Information Education Communication
IOM	International Organisation for Migration
M&E	Monitoring and Evaluation
NFI	Non-Food Items
PSI	Population Services International
ToR	Terms of reference
UNICEF	United Nations Children's Fund
VCT	Voluntary Counselling Testing
WHO	United Nations - World Health Organisation
OM	Operation Murambatsvina/Restore Order

## 1. INTRODUCTION

On 19 May 2005, with little or no warning, the Government of Zimbabwe (GoZ) embarked on an operation to ‘clean-up’ its cities. It was a ‘cash’ operation known as ‘Operation Murambatsvina (OM)’. It started in the Zimbabwe capital, Harare and rapidly evolved into a nationwide demolition and eviction campaign carried out by the police and the army. Popularly referred to as ‘Operation Tsunami’ because of its speed and ferocity it resulted in the destruction of homes, business premises and vending sites. It is estimated that some 700,000 people in cities across the country have lost either their homes, source of livelihood or both. Indirectly, a further 2.4 million people have been affected in varying degrees. Hundreds of thousands of women, men, and children were made homeless, without access to food, water and sanitation of health care. Many sick, including those with HIV and AIDS, no longer have access to care and support. The vast majority of those directly and indirectly affected are the poor and disadvantaged segments of the population. They are today, deeper in poverty, deprivation and destitution, and have been rendered more vulnerable<sup>1</sup>.

The period after OM many humanitarian agencies saw the need of displaced people, however, this was matched by the response as most actors were cautious of the implications of assisting people who according to the GoZ were operating and residing illegally. IOM and partners responded rapidly throughout Zimbabwe providing critical support to affected vulnerable and mobile people across the country. Since May 2005, IOM has provided assistance to over 420,000 individuals based on an average household size of 5. Further, through reprogramming some of its existing funding and responses for its ongoing ‘Humanitarian Assistance to Mobile and Vulnerable Populations’ programme which targets ex-farm workers, IOM managed to respond rapidly to these new displacements resulting from OM. Through this approach, IOM has, to date, reached more than 225,000 beneficiaries affected by OM. Due to increased needs of displaced persons in Zimbabwe, the IOM Harare Mission has been providing emergency assistance to all affected populations. Reaching these beneficiaries was done with minimal additions to IOM’s staff structure. Consequently IOM Zimbabwe’s capacity has therefore been over-stretched by providing quick and timely assistance not only to displaced workers but the most recent victims of OM. In the long run, this risks jeopardising, on one hand, the efficiency of IOM’s delivery of humanitarian assistance, and on the other, the integrity of its administrative and monitoring and evaluation mechanisms<sup>2</sup>.

It based on this background that IOM in Zimbabwe implemented an Immediate Distribution of Humanitarian Assistance to Internally Displaced and Destitute Households in Urban Areas Evicted or Affected by Operation Restore Order’ (Murambatsvina) in Zimbabwe and Institutional Strengthening of IOM Capacity to Respond to Humanitarian Crises programme’ to ameliorate suffering. The project proposal established specific output and impact targets for each activity sector and project component. These are discussed in greater detail within this report.

Implementation of the *‘Immediate Distribution of Humanitarian Assistance to Internally Displaced and Destitute Households in Urban Areas Evicted or Affected by Operation Restore Order’ (Murambatsvina) in Zimbabwe and Institutional Strengthening of IOM Capacity to Respond to Humanitarian Crises’* which is referred to as Emergency Response Programme (ERP) in this document commenced January 2006 and terminated in June 2006. IOM in Zimbabwe implemented the programme in consultation and with active participation of various stakeholders and beneficiaries in suburbs in

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<sup>1</sup> Report of the Fact Finding Mission to Zimbabwe to assess the Scope and Impact of Operation Murambatsvina by the UN Special Envoy on Human Settlements Issues in Zimbabwe – Mrs Anna Kajumulo Tibaijuka

<sup>2</sup> IOM Project Proposal

Harare. According to the project document the following were the principle and specific objectives of programme, respectively;

- To alleviate human suffering of those displaced in urban areas in Zimbabwe and provide protection to the most vulnerable;
- To provide non-food requirements and HIV prevention to affected vulnerable populations through the strengthening of IOM’s capacity to respond to humanitarian crises.

The project was delivered in Harare (Mbare, Hopley, Dzivarasekwa, Epworth and Hatcliffe Extension suburbs) and the project plan targeted 1000 direct beneficiaries (5,000 households). Based on the most recent assessments of displaced people, this target represents 15% of the population in the suburbs in Harare. Four specific sectors of activity were identified with multiple activities to achieve programme targets. Tables 1 below gives details of each sector of activity and indicates the targeted number of beneficiaries by project component.

**Table 1: Programme sectors, components and targeted beneficiaries**

Sector	Targeted number of beneficiaries
1. Up to 1000 households (5000 individuals) provided with non-food requirements.	1000 households (approximately 5000 individuals).
2. Increased availability of HIV prevention and Behaviour Change Communication (BCC) materials for populations affected by evictions.	
3. Local communities and NGOs strengthened.	Implementing Partners of the programme.
4. Institutional capacity of IOM Zimbabwe to respond to humanitarian crises strengthened.	IOM

### 1.1 Organisation of the report

Using the programme objectives as a framework and terms of reference (ToR), the report has been divided into five sections as follows;

- Section 1:** Introduction
- Section 2:** Discusses the sampling methodology and data collection for the ERP evaluation.
- Section 3:** Details and discusses the findings of the end of programme evaluation.
- Section 4:** Presents a set of lessons learnt.
- Section 5:** Summarises recommendations for similar initiatives

### 1.2 Objective of the evaluation/scope of evaluation

The terms of reference for the evaluation were agreed by IOM in Zimbabwe and European Commission Humanitarian Aid Office (ECHO) (the donor) in line with the donor’s guidelines and partnership agreement. The overall objective of the evaluation is *“to evaluate IOM’s overall performance and achievements and to assess IOM’s strategy for delivering assistance to those affected by Operation Restore Order in selected urban areas.* Prioritisation of major issues addressed are clearly listed, and the key focus areas listed and are organised into the standard evaluation categories - relevance, effectiveness, efficiency, monitoring and evaluation and institutional arrangements - and within each category the most important issues are listed first, while additional but subsidiary points raised follow.

## **2. EVALUATION METHODOLOGY**

To obtain as wide a perspective as possible on the extent to which project objectives were attained, a number of data gathering techniques were used to triangulate stated observations and conclusions in this evaluation. The methodology outlined forthwith deals only with the responsibilities of the consultant. The evaluator's focal point was IOM's country office, which together with the consultant drew up a detailed work-plan, assembled documentation and arranged interviews.

### **2.2.1 Initial Briefing**

The consultant and IOM personnel directly involved in the programme initially had project briefings. This was done so that a common understanding of ToR was achieved for both parties. Key to this activity included the M&E officer.

### **2.2.2 Discussions**

The consultant attended and consolidated key issues from stakeholder meetings on the project experiences, implementation, lessons learnt and recommendations for replication, effectiveness of institutional arrangements put in place for coordination.

### **2.2.4 Literature review**

A review of the project proposal and progress reports was conducted prior to the field work. Document reviews assisted in the development of instruments that interrogated the extent to which project objectives and implementation milestones were achieved. Narrative summaries were used to process information from document reviews. Additionally relevant supporting documents mentioned in the Logical Framework of the project were sought from time to time. Review and analyse the programme monitoring and evaluation framework, plan, project indicators and any other related data was also done.

### **2.2.5 Key informant interviews**

The consultant conducted key informant interviews with representatives of IPs and programme staff on the institutional, implementation and management arrangement put in place to detect lessons for future projects. The consultant conducted 20 such interviews in during the evaluation.

## **2.3 Triangulation**

To arrive at the stated conclusions, information from the structured interviews, key informant interviews and document reviews was analysed and a deductive process used to triangulate conclusions that were reached in this evaluation. By its very nature, the evaluation required that several lines of evidence from a number of sources be pursued. It is therefore possible, in an exercise requiring judgement calls as this one, to interpret issues from a different perspective compared to other parties with interest or no interest in this project that is being evaluated.

## **2.4 Framing of lessons learnt and recommendations**

A meeting was held with IOM Harare team to develop lessons learnt and recommendations. The consultant presented a draft set of recommendations to the programme staff for discussion. Thereafter, a final range of recommendations were amended.

## 2.5 Approach

The evaluator attempted to carry out the evaluation in an open, non-threatening and transparent manner and ensured that programme findings, while independent, have been reached in as objective a manner as possible.

## 2.6 Limitations of the evaluation

The evaluator notes the following set of limiting factors on the work:-

- **The timeframe:** like all evaluations conducted over a short period of time the final product is a mere snapshot of the bigger picture. While every effort has been made to paint as accurate a picture as possible of project success, the representative sample used in this regard is a mere 5% of the total number of households targeted by the programme.
- **Establishing a common picture:** significant differences in implementation and output were observed across sites. This evaluation attempts to paint as accurate a picture as possible for the reader and is thus somewhat longer than the recommended length.
- **Security:** due to the sensitivity surrounding OM and assistance provided and the uneasiness of relations between the GoZ and other humanitarian actors, the level and scope of discussions held with beneficiaries was limited.

The following section outlines the evaluation process and findings on IOM's Emergency ERP in the Harare. The project was funded by the ECHO and was supposed to be delivered within a timeframe of December - May 2006. The field research and write up for the evaluation was conducted over a 2 week period (17 July - 7 August, 2006).

### 3. EVALUATION FINDINGS

This section in the evaluation attempts to give a factual account of project implementation and project results. Project implementation is presented against IOM's original action plan with information from its progress reports being duly verified. In explaining project results, an attempt is made to estimate as accurately as possible the outputs by project component against the 4 target areas in the project logical framework matrix.

#### 3.1 Programme implementation

The findings suggest that the design of many elements of the project was well-thought-out and was proved sound by successful implementation of the project. A core team that comprised; Resource Management Officer (1), Monitoring and Evaluation Officer (1), Operations Assistants (2), Senior Programme Officer (1), Warehouse Assistants (2) and Drivers (2) at IOM Harare successfully implemented the programme. This team was supported by IOM Brussels, Chief of Mission and other IOM staff based in Harare to execute this task during the implementation phase. The implementation of programme was generally satisfactory in all sites.

Table 2 on the following pages shows the 4 result areas established in the project's original Log-frame and the assessments and observations of the independent evaluator. Thereafter specific mention will be made of some of the project components where it is felt that additional information is required to back up the findings or to give a greater appreciation of the actual success (or lack thereof for some components). During the lifespan of programme some external factors were encountered which militated against timely implementation of some activities. These broad factors include and are discussed as follows:-

- i. **Mobility of beneficiaries:** the programme targeted beneficiaries who are extremely mobile. The impact of OM has resulted in unique challenges as some beneficiaries had settled themselves in areas where the authorities deemed as illegal. This presented a new challenge as potential beneficiaries would mix with the general population during the day and regroup at night. In some instances potential beneficiaries would be looking for work and food during the day. This meant that IPs had to coordinate and mobilise displaced people in ways that would not expose them. Consequently, beneficiary registration verification took longer.
- ii. **Vulnerability of beneficiaries:** it was difficult to isolate the affected from the general population because of their proximity to other formalised settlements. This consequently resulted in exposure of affected vulnerable members of the community.
- iii. **Operating environment:** the GoZ has been hostile towards the displaced people. This has led to uneasiness of relationships between the GoZ and NGOs, civic society and so on. This resulted in some identified IPs withdrawing from the programme.
- iv. **Faith Based Organisations (FBOs):** IOM was not able to work with some partners it had earlier identified in the programme proposal. Diverging views on HIV and AIDS mainstreaming specifically on condoms distribution was a reason cited.
- v. **Coverage:** the targeted population is less than 5% of the affected population. Because of the uniqueness of the crisis, IOM was not able to establish definitive numbers affected by OM. Further, new cases were reported during the course of the year. The population targeted by this action was established in July by the UN report. However, this intervention was only executed six months later, thereby limiting the reliability of the statistics provided.

**Table 2: Activities, means of verification and evaluator’s assessment**

Activities	Evaluator’s Assessment
<b>Activities related to result 1:</b> Up to 1000 households (5000 individuals) provided with non-food requirements.	
1.1: Liaise with UN, GoZ and the NGO sector to support planning and coordination.	IOM has and continues to liaise with various stakeholders in the delivery of assistance to affected individuals for this and other programmes. This has resulted in most NGO relaying on IOM for technical, information and logistical support in the delivery of assistance. UN agencies that IOM has effectively worked with in delivery of humanitarian assistance include; WFP, UNICEF WHO and has consulted UN Country Team. IOM has achieved a major milestone as it remains as one of a few organisations that has been given access to holding camps and to affected people. This has allowed IOM to implement current programmes in these highly sensitive areas. Ministry of Social Welfare consulted during the evaluation commended IOM’s ability to support the affected.
1.2: Organise weekly coordination meetings with implementing partners.	At the height of OM, weekly meetings took place to facilitate effective and efficient delivery of supports to affected communities. This also included mapping of agencies area of operation to avoid overlapping, duplication and prioritisation of support provided. During the lifespan of this programme under review, initially weekly meetings were hosted by IOM. These were replaced by bi-weekly and later by monthly meetings in response to changes and mobility of affected persons. It should be noted that this activity was already taking place prior to this programme. Resources provided by this action further enhanced this aspect. The boardroom constructed as a result of funding provided by ECHO provides a conducive place to host coordination meetings.
1.3: Create a steering committee and organise monthly donor meetings.	IOM hosted and is still hosting monthly meetings with IPs and has actively been meeting donors in Zimbabwe to keep them abreast of developments. This has also result in IOM inviting donors to undertake a review of IOM Harare. A steering committee was established during the course of this programme under review. However, it relevance is in question as a UN steering committee exists in Zimbabwe for all UN and NGOs.

<p>1.4: Through a participatory framework, continually assess humanitarian needs and respond in the quickest way possible, ensuring the protection of the most vulnerable.</p>	<p>IOM has developed and continues to respond positively in a dynamic fashion to the needs of communities under this grant and others. Even though information is being generated from the ECHO funded response, it is not practical and feasible to respond in the quickest way possible because of the nature of approved grants and funding cycles. However, this has gone a long way in improving information that IOM has which has aided it in developing fundable proposals. On the aspect of protecting the most vulnerable, IOM has taken the following steps;</p> <ul style="list-style-type: none"> <li>(i) Trained IPs on Sphere standards and Humanitarian Principles;</li> <li>(ii) Has encouraged and raised awareness to beneficiaries and non-beneficiaries on steps to take to ensure their protection.</li> <li>(iii) Provided supports in this programme</li> </ul> <p>Despite this commendable action, it is not clear how IOM has effectively ensured protection of the most vulnerable. It is apparent that IOM is now well equipped to respond rapidly to protect the most vulnerable. However, the supports needed also influence IOM's approach. Further, some of the needs are long term, thereby hindering the assistance IOM can provide as most of funds provided to it are for emergency programmes.</p>
<p>1.5: Prioritise female- and child-headed households, orphans, the elderly and chronically ill.</p>	<p>From discussions held with IPs and beneficiaries it is evident that IOM prioritised female- and child-headed households, orphans, the elderly and chronically ill with supports provided during programme implementation. This process was participatory in nature involving IPs in the registration, beneficiary verification and selection. IOM has developed an assessment tool for vulnerability. This registration tool is refined for emergencies 'fast' and a more comprehensive tool which is used for sampling purposes. Despite this achievement, IOM is faced with a huge challenge as the majority of the affected fit into more than one of the categories defined as vulnerable. Another challenge faced is the ability of IPs to properly use chronic illness as a criterion of vulnerability. IPs understanding and community perceptions are hazy on this aspect.</p>

<p>1.6: Establish and maintain a monitoring database of beneficiary households in need of non-food requirements.</p>	<p>Through the funding received from ECHO and support from IOM International, IOM Harare has developed a state of the art Microsoft database. The database is linked with excel spreadsheets making analysis easy and rapid. The current programme beneficiaries are in the database. The database is also linked to other programmes and information collected during registration. This has given IOM comprehensive information on beneficiaries meaning that when resources are available, targeting can be done rapidly. The security and integrity of information in the database is high. The team managing the database is competent and very innovative.</p>
<p>1.7: Procure and distribute appropriate non-food requirements kits (blankets, plastic jerry cans, cooking utensils, hygiene items, water purifying tablets, HIV/AIDS information and condoms) in an effective and neutral and transparent manner.</p>	<p>This activity took place at the prescribed time by the procurement department of IOM following and satisfying procurement procedures. All items were locally purchased ensuring cost-effectiveness. In the programme document, IOM intended to support 1000 households, however, through cost-cutting measures, IOM was able to reach 1394 households. Further, the programme team purchased the kits in the first month of the programme avoiding additional costs resulting from inflation. However, additional costs in terms of storage were incurred. Distributions were as follows;</p> <ul style="list-style-type: none"> <li>- 499 in Hopley (IOM); 100 in Hatcliffe (Catholic Church); 250 in Mbare (Evangelical Fellowship Zimbabwe (EFZ) and HelpAge; 200 in Dzivarasekwa (HelpAge) and 145 in Glen Norah (EFZ).</li> </ul> <p>Generally communities were mobilised and sensitised on the programme and this resulted in openness. This practice was evident in all sites apart from Hatcliffe. Complaints related to mobilisation, sensitisation and distribution were narrated by residents of Hatcliffe. Some community members of Hatcliffe extension were of the perception that the 100 households selected for assistance were members of the Catholic Church. These feelings were incited by;</p> <ul style="list-style-type: none"> <li>(i) NFIs being distributed at the Catholic Church and</li> <li>(ii) The proportion of beneficiaries that received the non-food items (100 vs. 2000 households).</li> </ul> <p>However, through IOM's post assistance assessments it appeared that approximately 50% were Catholic Church members. This was also supported through the evaluation discussions. Apart from this incident, discussions with non-beneficiaries and beneficiaries other programme sites, it was evident that supports were provided in a neutral and transparent manner without outside influence.</p>

<p>1.9: Ensure that protection measures, especially for women and children are appropriately implemented.</p>	<p>This component was delivered through the capacitation of IPs and awareness meetings with the general population during NFIs distributions. IOM highlighted and enforced strict measures in the adherence to Sphere standards in the distribution and registration processes by IPs. Because of the nature of this programme, this was a one off event. Follow up and systems were not established to ensure that protection measures are in place for women and children. This activity in itself is not clear.</p>
<p><b>Activities related to result 2:</b> Increased availability of HIV prevention and Behaviour Change Communication (BCC) materials for populations affected by evictions.</p>	
<p>2.1: Develop and distribute Behaviour Change and Communication (BCC) &amp; Information, Education and Communication (IEC) materials that address heightened risk factors specific to current displaced populations to combat the low perception of risk to HIV infection.</p>	<p>IOM reviewed and developed existing IEC material, mainly from PSI. a total of 80.000 HIV and AIDS IEC material was produced covering; (i) personal risk perception, (ii) Voluntary Counselling and Testing (VCT), (iii) early treatment of Sexually Transmitted Infections (STIs) and (iv) consistent and correct use of condoms. The distribution of IEC (BCC) material and NFI's was preceded with dramas, role plays and discussion conducted by Patsime Edutainment Trust a drama group engaged by IOM. Through collaboration with implementing partners and technical partners, PSI and Patsime Edutainment Trust, theatre performances have been organised at distribution points. The aim was to disseminate prevention messages and thus reduce vulnerability to HIV and STIs. For these sizeable and captive audiences, drama has proven to be very effective communication tool. The performances encouraged audience and generated discussions. Further, during IP capacitation process, the HIV and AIDS mainstreaming was also articulated. IOM through its key personnel dealing with HIV and AIDS related issues, printed generic BCC material and each household that received a kit also received these. This activity targeted all community members.</p> <p>It is estimated that at least 80.000 people were reached by this activity accessing vital HIV and AIDS information. Female and male condoms were distributed during NFI distributions. Challenges faced with this activity included; (i) logistical challenges in synchronising distributions with HIV and AIDS mainstreaming; (ii) use of a church in Hatcliffe as a distribution point. The church allowed the distribution of NFI minus the condoms; (iii) IEC material distributed lifespan was short. Targeted communities are using fire as a source of fuel. Inevitably, IEC material was used to start fires and (iv) IEC distribution and HIV and AIDS awareness was once off event.</p>

<p>2.2: Establish access to condoms for groups most at risk of exposure.</p>	<p>Because of the nature of displacements and vulnerabilities associated with mobility which will be discussed in later sections, the majority of people both in formal and informal settlements are at risk to HIV and AIDS exposure. Therefore, it was important for IOM to devise strategies that ensured access to condoms. Two delivery methods were used in the enhancing access to both male and female condoms in targeted sites. Firstly NFI kits distributed were accompanied with condoms. Community leaders mainly Home Based volunteers stocked condoms provided by IOM to act as replenishments persons during and after programme termination. During the data collection, HBC providers claimed that they still had condoms available and community members were accessing them.</p>
<p><b>Activities related to result 3:</b> Local communities and NGOs strengthened.</p>	
<p>3.1: Capacity building to local NGOs and IPs to ensure efficiency and accountability in grants management, integrating monitoring and evaluation into capacity building relationships, ensuring linkages between financial resources and on-going technical support.</p> <p>Through the implementation of the project, IOM will host regular steering committee meetings to provide for donor contributions and input.</p>	<p>In order to effectively and efficiently implement this programme and build relationships with IPs, IOM produced a comprehensive Capacity building manual that was used to train IPs over a 2<sup>1</sup>/<sub>2</sub> day workshop. This was done from the 22-24<sup>th</sup> of March, 2006, prior to registration and distribution of NFI kits and other supports. Topics covered during the workshop included; (i) working in emergencies (gender-based violence and code of conduct for Humanitarian Workers, Guiding Principles on Internal Displacements), (ii) guidelines for emergency assistance (including caseload identification, beneficiary registration, food and non-food distribution, other assistance and M&amp;E), (iii) the emergency assistance programme, (iv) mainstreaming HIV/AIDS and gender, (v) developing proposals and reports, (vi) financial regulations and (vii) Programme M&amp;E tools. Review of this manual clearly shows that the training was well thought out and informed by an IP capacity assessment conducted prior to the workshop. At least two staff members from each IP attended this workshop which was said to have been well organised. Further, key informants from IPs claimed this had helped in programme delivery for IOM and other agencies and if it were possible IOM should undertake another workshop so that other members of IPs are trained. In addition, capacity building also included on the job training, as IP staff assisted IOM in beneficiary registration, verification, NFI distributions and reporting. By attending meetings cross-learning was promoted and networking between IPs is evident.</p>
<p><b>Activities related to result 4:</b> Institutional capacity of IOM Zimbabwe to respond to humanitarian crises strengthened.</p>	

<p>4.1: Appoint a Senior Programme Officer (1), Resource Management Officer (1), Monitoring and Evaluation Officer (1), Operations assistants (2), Warehouse Assistants (2) &amp; Drivers (2).</p>	<p>The recruitment of the listed positions took place in January and February as scheduled. Qualified and experienced personnel were recruited and this was pivotal to the success of the programme. The team mobilised by IOM and positions filled have resulted in effective and efficient programming. Resources channelled for this activity and the processes were executed according to how the programme was designed.</p>
<p>4.2: Restructure the organisation in accordance with the revised Organo-gram in Annex II.</p>	<p>With the recruitment of additional staff, IOM was able to restructure and develop a responsive dynamic team. Units that have capacitated as a result of this action include; (i) Emergency and Reintegration Unit and (ii) Project Development Unit and supported by the M&amp;E unit. The section of institutional arrangements will look in greater this aspect.</p>
<p>4.3: Review and revise existing guidelines for monitoring and evaluation for IOM.</p>	<p>This activity was executed in February and March and in ongoing resulting in IOM producing new guidelines used in the delivery of programmes and reporting. Further, developed guidelines were used during the 2<sup>1</sup>/<sub>2</sub> day capacity building workshop. The M&amp;E unit has gone a step further and has developed a clear M&amp;E framework for all programmes detailing plans, indicators, activities and persons responsible for them.</p>
<p>4.4: Develop financial guidelines for Implementing Partners.</p>	<p>The finance department modified existing reporting guidelines for effective and efficient reporting of funds disbursed to IPs. As already stated this use of these guidelines was delivered during the capacity building workshop.</p>
<p>4.5: Develop Monitoring and Evaluation guidelines for Implementing Partners.</p>	<p>The M&amp;E officer drove this process and currently, IOM has a functional M&amp;E unit assisting the two units. Guidelines were developed timely and these were used effectively in targeting and reporting. Some of the guidelines included beneficiary selection, verification and post distribution assessments. Further, the reporting formats for all IOM activities have been standardised. This consequently resulted in improved reporting and lessening IPs ‘reporting burdens’.</p>
<p>4.6: Procure two field vehicles and build pre-fabricated office space.</p>	<p>Two vehicles were procured timely and were used in the delivery of programme. The pre-fabricated buildings are complete. These consist of 8 offices and a boardroom.</p>

**Table 3: Programme output, outcome and impact indicators**

Sector	Evaluator's assessment
<p><b>Result 1:</b> Improved coping mechanisms for affected populations to respond to crisis through the distribution of non-food items.</p>	<p>From discussions held with recipients of this component, some degree of success in lessening burdens was achieved. However, for the consumables such as soap and sanitary wear have been exhausted, these were reported to have lasted 3-4 months at most for an average family of 5. This can be largely attributed to the fact that beneficiary households do not have any source of income. However the evaluator feels that without additional support, benefiting households will slide deeper into poverty. While it is felt that there was no strong evidence of enhanced coping strategies, neither was there strong evidence of negative coping strategies among those surveyed as a result of the secession of NFI distribution (e.g. borrowing for food and essentials was very low). Maybe this a result of poor people being clustered together resulting in no one being better off.</p>
<p><b>Result 2:</b> HIV/AIDS Behaviour Change Communication (BCC) materials developed/adapted and disseminated and increased availability of condoms for populations affected by OM.</p>	<p>It is difficult to establish the success of this component apart from the output indicators. The programme has exceeded the primary beneficiaries (1000 households) by producing 80.000 IEC (BCC) materials for programme sites. The material reviewed was easy to follow and was in three languages, English, Shona and Ndebele. Availability of condoms immediately during programme delivery was evident. However, after completion of the programme, this is not apparent. Use of local HBC providers in areas as the case in Hopley Farm has resulted in a greater role being given to HIV and AIDS prevention. HBC volunteers claimed that condom uptake was high within the community. However, when the current stocks of condoms run out, HBC providers had no clue of where and when they will get the next supply.</p>
<p><b>Result 3:</b> Implementing partners (IPs) providing appropriate assistance and submitting satisfactory financial reports.</p>	<p>There is strong evidence to suggest that implementing partners have provided appropriate assistance to those affected. Appropriate in this respect, are inputs provided as a result of the programme. IPs were trained on financial reporting, however, because no funds were distributed this aspect of the programme cannot be objectively verified.</p>
<p><b>Result 4:</b> Increased coverage of beneficiaries as a result of the expansion of IOM Harare's humanitarian resources, logistical and office capacity.</p>	<p>Within this programme, there has been an increase in the areas were IOM is operating in. other activities have also been added on as IOM is increasing caseloads and coverage in Harare. Relief and short term developmental programmes are currently being implemented. It is important to note that after the completion of this programme, IOM has at least in the short term, retained the services of the team through funding from other donors. However, more support is still required to ensure staff retention is promoted. This mobilised team is now assisting IOM in the implementation of other programme.</p>

Based on the field sampling, and an examination of project implementation, the independent evaluator has attempted to pull together some broad findings and analysis that supplements the summary information contained in Table 2 above and ahead of answering the 5 key questions in the ToR for the evaluation. In making this analysis the following observations have been made:-

- The situation in informal and formal settlements was quite different, especially with respect to vulnerability. The needs for those in informal settlements are greater than those in formal settlements and more assistance has been channelled towards the formal settlements such as Hopley Farm compared to Mbare. This is in reference to the current programme and other donor funded activities.
- Targeting in all the sites visited, the evaluator was satisfied with criteria applied. However, it is important to note that there is a thin line between those who benefited and non-beneficiaries.
- Participating IPs have different capacities from HelpAge which has offices and a clearly defined structure to the Catholic Church where one person is responsible for the programme.
- Despite the supports provided by this programme, the beneficiaries are still extremely vulnerable. A high proportion of people in the areas are chronically ill (PLWA) and require additional assistance. Multiple vulnerability is evident across all sites.
- The targeting criterion used has resulted in some disgruntlement within the settlements as most initiatives target the same people. This has in a way isolated some sectors of the community.
- The low proportion of people receiving support per site has caused tensions within the community. Those involved in programming with IPs and IOM are viewed as participants of favouritism.
- From the sampled households, it is clear that each household received a full kit prescribed in the project proposal.
- Soap and sanitary wear lasted an average 3 to 4 months. A majority of the current beneficiaries have exhausted all soap and sanitary wear provided.
- Some beneficiaries in Mbare lost buckets and jerry cans when local authority police raided the settlement at dawn which is classified as illegal.
- Most recipients of supports provided by this emergency programme are visibly ill, destitute and the majority are women.

### 3.2 Assessment of Findings

Ahead of making lessons learnt and final recommendations this section will look at the specific questions asked in the terms of reference and in accordance to ECHO requirements.

#### 3.2.1 Relevance of programme

Key issues under this heading included matters relating to the definition of IOM's role, choice of strategies, activities of achieving the project objectives, IOM's functioning within the Zimbabwe context, its perception by various stakeholders, and its compatibility with other stakeholders. Further, the relevance of the project was analysed within the context of the project's suitability in responding to the needs of the communities affected by OM in Harare. The overall purpose of *"to alleviate human suffering of those displaced in urban areas in Zimbabwe"* is very relevant within the targeted communities where the programme was delivered. Needs assessment and UN reports, secondary data clearly support the implementation of this programme as households were and are still in a humanitarian crisis. It was also of particular relevance to IOM and ECHO within the context of humanitarian crisis grappling the country

for the past year in the localities targeted to implement humanitarian programmes. Within this context it is of further relevance for the aid community through humanitarian stakeholders retain a presence in country to develop strategies for increasing household livelihood security immediately, to work towards recovery and rehabilitative strategies and to lay the foundations for long-term development within the urban areas so as to avoid future emergencies.

From the viewpoint of the implementation strategy and its connection with other humanitarian activities, it is important to emphasise the interventions utilised were appropriate, even though their setting up, or ways, may have not been completely original, but were well thought out and duly oriented, to bring assistance to vulnerable populations. It is evident from key informant interviews that the programme beneficiaries were not involved in the programme design but in the establishment of priorities. Analysis used in the problem statement within the proposal was based largely on a rapid needs assessment and secondary data. Interventions used in the programme are ones used by the aid community generally in many parts of world. Though the target population were not involved in the planning process (and this is probably acceptable within an emergency context for a programme reaching such a large population) most beneficiaries surveyed indicated their appreciation of the programme and supports received. The evaluation further found that communities was sensitised and mobilized around the project activities generally and specifically those being targeted in their localities.

On the question of acceptance and community participation of interventions the evaluation found openness on the parts of the community and beneficiaries to accept and apply the interventions being promoted at the sensitization phase. Community participation was evident throughout programme implementation as communities contributed towards the achievement of programme goals in kind. Communities assisted in the physical distribution and security during distributions. During implementation some components achieved greater acceptance than others, their relevance and validity is discussed;

- **Up to 1,000 households (5000 persons) provided with non-food requirements:** as already stated OM was implemented in a rapid and indiscriminate manner resulting in poor households being severely negatively impacted. Consequently, the majority lost property, sources of livelihood and access to meaningful assistance. The net result of OM was that displaced people became destitute and increasingly vulnerable. OM affected households and those displaced from their dwellings in many instances possessed only what they had salvaged or carried, and the provision of appropriate non-food items was required to meet essential needs. Numerous studies (IOM rapid assessments, UN and NGOs) undertaken in Zimbabwe point to the fact that non-food requirements for displaced people was a priority and an area that had been left out and often neglected. Current economic challenges in Zimbabwe have further compounded the vulnerability of displaced people as costs associated with purchasing lost items is not feasible. IOM's Initial Community Assessment forms reviewed for the project sites clearly support implementation of this action. This action was implemented 11 months after the first reported displacements. However, prior to this, funding had been mainly geared towards food assistance accompanied by blankets. IOM developed the NFI kit<sup>3</sup> items using the Sphere Standards as a reference point. Some important components of NFI kits were missing as a result of ECHO's advice on NFI kit composition. Despite this, on the overall, the NFI kit received a very high level of acceptance across all operational locations. Therefore, on the question of relevance and validity, it is beyond doubt that IOM had clearly identified a gap in the current response to OM and the actions it has been implementing on this aspect is valid. In addition, the target was surpassed as 1394 households benefited from NFI kits.

<sup>3</sup> 1 x 20 litre jerry can, 2 pots (small and large), 6 plastic plates, 6 plastic mugs, 1 knife, 1 cooking spoon, ten 250g laundry soap, 6 carbolic bath soap, 1 bucket, water purifying tablets, HIV information, condoms (both male and female) and 4 packages of sanitary items.

- **Increased availability of HIV prevention and behaviour change communication materials for populations affected by evictions:** HIV prevention is an area of great concern following the evictions, as displacements often put people at greater risk of being infected with the virus. Potential risk factors in the current situation include the separation of couples, increased stress, transactional and commercial sex, sexual violence, as well as interruption of services and supplies. Family separation is a particularly important risk factor in the spread of HIV, and previous experience indicates that displacement and separation of couples could lead to an increased frequency in unsafe sex. Access to services such as HIV information, counselling and condom distribution was severely disrupted in many places as a direct consequence of the OM. Nationwide sales of male condoms are reported to have dropped by over 20% from May to June 2005, while sales of female condoms dropped by about 40%. Condom marketing programmes in some areas have reportedly come to a complete standstill, mostly because outlets such as tuck shops and informal vendors have been shut down. Considering that HIV prevalence rate is estimated at 20.6% it was very relevant that IOM factored in this action in the delivery of NFI kits. Moreover, considering that the majority of affected by OM are hosting chronically ill persons. As earlier stated, the economic challenges faced by Zimbabweans may also drive women and girls into casual sex in exchange for money and other commodities they are not able to access.
- **Local communities and NGOs strengthened:** the challenges associated in operating in urban areas and the uniqueness of OM resulted in IOM devising innovative ways of reaching out to affected persons without compromising their security. The delivery method of supports via Community Based Organisation that are grounded within the communities was premised on the notion and information that many affected people had approached these for assistance. Further, CBOs, were positioned within the affected communities and had first hand information on what was taking place. Therefore it made sense that IOM partnered with these organisations in providing assistance. Despite these advantages with utilising existing structures, most CBOs had never implemented such programmes in their localities. The need to strengthen them was critical in the delivery of project activities and has positioned them to respond efficiently and effectively to similar crises. It is important to note that many large NGOs were not keen to undertake activities in urban areas and be associated with OM displaced persons because of its sensitivity with authorities. It is also a requirement for NGOs to seek approval to operate in new areas, which administratively would have taken longer. Further, not many NGOs would be willing to cooperate in a programme providing assistance to 1000 households. Therefore it was more relevant for IOM to partner with the selected IPs in delivery of support. To ensure efficient and effectiveness in the approach, a component of capacity building was essential.
- **Institutional capacity of IOM Zimbabwe to respond to humanitarian crises strengthened:** after OM IOM took a leading role in providing resources to the affected population by rechanneling of some of its resources from their ongoing activities. Prior to OM, IOM was working with displaced farm workers who were estimated at least 1 million caseload. OM significantly increased the caseload IOM was reaching out to. Based on the UN report (the estimate is a conservative), OM almost doubled the number of persons requiring assistance. OM victims are unique because of the nature of OM implementation and their needs were more towards emergency that developmental as in the case for ex-farm workers. The added on effects of OM resulted in IOM capacity being stretched to effectively and efficiently respond to OM. This required IOM to change and respond to the new and challenges as scope, coverage and interventions significantly increased. It is also important to note that the effects of OM are both short- and long-term. Therefore, it was relevant that IOM's capacity be

enhanced in order to respond to the immediate crisis and be positioned to effectively implement other programmes in future for the victims of OM.

### 3.2.2 Efficiency of programme implementation

This section of the evaluation addressed the question of whether ERP has functioned in a manner designed to optimise the cost-effective use of the resources which have been made available to it. Topics addressed include issues of coordination with other stakeholders in order to avoid overlap and duplication; adherence to ECHO standards of accountability, reporting, and the internal structure and functioning of ERP.

As already indicated in this report IOM Harare ERP employees and management sought to implement the programme against the proposed timeframe despite challenges encountered. Though there were delays to starting, the team managed to catch up and complete all actions ahead of schedule. Actual budgetary spend indicates areas of over and under spending but the overall project was implemented within the agreed amount of funding. The delivery system use by the project appears to have been appropriate, efficient and cost-effective. The beneficiaries praised the programme for its speed, efficiency and convenience. Below are brief comments on areas of interest for this evaluation:-

- *IOM Harare's operational capabilities and staff:* The evaluator believes that the team engaged for this assignment was qualified and had the relevant experience to undertake such an activity. Discussions and CVs reviewed shows that IOM recruited suitable personnel for the programme. In particular the experience of the expatriate staff who provided support to the programme.
- *Organisation of the operation in the field:* it is evident that IOM ERP staff worked closely and in constant consultation with stakeholders from relevant line ministries in the delivery of the programme. The structure of the ERP was very clear and the positions defined were clear to facilitate proper implementation.
- *Cost sharing:* IOM and its partners signed a MoUs detailing responsibilities and functions of each party. In IOM's original proposal, costs incurred by IPs were to be met by ECHO. However, after deliberations with ECHO, this cost was shouldered by IPs. This also included use of offices and IP staff in beneficiary registration, verification and distributions at no cost to the programme. Targeted communities also contributed labour in the distributing and securing supports brought in for distributions.
- *Reporting and self evaluation:* This activity generally proceeded well and was manageable based on the relatively on the number of progress reports produced. Monthly progress reports were submitted to IOM Harare office and to IOM support staff in Brussels. The reports contained very useful information, which was generally of quantitative in nature. In future, IOM International should consider the qualitative aspects of programme delivery. Self evaluation of the EP team did not take place. Understandably, the team was trying to increase time dedicated to delivery of programme tasks, however, this may have compromised quality and not quantity.
- *Storage and handling of material and inputs:* appropriate tracking and accounting systems were put in place for the security and delivery of programme inputs. Discussions held with the commodity officer and logistic documents reviewed. From inspection of stores records, the procedures and measures put in place by IOM are satisfactory to safeguard and track commodities. No losses were noted during the period in question.
- *Appropriateness of non-food items:* the choice of the majority of NFI kits components was done in a cost effective manner. However, the quality of 20-litre jerry containers is questionable as 30% of interviewed households reported that these had poor quality - handles had broken, bases collapsed and in some instances both had occurred.

- *Visibility*: as indicated to ECHO in the project proposal, the sensitivity associated with OM, IOM had decided to limit visibility of ECHO in the delivery of supports to affected communities. Despite this, IOM ERP team have endeavoured to follow the guidelines provided by ECHO in terms of visibility. The ECHO logo was depicted on;
  - o Vehicles used in programme implementation,
  - o EP staff t-shirts and
  - o Training material such as manuals.
- *Use of Implementing partners*: the approach adopted by IOM in the use of IPs in the delivery of programme activities is cost-effective. This ensured that more supports intended for beneficiaries were not spent on administration and logistics costs. Further, the synchronisation of activities such as delivery of HIV and AIDS awareness material also ensured efficiency in programme implementation.

Finally, quantitative outputs in relation to inputs have been impressive and IOM has done well to maintain fairly close monitoring through regular contact with partners in response to reports and through site visits. The quality of outputs and activities is covered in section 3.1. While assessment of beneficiary numbers (e.g. number of households that received NFI kits) is relatively easy, measurement of quality of service provision is more difficult. Despite this, beneficiaries were impressed with the approach used in this programme. In conclusion, IOM and its partners have implemented this programme in a cost-effective and efficient manner in addressing the project objective in reaching the intended beneficiaries.

### 3.2.3 Effectiveness of the programme

Under this heading the issues most frequently raised by those interviewed related to the extent to which the ERP had met its initial goals and objectives, and the nature and scope of the impact. Table 2 within this report and the detailed explanations that follow give a comprehensive outline of the evaluators' assessment of attainment of expected results. This section will therefore attempt to assess the extent to which the project's specific objective was met. The specific objective of the project was to *"to provide non-food requirements and HIV prevention to affected vulnerable populations through the strengthening of IOM's capacity to respond to humanitarian crises"*. There is strong evidence to suggest that provision of non-food requirements to 5000 individuals was achieved in all operational locations, whilst IOM has been strengthened to respond to humanitarian crises. The accumulated experience in the implementation of the current ERP is shown by the modification of some strategies as the project progressed and continues to be based in finding new formal to respond effectively to the humanitarian needs of targeted communities.

The ERP provided the simplest ways of providing NFI kits, HIV and AIDS information, capacity building and institutional support to IOM. Approaches utilised in the ERP have evolved into more efficient and effective ways of providing humanitarian assistance. For example in connection to NFI distributions and BCC, these practices have, in most cases, made it possible that communities are equipped with the knowledge to impart acquired knowledge to other members of the settlements. To facilitate effective utilization of project activities, the project also reinforced the benefits of provision of condoms and BCC material by promoting HIV/AIDS through discussions, dramas and role plays through Pastime. Further, stronger linkages with NAC through DAACs in respective areas ensured greater mainstreaming of HIV and AIDS issues. The relationship with the government structures and other stakeholders was strong and the reporting mechanism developed resulted in the programme being effective all levels and 'free time' was taken advantage consultation the local population by IPs.

To facilitate effective utilization of project activities, IOM promoted coordination with current IPs and other stakeholders to avoid duplication of activities. This was done through regular monthly meets held at IOM, sharing of monthly meetings with the wider humanitarian actors as well as line government ministries. Further, IOM conducting monthly briefings that also aid in the coordination of activities in response to OM and other IOM programmes. The implementation programme of activities of was done in a coordinated manner and in full consultation of all IPs resulting in most distributions taking place of designated days without an incident. The only challenge associated with coordination, was evident in Hatcliffe, where condom distributions were not undertaken at the distribution point. For a response to be effective, close coordination and collaboration are required with other sectors. Coordination with local authorities and other responding agencies is also necessary to ensure that needs are met, that efforts are not duplicated, and non-food item interventions is optimised. If coordination had been effective in this respect, this issue should have been addressed before the distribution date. Apart from this isolated incident, information flow was in both directions. Use of participatory mechanisms was a trademark of the programme as both beneficiaries and IPs were consulted on their needs, and the delivery mechanisms. Implementing partners were kept abreast developments in relation on this current action and others.

IOM strived to adhere to prescribed targeting criteria throughout the implementation of the programme. Evidence as the effectiveness of targeting is favourable. From the focus group discussions and individual interviews conducted during the field work it is evident that IOM probably had an inclusion rate of less than 1%. However, the exclusion rate for this programme is high for reasons discussed earlier. Greater clarity and transparency and clarity about the resources available and the number of people who could be targeted might have helped to reduce suspicion within mos settlements.

Capacity building has been present in the organization processes that IOM applies in its intervention strategies. Whether oriented towards the strengthening of IPs and the training of beneficiaries in which it was possible to review implementation contents and methodology as the essential complement of the technical-formative component. If there had not been such a complementary relationship between the need to recreate the individual life project and the promotion of the productive project, results such as the ones presented would certainly not have been achieved. It is evident that the impulse of this programme inevitably positioned IPs and stakeholders in the activities of post emergency assistance. The evaluator strongly believes that IOM has contributed to both the preservation and sustenance of lives of a very substantial number of people affected by OM through this programme. However, four major issues may need to be looked at by IOM in assessing its future approach to attaining the objective of alleviating human suffering of those displaced in urban areas in Zimbabwe:-

- (i) **Provision of supports in ‘illegal settlements’:** IOM should access its position of delivery assistance in areas classified as ‘illegal’ by the GoZ. This as a result of information that shows that some households lost supports received as a result of local authority police officers raiding their settlements at dawn.
- (ii) **PLHA:** the current strategies employed by IOM does not cater for the most vulnerable members of the community. IOM needs to establish the most appropriate strategies for supporting the most vulnerable HIV/AIDS infected households.
- (iii) **Appropriate NFI kits:** the composition of NFI kits should be based on Sphere standards as well as projections of continued need especially for consumables. From the field work undertaken, it was clear that a majority of beneficiary households are hosting children below 5 years. However, this was not factored in the NFI kits.

- (iv) **Selection of IPs:** the selection of IPs should be based on their ability to adhere to MoUs. Confusion surrounding condom distributions and acquisitions of religion being a factor in selection of beneficiaries should be avoided.

In establishing the extent to which livelihood security was attained through the provision of non-food requirements and HIV prevention to affected vulnerable populations through the strengthening of IOM's capacity to respond to humanitarian crises the evaluator observed the following:-

- (i) **Problem still exists:** despite commendable work that was undertaken as a result of this programme, the challenges faced by mobile and vulnerable people are still numerous. IOM and the donor community need to review this approach, as supports received are alleviating short term challenges. Specifically, for how long can IOM keep providing relief support to the urban displaced.
- (ii) **Coping strategies:** drawing on an analysis of findings from discussions it is difficult over one short period, (timeframe) to establish any trends among beneficiary in terms of improved coping strategies.
- (iii) **Coverage:** despite reaching 1394 households with NFI kits and producing 80000 IEC materials, the proportion of households reached by this programme is less than 5% of the affected households. Further, the approach of splitting limited resources on five different locations support received was inadequate and other households are in similar predicaments as those supported prior to receiving support.
- (iv) **Security of beneficiaries:** despite IOM's ability to work with displaced persons, IOM needs to go a step further and guarantee the safety of the displaced. This key to the success of future programmes.
- (v) **HIV and AIDS awareness (IEC (BCC)):** the method of delivery of BCC should be specific for all age categories. The blanket approach may have limited the participation of other sectors and gender. This should also be reflected in the IEC material handed out.

### 3.2.4 Monitoring and Evaluation mechanism

IOM's ability to monitor and evaluate has been gradually improving as a result of the M&E officer recruited to drive this process. For the most part, the detailed and systematic monitoring of the project delivered results in a timely enough way to influence critical elements of the project. Currently, the general objectives of the monitoring has been (i) to ensure that operations proceed as planned in pursuit of the defined objectives, i.e. to ensure that resources are properly used and that the supports reaches the targeted beneficiaries; (ii) to monitor the outcomes of IOM and IPs interventions; and (iii) to detect changes in the situation that might call for an adjustment of objectives, plans, or procedures. Beyond the internal use for decision making, M&E has enabled IOM to account for the NFIs donated and to respond to donor concerns with regard to programme implementation. IOM activities are currently monitored at all stages of the intervention, through the implementation of registration monitoring, NFI kits distribution monitoring, post-distribution and output monitoring. These processes have promoted efficiency in delivery of appropriate supports to needy people in the most cost effective manner. This ensures that programmes implemented by IOM are evidence based. IOM's M&E unit has developed tools and approaches to achieve relevance, efficient and effectiveness of programmes.

IOM monitoring system relies on a set of questionnaires and report formats as well as comprehensive database, which captures, analyses and produces reports based on the data collected through the monitoring visits. All IOM's IPs use the same monitoring set-up

excluding the database. The database captures beneficiary information, which is used to generate NFI distribution recipient lists and verification forms and to store distributions (both once off and cumulative). The database also provides a standardised and easy approach to collecting, storing and analysing information on beneficiary registration, verification and distributions activities. It offers a compact and secure way of storing beneficiary data electronically. Information contained in the database is protected by use of a password and limiting the number of people with access. It provides means by which store information can be readily and easily accessed, retrieved and updated whenever necessary. A major benefit of the database is that it avoids duplication of beneficiary information already on record. During field visits, beneficiary information contained in the database was cross-checked. In all cases, the database was accurate. Below are some of the products of the M&E processes of IOM;

- **Registration monitoring:** the objectives of registration monitoring are to monitor the fairness and transparency of the registration process and to detect related shortcomings/anomalies.
- **Post Distribution Monitoring Form:** IOM has developed this form for all programmes with various components. The tool used for this programme was slightly modified. This monitoring form is a valuable tool to assess the overall use of NFI package by beneficiaries (whether items were sold or exchanged). It also evaluates the beneficiaries' perception of quality of the items and their usefulness.
- **Field Activity Report:** this form is a simple balance sheet used for record keeping purposes by IOM and IP. When used properly and updated, this balance sheet should easily highlight any discrepancies between items distributed and the actual number of households served.

Despite the positive strides achieved, on the monitoring and follow-up of the operations IOM's present limitations are evident. These are a result of programme duration. Currently, IOM's indicators are geared towards delivery (output) rather than both output and outcome. It is clear that IOM would like to move in that direction, however, funding limitations and durations will ultimately determine success.

### 3.2.5 Institutional arrangements

IOM has been able to both effectively and efficiently implement this particular programme because of proper institutional arrangements made. IOM has acted as an implementer in Hopley and as a partner in other sites as supports were delivered through selected implementing partners. The coordination mechanism employed by IOM was adequate and this is a result of the restructuring process IOM has gone through. The team mobilised for this action was well equipped and gave optimal support within IOM and IPs. The relationship between IOM and its partners is very strong resulting in IPs viewing themselves as strategic partners in the delivery of support to affected communities. On this section, the evaluator looked at the following;

- (i) **External environment:** Zimbabwe is a member of IOM internationally, and it is clear that the GoZ values IOM's contribution in the country. The close working relationship between line ministries are a case to point out. IOM has been able to navigate through the politics of the country and has been recognised as an important actor by humanitarian agencies as well as beneficiaries. The diverse background of its personnel and the mix of national and international staff has promoted greater diversity and wider thinking during programme implementation. IOM has built relationships with its partners and the mutual trust and respect will further strengthen IOM's position in the country in working with mobile and vulnerable populations.
- (ii) **Institutional factors:** IOM has worked in Zimbabwe for the last two decades and has a history in provision of assistance to mobile and vulnerable populations in Zimbabwe is

evident. The leadership style in implementing this programme was consultative and structures put in place were responsive to the needs of the communities. The human and financial resources were adequate to cater for the targeted communities and IPs. Both formal and informal management systems are in place and IPs value the relationship built during programme implementation. IOM has gone through a process of self evaluation and this has led to restructuring and output oriented performance. New capabilities have been obtained through recruitment and where budgetary pressures made such recruitment difficult, part-time and secondments from IOM international. There has been open information flows and transparency for improved implementation.

- (iii) **Inter-institutional linkages:** the functions of IOM and its IPs have expanded over time from offering support to ex-farm workers and migrants to include meeting needs of OM victims. This transition from an agency exclusively involved in providing support to ex-farm workers and migrants to one also engaged in urban households assistance has not been an easy one. Communication between related governmental and nongovernmental organizations has aided IOM's approach. IOM has demonstrated its capacity to work and liaise with other stakeholders in Zimbabwe. Notably, IOM has coordinated its activities with UN agencies that are involved with providing support to mobile and vulnerable people. Further, IOM has collaborated with smaller NGOs and CBOs in delivery of support and for coordination purposes. Therefore, IOM has had oversight on the way programmes assisting mobile and vulnerable people are being implemented in Harare.

**Table 4: What worked well and what needs to be improved.**

No.	Aspects that worked	Aspects that need improvement
1.	Clear structure within IOM	Project linked positions are short term funded.
2.	IOM team successfully implements tasks	
3.	Sectoral coordination generally worked well.	
4.	There are institutional arrangements at various governance levels.	
5.	Standards for humanitarian work enforced (Humanitarian Aid).	
6.	Roles and responsibilities of IPs were clearly defined and respected.	
7.	Coordination with other humanitarian actors evident thereby limiting duplication and overlapping.	
8.	Technical and well equipped team	
9.	Government acceptance of IOM	

#### 4. LESSONS LEARNT

The core objective of this section has been to draw together some of the emerging lessons from the implementation of ERP. This section is thus intended to stimulate thinking, challenge approaches, and to facilitate the questioning of assumptions. It is not intended to create a “new recipe or blueprint” for IOM and ECHO to adhere to as the organisations continue to implement humanitarian programmes. The challenge, therefore, is to harness this knowledge and channel it in a way that it influences continuous, dynamic learning and integration within projects. This is a general synthesis of lessons learnt from various project literature, discussions, key informant interviews and from our own understanding of challenges and experiences of programme;

- (i) IOM and its partners have practiced a unique and effective style of providing humanitarian assistance in the context of exclusion, responding with adequate solutions to each situation and the unforeseen events.
- (ii) IOM and its partners have given humanitarian assistance responses that are not limited only to strict emergency situations. In this sense, the immediate actions of post emergency have provided the displaced population with minimum conditions of self-sustainability.
- (iii) The intervention style that IOM and its partners have developed, places them in propitious conditions for initiating new processes of action against the problem of displacement; mainly in the formulation of joint interventions strategies.
- (iv) The actions that IOM and its IPs carry out regarding gender equity and relations must not be limited to work with women, by reason of their traditional situation of exclusion.
- (v) When implementing emergency humanitarian assistance, IOM and its IPs are giving direct and objective responses to preserve people’s lives.
- (vi) With correct support and capacity building IPs can effectively implement strategies that support vulnerable people.
- (vii) IOM Harare is strategically positioned to provide support to displaced persons in Zimbabwe.
- (viii) Displaced and vulnerable people are fairly organised and are committed in assisting other vulnerable members of their community.
- (ix) With appropriate capacity building and institutional framework developed, IP capacitation can be achieved. Community participation increases the capacity for the service delivery.

## 5. RECOMMENDATIONS

The following recommendations are made for IOM Harare to consider in future programming. General recommendations and recommendations regarding the various project components are presented.

- (i) The possibility of extending the present -short term- assistance with long term initiatives; mainly if it is a question of finding links that will allow the actions' continuity.
- (ii) The adequate use of logical framework approach should be stressed, emphasising in the elaboration of performance and results indicators by objectives from proposal formulation stage. That is, not only aiming at facilitating the normal monitoring and follow-up process by IOM, but mainly as mechanisms to measure the expected impacts - though relative in most cases - that the project reach and to identify possible links with additional long-term initiatives as well.
- (iii) The relationship between IOM Harare and its IPs should follow two clear and necessarily complementary directions. First, to continue strengthening the existing links, in order to foster and support joint actions between partners, and second, ensuring the transparency of all actions.
- (iv) In future, IOM needs to look at the benefits/challenges associated with providing support to people who are still mobile and are residing in areas where the government deems as illegal. The challenge of providing humanitarian assistance vs. humanitarian rights.
- (v) It is recommended that IOM and other stakeholders especially the donor community address the challenges associated with short term funding as the current practice of short term funding means positions held by other IOM staff (project staff) are compromised.
- (vi) It is advised that NFI kits be responsive to PLWHA. The current one has limitations. Considering that at least 30% of people displaced have chronically ill persons it is important that specific kits are made available and delivered in such a way that it avoids stigma.
- (vii) Mainstreaming of HIV and AIDS issues for BCC can not be achieved in a few hours. Mobile and displaced people are at higher risk for contracting HIV. This should be a process. Messages should be tailored for gender and age categories.
- (viii) The size of the NFI kit should be for a clearly defined period. The dilemma that IOM faces is evident, as consumables provided have been exhausted, however, the problems still exist.
- (ix) Continued capacity building of IPs is be an ongoing process.
- (x) The choice of IPs should be clear so that programme delivery is not compromised.
- (xi) Distribution points should be free and not inclined to specific religious bodies.
- (xii) The top bottom approach should be avoided. The total number of people assisted as a result of the programme are a mere 5% of the total population. Consequently the number still in need is far greater posing a risk of NFI kits provided to vulnerable members of the community especially to children and women. The level of desperation in these communities is alarming.
- (xiii) It is worth considering that limited supports received be distributed in a particular area. The vulnerability criteria used in the ERP is commendable, however, closer

analysis of the population in the targeted areas, the majority of the people fit the stated criteria.

- (xiv) Mobilization and sensitisation should be done over a long period. This is in light of the mobility of the targeted community. This will avoid tension created in the community as those missed feel there were deliberately left out.
- (xv) The quality of jerry cans purchased should go through a rigorous test to ensure durability.

## 6. ANNEX

### 6.1 List of people interviewed

Diana Carter	IOM
Mohammed Abdiker	IOM
Norberto Celestino	IOM
Justin MacDermott	IOM
Richard Machokolo	IOM
Elizabeth	IOM
Susan	IOM
Goodwell	IOM
Cecilia	IOM
Christopher Squire	IOM
Jason Mupepo	Patsime
Ezra Mpupande	Government of Zimbabwe (Hopley Farm),
Charity Mombeyarara	Catholic Church (Hatcliffe)
Edward Kuwana	HelpAge

### 6.2 List of documents reviewed

1. IOM Emergency Response Programme Document – ECHO funded Programme (2005)
2. IOM Emergency Response Programme Document – ECHO funded Programme (Interim Report) (2006)
3. IOM Migration Initiatives 2006
4. IOM’s Monitoring and Evaluation Frameworks
5. IOM’s Emails from Finance
6. Evaluation Summary from IPs Workshop (2006)
7. Quick Analysis from Post Assistance Experience. (2006)
8. Implementing Partners Proposals. (2006)
9. Coordination meeting meetings from IOM. 2006
10. Narrative Reports from IPs
11. File Activity Report.
12. Working with IOM. Implementing Guidelines. Emergency Assistance Programme to Mobile and Vulnerable Populations.

### 6.3 Terms of Reference

#### 1. BACKGROUND

Since 2003, IOM has been providing humanitarian assistance to ex-farm workers who were rendered without home and livelihood as a result of the Government’s fast-track land reform between 2000-2002. This has been done under its “Humanitarian Assistance to Mobile and Vulnerable Populations” programme supported by ECHO among other donors<sup>4</sup>

Zimbabwe has recently undergone a new wave of displacements through the Operation Murambatsvina/Restore Order, which was launched in mid-May 2005. As part of the government’s crackdown, carried out through police, army and municipality officials, on alleged illegal structures, vegetable vendors, flea-market traders and other informal traders, thousands of people were forcibly displaced from their homes and had their livelihoods destroyed. This situation is compounded by an already serious food crisis and a population still trying to recover

<sup>4</sup> SIDA, OFDA/USAID, ECHO, South African Government, UNDP, DFID

from the effects of the government's "fast track" land reform programme which resulted in a loss of employment for a large proportion of farm workers.

The Government has indicated that the motive for the Operation Murambatsvina was to clean up the cities and get rid of what was termed illegal structures, illegal foreign currency dealings, and criminal elements operating under the cover of the informal sector. There were numerous reports of the destruction of homes and market stalls. Furthermore, it was reported that the police and army confiscated goods. Some, who were able to salvage their belongings, sold them in order to raise funds to travel to the rural areas or other locations in Zimbabwe. The most affected areas were Mutare and Harare, although the Operation had effects nationwide.

The demolition of alleged illegal structures ushered in a plethora of problems to affected households. Houses were destroyed without any immediate alternatives provided. As a result, children and the chronically ill continue to spend nights in the open air. Clean drinking water is a problem for those affected. Firewood is scarce. All livelihood activities sustaining these families ceased.

The majority (about 80%) of those displaced must therefore be assumed not to have been HIV infected before the operation. However, changes of residence and displacements tend to increase the risk of new infections. Main reasons why vulnerability to HIV is likely to increase in situations of displacements is the tendency for men and women to engage in casual (and unsafe) sex, and for women who lost their livelihoods to exchange sex for shelter, food, and protection. The risk of sexual abuse, including of young girls (and boys) may also be increased, with lack of parental supervision playing a major role.

Through reprogramming some of its existing funding and resources for its ongoing "Humanitarian Assistance to Mobile And Vulnerable Populations" programme which targets ex-farm workers, IOM managed to respond rapidly to these new displacements resulting from Operation Murambatsvina/Restore Order. Through this approach, IOM has to date reached more than 225,000 beneficiaries affected by Operation Murambatsvina/Restore Order. Due to the increased needs of displaced persons in Zimbabwe, the IOM Harare Mission has been providing emergency assistance to all affected populations.

The project consists of four main components:

1. *To distribute non-food items to vulnerable households affected by Operation Restore Order in urban areas*
2. *To mainstream HIV Prevention within project activities*
3. *To build the capacity of NGO implementing partners*
4. *To provide institutional capacity-building to IOM Zimbabwe*

The primarily purpose of the project is as follows:

*To provide non-food requirements and HIV prevention to affected vulnerable populations through the strengthening of IOM's capacity to respond to humanitarian crises.*

The proposal provides clear results, which will be achieved during the implementation of the project, and the activities involved. In addition, a matrix was completed, highlighting the areas of intervention, indicators, results, and resources. This led to the establishment of a monitoring and evaluation framework to address the effectiveness, relevance, effect and efficiency of the project on the beneficiaries.

## 2. OBJECTIVES OF THE EVALUATION

The project document stipulated an external evaluation will be conducted after the end of project implementation. The evaluation's overall objective is:

*To evaluate IOM's overall performance and achievements and to assess IOM's strategy for delivering assistance to those affected by Operation Restore Order in selected urban areas.<sup>5</sup>*

Specifically, the evaluation will:

- Evaluate the relevance and validity of the choice of strategies and activities for achieving the project objective
- Analyse the cost-effectiveness and efficiency in addressing the project objective in reaching the intended beneficiaries
- Evaluate the project's effectiveness in achieving its objective and project purposes, particularly the distribution of non-food items to beneficiary households, the mainstreaming of HIV Prevention within project activities, the capacity-building to NGOs and implementing partners
- Analyse the effectiveness of the coordination and participatory mechanisms, in particular with the beneficiaries and the implementing partners
- Analyse the mechanisms established within the monitoring and evaluation framework, including tools developed and mechanisms for addressing efficiency, relevance, and effectiveness
- Identify the main lessons learned, failures, missed opportunities, strengths and weaknesses
- Formulate recommendations for corrective measures that may be incorporated into future programmes
- Analyse the institutional arrangements and IOM's overall management of the project;

## 3. EVALUATION METHODOLOGY

The evaluation methodology will be comprised of<sup>5</sup>:

- A documentation review: IOM Harare will be responsible for providing the necessary documentation, including activity and project reports, Implementing Partner monthly narrative reports, financial data, correspondence, specific agreements and/or sub-agreements, technical documentation reports, together with any other documentation that IOM Harare considers important for the evaluation exercise,
- A series of interviews with beneficiaries, NGOs and implementing partners, IOM Harare project managers and Chief of Mission, and other persons that IOM Harare or the evaluator deems necessary.
- Visits to the field to assess the impact on the intended beneficiaries

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<sup>5</sup> An extensive list of the Documentation, the IOM interviews, the Implementing Partners and sites will be provided to the consultant once he/she has been chosen.