



## Internal Evaluation Report

Final independent internal evaluation of the project “Recover from the COVID-19 Adverse Mobility Restrictions Induced Impacts in Madagascar (REfrAMe Madagascar)”

IOM project code: IB.0245

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## List of acronyms

DGD	Malagasy Customs Directorate ( <i>Direction Générale des Douanes Malagasy</i> )
DVSSER	Directorate of Epidemiological Surveillance and Response ( <i>Direction de la Veille Sanitaire et de la Surveillance Epidémiologique</i> )
IBM	Immigration and Border Management
IHR	International Health Regulations (2005)
IOC	Indian Ocean Commission
IOM	International Organization for Migration
MICTSL	Madagascar International Container Terminal Services Limited
MOFA	Ministry of Foreign Affairs of Japan
PAF	Border police ( <i>Police de l’Air et des Frontières</i> )
PBF	United Nations Peacebuilding Fund
PoE	Point of Entry
RTA	Rapid Technical Assessment
SOP	Standard Operating Procedures
SPAT	Port Company of Toamasina ( <i>Société du Port à Gestion Autonome de Toamasina</i> )
WHO	World Health Organization

## Executive summary

This twelve-month immigration and border management (IBM) project named "Recover from the COVID-19 Adverse Mobility Restrictions Induced Impacts in Madagascar (REfrAMe Madagascar)" funded by the Government of Japan, and implemented by the International Organization for Migration (IOM) in Madagascar aimed to enhance disease surveillance and control at the main points of entry (i.e. airports and major seaports) in line with the International Health Regulations<sup>1</sup>. ***The project's objective was to contribute to the control of COVID-19 and diseases with epidemic potential in Madagascar by improving structural capacity for disease prevention, surveillance and control at international points of entry.*** This was achieved through the procurement and instalment of essential equipment and ICT materials and strengthening human resources capacity at three priority points of entries (POEs), namely the airport of Ivato, the airport of Nosy Be and the seaport of Tamatave. The project was implemented from April 1, 2021 to March 30, 2022 in close collaboration with the Malagasy government bodies.

The final evaluation was carried out internally and independently by an IOM Monitoring & Evaluation, Reporting and Project Development Assistant. Home-based online interviews took place from March 15 to 24, 2022, just prior to the end of the project on March 31, 2022. The evaluator conducted online interviews with beneficiaries and partners based at the three targeted PoEs.

The overall purpose of this evaluation was to determine whether and how the project achieved its objectives following standard evaluation criteria: relevance, consistency, effectiveness, efficiency, impact, and sustainability of the project. In addition to the expected direct effects of the project, the evaluation also sought to assess the broader context, including potential indirect or unintended effects, relationships with other projects, cross-cutting issues, and outlook in terms of need and potential for follow-up projects and recommendations for future action.

### *Project context:*

The COVID-19 crisis, a global pandemic since March 2020, has already resulted in more than 499 million confirmed cases of COVID-19 worldwide<sup>2</sup>, including more than 64,000 cases recorded in Madagascar<sup>3</sup>, and thus has greatly affected border management as well as and the mobility of people.

In this context, it was important that public health threats such as COVID-19 could be detected and managed at the country's PoEs, which are the first line of defense against the spread of viruses within the country. In response to this evolving global pandemic of COVID-19, the International Organization for Migration's mission in Madagascar has implemented the "REfrAMe Madagascar" project.

### *Findings:*

The project was aligned with national needs, priorities and existing border management measures, and outputs delivered by the project were consistent with intended outcome and objective. The project remained relevant through its entire implementation period, and its results are still pertinent today and will have a medium-term effect. It was designed to build on and complement existing national strategies and policies, yet it is a unique OIM project in its field. Based on the evaluation, one can confidently state that the IB.0245 project was complementary to the previous projects, as it was largely concerned with measures related to COVID-19 and possibly other diseases with pandemic

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<sup>2</sup> <https://covid19.who.int> As of April, 13 2022

<sup>3</sup> <https://graphics.reuters.com/world-coronavirus-tracker-and-maps/fr/countries-and-territories/madagascar/>  
As of April, 13 2022

potential. Thus, the project demonstrated strong internal and external coherence.

The two outputs (border management and security agencies have the technical and material capacities and systems adapted to disease prevention, surveillance, and control; border management and security agencies have the skills, expertise, and human resources capacities to analyze and mitigate public health risk at points of entry (PoEs) in a coordinated and intersectoral manner) were successfully achieved through conducting border personnel trainings and material capacities and system upgrades procurement and installment.

As for efficiency issues, one may conclude that the project team showed good efficiency, demonstrating a flexible approach to the allocation of funds in the course of the project.

One can assume the potential economic impact of the implemented project: the timely diagnosis of COVID-19 cases will reduce the dynamics of diseases, which in the medium term will contribute to the ongoing opening of borders, the free movement of persons and the restoration of tourist potential, which plays a crucial role in the economy of Madagascar.

The economic impact will be followed by a social impact, which will be expressed in terms of a decrease in the number of tensions by virtue of the improved economic situation.

It is also safe to say that in the long term the effects the project produced will continue. Much will depend, however, on the spread of other diseases and their nature. **Recommendations:**



*Recommendations for IOM staff:*

- ✚ Monitor the installation and use of the equipment provided, as well as the transfer of knowledge from participants to their colleagues and print key documents for all the beneficiaries from all the national agencies (essential content of training, SOPs, procedures, etc.)
- ✚ Carry out a mix of theoretical and practical sessions – instead of separate theoretical trainings and practical simulations, as theory alone is difficult to perceive during training sessions.
- ✚ Strengthen the visibility of the project, including through increased numbers of banners and posters.
- ✚ When inviting foreign speakers during trainings to ensure their presence on-site, conduct coordination sessions between foreign speakers and national experts.
- ✚ Conduct trainings and workshops in more convenient locations - in the city limits or at workplaces.

*Recommendations for national partners:*

- ✚ Increase coordination between the agencies involved, e.g. holding coordination meetings on a regular basis, strengthen coordination of stakeholder agencies.
- ✚ Equip Tamatave seaport administrative buildings appropriately to ensure the normal functioning of the agency.
- ✚ Build passenger information sharing between the border management agencies (police, customs, etc.) and improve data management and support official document digitalization Passengers Data Analysis and border management information system.
- ✚ Conduct trainings on a permanent basis to keep staff knowledge and skills current.

*Recommendations for donor:*

-  Based on Standard Operating Procedures approved after simulations, expand the project to the remaining six of nine national airports and seaports.
-  Continue financial support to IOM programmes, notably to the implementation of Madagascar Plan on Sanitary Control in six other international POEs and for the development of an Emergency plan on international POEs.

## **1. Introduction**

This final evaluation of the “Recover from the COVID-19 Adverse Mobility Restrictions Induced Impacts in Madagascar (REfrAMe Madagascar)” project was developed internally by IOM in accordance with the Government of Japan. This independent internal evaluation was conducted by Ekaterina Samolygo, Monitoring & Evaluation, Reporting and Project Development Assistant for IOM Madagascar.

Online interviews took place during March 15-24, 2022, just prior to the end of the project on March 31, 2022. The evaluator conducted online interviews with beneficiaries and partners at the three priority and targeted PoEs, namely the international airports of Antananarivo and Nosy-Be and the seaport of Tamatave.

This report first describes the evaluation context and purpose (Section 2) and the evaluation framework and methodology (Section 3). The evaluation findings are then presented (Section 4) followed by conclusions (Section 5) and recommendations (Section 6). The annexes include the terms of reference, a list of documents reviewed, and a list of persons interviewed or consulted.

## **2. Context and purpose of the evaluation**

### ***2.1 Evaluation context***

The International Organization for Migration is the leading inter-governmental organization promoting humane and orderly migration for the benefit of all by providing services and advice to governments and migrants, with a presence in over 100 countries, and supporting 174 member states to improve migration management. In 2019, IOM provided support to 30 million persons, including 23 million persons on the move (internally displaced persons, migrants and refugees) and 7 million host community members.

In support of IOM's objectives, IOM's Immigration and Border Management (IBM) activities aim to assist governments in developing improved policies, legislation, administrative structures, operational systems and human resource base to respond more effectively to the various challenges related to migration and borders and to establish good migration governance. These activities are designed as partnerships, with the requesting government and other relevant stakeholders working closely with IOM to identify needs, determine priority areas and shape and implement interventions. As the realities on the ground and the objectives of governments and other migration management actors change over time, both in nature and in priority, IOM's activities are constantly evolving to respond to new migration challenges at the national, regional and international levels.

The COVID-19 pandemic that has been raging around the world since March 2020 has strongly affected border management. Indeed, the restrictive measures taken by state authorities as part of the response to the COVID-19 pandemic, including the closure of borders, has had an impact on the mobility of people. While the gradual opening of land borders was envisaged in the context of a resurgence of COVID-19 cases with the appearance of the Delta variant in May 2021 and more precisely in July 2021 in many countries, it seemed appropriate to reflect on border management strategies.

The COVID-19 crisis, a global pandemic since March 2020, has already resulted in more than 499 million confirmed cases of the virus and just over 6 million deaths worldwide and has greatly affected border management as well as and the mobility of people. Beyond its immense human toll, the virus has also triggered an unprecedented economic and social crisis, particularly affecting developing countries. With more than 64,000 cases recorded in the 22 regions of the country, Madagascar is also strongly

affected by the pandemic. The COVID-19 virus and the legitimate measures taken to contain it and save lives - including the closure of the country's borders - have deeply affected key sectors of the island's economy.

As international transport, travel and trade are essential to Madagascar's economic development, the reopening of international borders would be a necessity, but also presented a risk of new outbreaks of COVID-19, particularly through "imported" cases. In this context, it was important that public health threats such as COVID-19 could be detected and managed at the country's points of entry (PoEs), which are the first line of defense against the spread of viruses within the country.

In response to this evolving global pandemic of COVID-19, the International Organization for Migration's mission in Madagascar has implemented the “REfrAME Madagascar” project. The project supported the partner entities with ICT and medical equipment as well as with the development of border personnel skills. Indeed, the three busiest entry points of the country, namely the international airports of Ivato and Nosy Be as well as the seaport of Tamatave have been supported following a rapid technical assessment of their technical capacities in terms of management of diseases with epidemic potential.



This project aimed to enhance disease surveillance and control at the main points of entry (i.e. airports and major seaports) in line with the International Health Regulations (2005) (IHR). The project's objective was to **contribute to the control of COVID-19 and diseases with epidemic potential in Madagascar by improving structural capacity for disease prevention, surveillance and control at international points of entry**. To contribute to that objective, the intended outcome of this project was that leading border management and security agencies, notably the Border Police (*Police de l'Air et des Frontières, PAF*), the Malagasy Customs Directorate (*Direction Générale des Douanes Malagasy, DGD*), the Directorate of Epidemiological Surveillance and Response (*Direction de la Veille Sanitaire et de la Surveillance Epidémiologique, DVSSER*), would implement transparent, fair, and efficient health controls at key PoEs of the country in the context of COVID-19 mobility restrictions and disease control.

To that end, the project had two intended outputs focused on enhancing the technical and material, as well as skills, expertise, and human resources capacities:

- Border management and security agencies, notably the Border Police (*Police de l'Air et des Frontières, PAF*), the Malagasy Customs Directorate (*Direction Générale des Douanes Malagasy, DGD*), the Directorate of Epidemiological Surveillance and Response (*Direction de la Veille Sanitaire et de la Surveillance Epidémiologique, DVSSER*), have the technical and material capacities and systems adapted to disease prevention, surveillance, and control (Output 1);
- Border management and security agencies, notably the Border Police (*Police de l'Air et des Frontières, PAF*), the Malagasy Customs Directorate (*Direction Générale des Douanes Malagasy, DGD*), the Directorate of Epidemiological Surveillance and Response (*Direction de la Veille Sanitaire et de la Surveillance Epidémiologique, DVSSER*), have the skills, expertise, and



human resources capacities to analyze and mitigate public health risk at PoEs in a coordinated and intersectoral manner (Output 2).

## **2.2 Evaluation purpose**

The overall objective of this evaluation was to assess whether and how the project achieved its objectives following standard evaluation criteria: relevance, coherence, efficiency, effectiveness, impact, and sustainability of the project. In addition to the expected direct effects of the project, the evaluation also sought to assess the broader context, including potential indirect or unintended effects, relationships with other projects, and cross-cutting issues. IOM Madagascar commissioned the evaluation to identify what worked, what did not work, and why.

The evaluation will be used by the Mission to identify best practices and lessons learned and to help improve ongoing and future IBM projects in Madagascar and beyond. The evaluation will also benefit senior management to assess organizational effectiveness and to enhance organizational learning. IOM will share this evaluation report with the donor and project stakeholders to reinforce accountability and demonstrate the value of the project and their support.

## **2.3 Evaluation scope**

This final evaluation covers the entire 12-month implementation period. The project evaluated was also limited in terms of geographic coverage, encompassing only three of the nine national POEs, namely the international airports of Ivato and Nosy Be, as well as the seaport of Tamatave. In addition, as it is still too soon after project completion to assess the impact and sustainability of the project, the main focus of the evaluation was on the process related criteria, such as relevance, coherence, effectiveness, and efficiency.

The online interviews of the key informants were carried out one week before the close of the project, at which point most of the planned activities were on track to be completed and outputs delivered within the project implementation period (ending on 31 March 2022) at the time of the evaluation, except for border agencies senior officials' trainings due to the lack of time of the latter, as they were concerned with preparing for the opening of the borders and gave preference to conducting practical (simulation) exercises.

It was possible to conduct interviews with representatives of all interested structures, namely: the Ministry of Public Security through the Border Police (*Police de l'Air et des Frontières*, PAF), the Malagasy Customs Directorate (*Direction Générale des Douanes Malagasy*, DGD), and the Ministry of Public Health through the Directorate of Epidemiological Surveillance and Response (*Direction de la Veille Sanitaire et de la Surveillance Epidémiologique*, DVSSER), as well Civil Aviation of Madagascar (*Aviation Civile de Madagascar*, ACM) and National Gendarmerie (*Gendarmerie Nationale*, GN), representing all three points of entry.

## **2.4 Evaluation criteria**

The evaluation was conducted on the basis of the six standard criteria by the Organization for Economic Co-operation and Development (OECD) Development Assistance Committee (OECD-DAC), also endorsed by the United Nations Evaluation Group (UNEG) and IOM's Central Evaluation function guidelines.

- **Relevance:** This criterion focused on how the project aligned with the needs of border management in Madagascar and whether the project has been adapted to the current context.

- **Coherence:** This criterion focused on identifying how the intervention fitted within a range of other similar interventions implemented in the same space and how it aligns with existing relevant international and national frameworks (norms, standards, laws, policies). It also explored the specific gap(s) that the intervention addressed in relation to other similar interventions.
- **Effectiveness:** Effectiveness sought to determine the extent to which the program delivered on its promises. Under this criterion, the evaluation also examined the factors that enabled or hindered the project's effectiveness.
- **Efficiency:** It is the extent to which resources (human, financial, time, and other) were used effectively to generate results. Through this, we looked at whether the mechanisms by which the project was planned, managed, and monitored to achieve the intended results worked and whether improvements could be made to increase efficiency.
- **Impact:** Impact refers to the long-term, sustainable changes to which the project contributed. The focus was on the extent to which the project contributed to the outcomes and level of the overall project objective. This is with the understanding that a project may not produce high-level change on its own, but by producing results, it can position itself to contribute to such long-term change.
- **Sustainability:** This criterion refers primarily to the extent to which the benefits of the project will continue to be available to and appreciated by the beneficiaries after the project ends. The evaluation sought to understand what the project did to increase the prospects for sustainability and whether it worked.

### **3. Evaluation framework and methodology**

#### ***3.1 Data sources and collection***

The data collection for the evaluation involved desk research and interviews and on-site observations during the field visit:

**(a) Desk research:**

Review of project documents, reports and training materials (see list, Annex 7.3).

**(b) Online interviews:**

Semi-structured interviews with key stakeholders (see list, Annex 7.5).

**(c) Onsite observations**

#### ***3.2 Data analysis***

The data analysis relied primarily on qualitative analysis of data collected through project documents and notes taken during semi-structured interviews. In the evaluation process, the data from the desk review and online interviews with key informants were analyzed on a thematic basis. Each evaluation criterion was treated as a thematic category. Because the amount of data collected was relatively small, the entire data analysis process was conducted manually.

In determining the overall performance rating for each criterion presented in the report, the rating scale presented below was used. It should be noted that this rating is largely based on the subjective

judgment of the evaluator after interacting with the available data and summarizing it.

Rating Scale and Criteria:

- **Excellent:** there is evidence of significant contribution and/or contribution above the level expected of the intervention.
- **Very good:** there is evidence of good contribution, but some areas for improvement remain.
- **Good:** there is evidence of satisfactory contribution, but further improvement is needed.
- **Poor:** there is evidence of some contribution, but significant improvement is needed.
- **Very poor:** little or no contribution.

Stakeholder responses were categorized so that a pattern could be established. The categories were further analyzed to answer the research questions.

Throughout the process, the data were tested for validity through the researcher's careful thinking about cause and effect and the use of multiple sources of data, such as interviews and project documents review when examining the question, to determine if the same conclusions would be reached using different methods.

The evaluator endeavored to ensure that the assessments were objective and balanced, the assertions accurate and verifiable, and the recommendations realistic, and to follow IOM data protection principles, UNEG norms and standards, and relevant ethical guidelines.

### **3.3 Limitations and mitigation strategies**

One of the limitations was the virtual format of the semi-structured interviews, which made it impossible to see in person how the equipment and protective equipment were used in practice.

Another complicating circumstance was the lack of time and the heavy workload of border personnel, which made it impossible to interview all the participants involved. This does not mean, however, that information from all agencies and all locations was not collected.

The project evaluated was limited in terms of geographic coverage, encompassing only three of the nine national POEs. At the same time, the results obtained in this project can be further scaled nationwide. Another serious obstacle was the absence of international flights to Nosy Be, which means that the beneficiary staff was only able to study the issue in theory and did not have time to put the skills into practice.

The questions under impact and sustainability were difficult to answer given the timing of assessing those only at the end of implementation, and questions under cross-cutting issues were difficult to fully assess given the limited time available to cover relevant questions in the short interviews.

## **4. Findings**

### **4.1 Relevance**

<b>Project Score on Relevance:</b>	<b>Excellent</b>	<b>Key:</b>	Very Poor	Poor	Good	Very Good	Excellent
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The project was comprehensive in nature and addressed all responsible entities - not only health care workers, but also representatives from all airport agencies. The activities allowed participants to

expand their knowledge, share experiences and build a system of communication that will help effectively handle passengers in the future.

Being a unique project in its field, it was consistent with and responsive to national needs and priorities and existing border management measures. Moreover, the project was aimed at reducing the impact of the pandemic and countering the spread of COVID-19, so it is safe to say that it was fully adapted to the context. At the same time, this was partly a limitation, since the training was not related to normal routines and only addressed issues related to the pandemic. However, participants noted that they already had the knowledge and skills to perform routine tasks and they needed to gain skills related to countering the spread of the pandemic.

Through close coordination with the Ministry of Public Security, the Malagasy Customs Directorate, and the Ministry of Public Health, IOM developed this project in line with needs (technical) assessments conducted by the former IOM Chief of Mission in Madagascar before the start of the project. The project focused on contributing to control of COVID-19 and diseases of epidemic potential in Madagascar by upgrading the structural capacities of prevention, surveillance, and control of the disease at international points of entry.

To contribute to the initial goal, the Japan-funded project under evaluation focused on ensuring that leading border management and security agencies, notably the Border Police (*Police de l'Air et des Frontieres, PAF*), the Malagasy Customs Directorate (*Direction Générale des Douanes Malagasy, DGD*), the Directorate of Epidemiological Surveillance and Response (*Direction de la Veille Sanitaire et de la Surveillance Epidémiologique, DVSSER*), implement transparent, fair, and efficient health controls at key PoEs of the country in the COVID-19 context of mobility restrictions and disease control (Outcome) through trainings for border management staff and equipment procurement.

Throughout project implementation, IOM project team maintained close coordination with stakeholders to ensure that the equipment supplied was relevant, provided where it was most needed, of high quality, and met the required technical specifications.

In summary from interviews:

- ✚ **100% (n=16)** of key informants representing 10 different entities agreed that the trainings and provision of equipment were **relevant and necessary**. No interventions were identified as irrelevant or of lower priority.
- ✚ National partners and direct beneficiaries gave **a high score to relevance**, indicating that the needs the project focused on were cross-cutting.
- ✚ IOM's work in supplying equipment is viewed by stakeholders as possessing **the highest relevance**.
- ✚ This was unanimous across both national partners and agencies staff that all **participants were correctly identified**. They have pointed out that all entities of the airport were involved, and the **gender aspect** was respected.
- ✚ Although the equipment provided has been extremely useful, its **quantity remains inadequate**, for this very reason the **continuation of this project is highly desirable**. This also applies to the trainings provided. All participants noted trainings **relevance and excellent content**, but only part of the staff was able to undergo trainings, so it is necessary to **ensure the continuity of knowledge** within each of the agencies, as well as to conduct **updated**

**trainings** in the future (during similar projects).

✚ All participants noted that the project was **well adapted to the COVID-19 context**.

Based on the above analysis and stakeholder confirmation, **the evaluation finds this intervention to be relevant, timely, and necessary and therefore assigns it the highest relevance rating on the overall**. All project activities are assessed as having been appropriately tailored to the context. Below are some direct quotes from the interviews that illustrate the relevance of the project.

**Note:** In presenting these verbatim statements under each criterion, we conceal the actual names of the speaker for privacy purposes.

❖ *“IOM has been able to strengthen the capacity of the agencies, providing the necessary materials and developing useful procedures for health control”* **Head of the Border Health Surveillance Service, Antananarivo (DVSSER)**

❖ *“The project contributed to capacity building and health system strengthening at the border level”* **Director of Health Watch, Epidemiological Surveillance and Response, Antananarivo (DVSSER)**

❖ *“The gender aspect was well respected, there were even more women than men”* **Commander of Ivato airport, Antananarivo (Ravinala airports)**

❖ *“The training was basic, but much needed. It is necessary to continue this project and conduct updated trainings in future”* **Doctor at the DVSSER, Antananarivo**

❖ *“The project has been a great help to us. We were able to exchange knowledge with professionals in the field of immigration. Now we have prospects of partnership for the future”* **Commissioner of the Special Police Station of the Seaport of Tamatave (PAF)**

❖ *“We have received support that will allow us to be better prepared for the opening of flights”* **PAF Officer, Nosy-Be (PAF)**

❖ *“As part of the project, we gained a lot of contacts, which will improve communication between airport services”* **Customs Controller, Antananarivo (DGD)**

## 4.2 Coherence

<b>Project Score on Relevance:</b>	<b>Excellent</b>	<b>Key:</b>	<b>Very Poor</b>	<b>Poor</b>	<b>Good</b>	<b>Very Good</b>	<b>Excellent</b>
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It is safe to say that this is the first project of its kind related to strengthening sanitary border controls in Madagascar. At the same time, there are other organizations that conduct partially similar programs in connected areas. World Health Organization (WHO) also supplies equipment (but only for health workers) and conducts capacity building trainings on a periodic basis.

In a broader perspective, one can mention other projects aimed at strengthening general POE management, such as:

- **“Consolidating and Accelerating Peace Gains in Madagascar during the COVID-19 Crisis” (CAP-Madagascar):** in general, the project addressed the issues of security, governance, and protection of the vulnerable persons, related to the health crisis in Madagascar. In particular, the project addressed the security issues of internal mobility, e.g., during the project implementation checkpoints were set up on the roads;
- **IB.0152 “Response to emerging criminal activities and other maritime threats in Madagascar**

("**REAcT Madagascar**")" which implied setting up the first canine brigade in Madagascar to contribute to the fight against drug trafficking, currency and natural resources transiting through the national borders (March 2020 - March 2021);

- **IB.0132:** this regional project aimed to contribute to building the capacity of governments to better understand and respond to the risks and threats posed by migration-related transnational organized maritime crime in the region, including the smuggling of migrants. This was achieved, among other things, by producing a feasibility study on the establishment of a specialized and secure network and database for the exchange of information and intelligence related to migration in the context of maritime security, producing a report on the analysis of cross-border migration flows and routes and characterizing trends in the regional maritime context, as well as organizing a regional workshop on the main findings, aimed at strengthening shared practices and experiences on migration in the context of maritime security in the region;
- Finally, under the **ARSSAM project (TC.0950)**, completed in February 2019, the installation of equipment as well as on-site trainings relating to the Border Management Information System MIDAS (Migration Information and Data Analysis System) were set up at the Nosy Be and Mahajunga airports, to improve the technical capacities to collect and treat information in order to ensure that borders are secure, while facilitating and streamlining the legitimate flow of people and goods to and from the country<sup>4</sup>.

Based on these findings, one can confidently state that the IB.0245 project was complementary to the previous projects, as it was largely concerned with measures related to COVID-19 and possibly other diseases with pandemic potential.

Representatives of the Directorate of Epidemiological Surveillance and Response pointed out that the objectives of this project are very much in line with those of the other partners. However, it is worth clarifying here the distinction between the activities carried out. WHO provide health equipment, working only with health workers, and their trainings are more technical in nature. IOM provided more ICT materials and worked with all stakeholders represented at the points of entry.

In summary from interviews:

- ✚ **100% (n=16)** of key informants representing 10 different entities are of the view that IOM activities were **well aligned with national, regional or international norms and standards**.
- ✚ IOM is viewed by stakeholders as the guide that ensured stakeholders' border management measures **meet international standards**, namely the **International Health Regulations (2005)**, and benefits from best practices from elsewhere.
- ✚ **100% (n=16)** of key stakeholders indicate that it is a **unique project** in the field of border management.
- ✚ International Health Regulations (2005) are referenced in key documents produced by the project and during trainings conducted by IOM and national partners.

Below are some direct quotes from the interviews that illustrate the coherence of the project.

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<sup>4</sup> IOM Madagascar Annual Report 2019:

[https://reliefweb.int/sites/reliefweb.int/files/resources/iom\\_madagascar\\_annual\\_report\\_2019.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/iom_madagascar_annual_report_2019.pdf)

**Note:** In presenting these verbatim statements under each criterion, we conceal the actual names of the speaker for privacy purposes.

❖ *“This project was in many ways complementary to previous activities of other organizations. Obviously, the need for equipment supplies cannot be covered by a single partner alone”* **Head of the Border Health Surveillance Service, Antananarivo (DVSSER)**

❖ *“The project was the most tailored to the COVID-19 environment and was unique in the area of border management”* **Commander of the airport of Nosy Be, Nosy Be (Ravinala airports)**

The trainings conducted were based entirely on International Health Regulations (2005). IOM actively encouraged broad stakeholder participation. Some interviewees noted the special role that IOM played in fostering direct communication between all stakeholders, as well as external partners implementing similar projects<sup>5</sup>. In short, none of the project activities contradicted what the government and non-state actors were doing. It can therefore be concluded that the project demonstrated **strong internal and external coherence**.

### 4.3 Effectiveness



The activities carried out contributed to better coordination and communication between the border management agencies in relation to passenger flows. The training sessions contributed to a better understanding of current national SOP guidelines by the agencies’ personnel. As part of trainings, travelers’ patterns at points of entry were reviewed and management of suspected cases was addressed. During the training sessions, participants examined the regulatory framework for border health management, based on the International Health Regulations (2005), and acquired the skills necessary to ensure the implementation of health security measures at border controls. The trainings provided increased personnel’s knowledge about COVID-19 and ways to counter the spread of the pandemic.

It should also be noted that, due to time constraints, the originally planned senior officials’ trainings were not conducted, however, this allowed to pay more attention to staff training (simulation exercises). In addition to that, the participants noted the undoubted benefit of the equipment provided.

Table 1. Results Matrix of the Project Evaluated

	Indicator	Data Source and Collection Method	Target	Result	Assumptions
<b>Objective: Contribute to control</b> of COVID-19 and diseases of epidemic potential in Madagascar by upgrading the structural capacities of prevention, surveillance, and control of the disease at international Points of Entry.	% of supported PoEs conducting screening and case management of suspect cases.	Final evaluation report	TBD		

<sup>5</sup> WHO, IOC

<b>Outcome 1:</b> Leading border management and security agencies, notably the Border Police ( <i>Police de l'Air et des Frontières, PAF</i> ), the Malagasy Customs Directorate ( <i>Direction Générale des Douanes Malagasy, DGD</i> ), the Directorate of Epidemiological Surveillance and Response ( <i>Direction de la Veille Sanitaire et de la Surveillance Epidémiologique, DVSSER</i> ), implement transparent, fair, and efficient health controls at key PoEs of the country in the COVID-19 context of mobility restrictions and disease control	% of supported PoEs deemed fully functional/improved IHR compliance for COVID-19 after the intervention	Monitoring visits	100.00	80%	Stakeholders remain committed throughout the project implementation to enhance their existing coordination mechanisms and practices, and to adapt to adjusted operating standards
	% of frontline border officials trained on the revised SOPs that demonstrate increased capacities to coordinate and implement coordinated health controls at assisted PoEs by the end of the project implementation	Training report and monitoring visits	60.00	78%	
	Percentage of interviewed senior officials within key assisted border agencies that report improved intra- and inter-agency coordination to support implementation of health controls at PoEs of the country by the end of the project implementation	Training report and monitoring visits	65.00	N/A	
<b>Output 1.1:</b> Border management and security agencies have the technical and material capacities and systems adapted to disease prevention, surveillance, and control	Number of key PoEs assessed	Assessment report	3.00	3.00	Stakeholders avail the time and support necessary for activities to lead to be implemented effectively and to lead to the realization of outputs
	Number of key designated PoEs adequately equipped with materials and equipment and upgraded systems for disease prevention, surveillance, and control	Assessment report, Activity report	3.00	3.00	
	Number of border agencies equipped with agency-specific systems for modern diseases prevention, surveillance, and control	Activity report	3.00	3.00	
	Stakeholders avail the time and support necessary for activities to be completed effectively and per the establish timeline				
<b>Output 1.2:</b> Border management and security agencies have the skills, expertise, and human resources capacities to analyze and mitigate public health risk at PoEs in a coordinated and intersectoral manner	Number of rapid assessment of the public health measures and processes coordination amongst border agencies conducted	Assessment report	1	1	Stakeholders avail the time and support necessary for activities to lead to be implemented effectively and to lead to the realization of outputs
	Number of border agencies senior officials trained on analysing and mitigating public health risks at PoEs	Training report	30.00	32	
	Number of SoPs for mitigating public health risks at PoEs developed	SOPs	1.00	1.00	
	Number of frontline border officials and personnel trained on the developed or revised SoPs	Training report	120.00	158	
<b>Activities that lead to Output 1.2</b> 1.2.1 Conduct a rapid assessment of the public health measures and processes coordination amongst border agencies 1.2.2 Train border agencies senior officials on assessing and mitigating public health risks at PoEs 1.2.3 Develop or revise intersectoral Standard Operating Procedures (SoPs) and Plans for mitigating public health risks at PoEs					Stakeholders avail the time and support necessary for activities to be completed effectively and per the establish



The indicators presented in the results matrix clearly show the effectiveness of the project: most of the indicators have been achieved or exceeded, such as the number of participants in simulation exercises (158 participants compared to 120 initially planned), which allowed not only to increase the competence of employees, but also to conduct a comparative analysis of the skills of employees who participated in theoretical trainings and those who joined in the simulation exercises, thereby confirming the value of the trainings conducted.

At the same time, the lower percentage of supported PoEs deemed fully functional/improved IHR compliance for COVID-19 after the intervention may be explained by the absence of international flights from Nosy Be airport, a factor beyond the project team control.

Thus, the project brought no unexpected results. Everything was well organized. The interviewees noted no other blocking factors but expressed a desire **to increase the number of participants, as well as to involve regional agencies**, notably by expanding the project to other national airports and seaports. It is safe to say that even natural disasters (cyclone) and some cases of COVID-19 diagnosed among participants could not prevent the project implementation and only partially affected its timing. Border management agencies' supervisors noted that after the training, they were able to better control the role of their employees.

In addition to that, the dynamism of the IOM staff was indicated as one of the enabling factors.

Below are some direct quotes from the interviews that illustrate the effectiveness of the project.

**Note:** In presenting these verbatim statements under each criterion, we conceal the actual names of the speaker for privacy purposes.

❖ *"The improvement of the intervening entities' coordination was one of the added values of this project"* **Technical Assistant at DVSSER, Antananarivo (DVSSER)**

❖ *"The simulation exercises have strengthened the coordination of the different actors involved in border health control"* **Technical Assistant at DVSSER, Antananarivo (DVSSER)**

❖ *"The project was significant in terms of personnel skills. Passenger handling procedures have been improved"* **Head of the Border Health Surveillance Service, Antananarivo (DVSSER)**

❖ *"Coordination between IOM and the Directorate (DVSSER) was highly effective"* **Director of Health Watch, Epidemiological Surveillance and Response, Antananarivo (DVSSER)**

❖ *"We are already applying what we have learned in practice"* **Customs representative, Nosy Be (DGD)**

❖ *"Standard Operating Procedures have been improved and tailored to the context"* **Doctor at the DVSSER, Antananarivo (DVSSER)**

- ❖ *“The project fully met our expectations. The knowledge and equipment we gained allowed us to improve the performance of our agency”* **Commissioner of the Special Police Station of the Port of Tamatave (PAF)**

#### 4.4 Efficiency

**Project Score on Relevance:** Very good

**Key:**

Very Poor

Poor

Good

Very Good

Excellent

Project activities were monitored on an ongoing basis through continuous communication with partners on the correct operation of the equipment and collecting feedback, and progress was presented to partners and used as the basis for further adjustments. IOM staff reported that almost all activities included in the project documents were completed by the end of the project as initially planned, with the exception of training sessions for senior management, as the latter prioritized hands-on training (simulations) to the senior officials’ trainings due to time constraints.



Photo taken in Tamatave during a Monitoring mission, November 2021

Based on the analysis of the information received, it is recommended that the duration of such projects be increased from 12 to 18 months, which will increase the time devoted to conducting practical simulations (5 months instead of 4). The evaluation revealed that it also took more time to collect information on the needs of the beneficiaries (3 months instead of the planned 2 months) and to find a French-speaking expert capable of training senior ministry officials.

Most of the stakeholders interviewed were not involved in issues related to the budgeting of the project. One interviewee noted that she was not always aware of how funds were spent. However, it is difficult to attribute this to the omissions of IOM staff as all documents (including Donation Acceptance forms) were generated and provided to stakeholders.

Some factors that could make the project more efficient include increasing the project team, as well as meeting deadlines by all parties to the project.

In summary from interviews:

- ✚ According to stakeholders, IOM's greatest value lies in its high commitment, strong communication skills, and ability to provide quality technical assistance in a timely and professional manner.
- ✚ All stakeholders were satisfied with the pace of the project, the trainings’ content, the way they were involved, and the results attained.

Like most of the IOM projects, 63 percent of budgetary expenses were related to operational tasks, followed by 35 percent for office operations and staff salaries, as well as 7 percent overhead.

As for the burn rate, the project budget was \$272,277, at the end of the project \$215,831 had been spent, representing 79% of the budget. This 21% under expenditure is largely due to the evaluator's

cancelled trip to regional points of entry, due to the general international situation and flight cancellations, which led to the forced implementation of the evaluation in a remote mode; in addition, some expenditure items were initially budgeted in excess of what was required (more detailed information is provided below).

As for the completion of all planned activities, most of them were implemented with high quality and on time, except for the Rapid Technical Coordination Processes, as the necessary information was obtained during the Rapid Technical Assessment, and the senior officials' trainings due to the difficulties with finding a French-speaking instructor in the region and the lack of time of the senior officials.

Based on a review of the budget, it may also be concluded that more money has been spent on project staff costs than originally planned, because the initial amount of workload was underestimated. In general, one can state that it is recommended to recruit three employees, including the project coordinator and assistants, for such a project.

In general, one may conclude that the project team showed good efficiency, demonstrating a flexible approach to the allocation of funds in the course of the project.

#### 4.5 Impact

<b>Project Score on Relevance:</b>	<b>Very good</b>	<b>Key:</b>	Very Poor	Poor	Good	Very Good	Excellent
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It is safe to say that the project implemented has improved working conditions and increased the efficiency of border management employees' efforts.

One can assume the potential economic impact of the implemented project: the timely diagnosis of COVID-19 cases will reduce the dynamics of diseases, which in the medium term will contribute to the ongoing opening of borders, the free movement of persons and the restoration of tourist potential, which plays a crucial role in the economy of Madagascar.

The economic impact will be followed by a social impact, which will be expressed in terms of a decrease in the number of tensions by virtue of the improved economic situation.

In addition, the evaluation noted signs of a number of such high-level results that are discussed below.

During the course of the project, stakeholders had more opportunities to interact, coordinate, and cooperate in the area of border control management. These moments of interaction can be said to have a positive impact on strengthening long-term cooperation. Key informants noted how various project activities helped them establish useful working relationships with representatives of various border management agencies.

Below are some direct quotes from the interviews that illustrate the relevance of the project.

**Note:** In presenting these verbatim statements under each criterion, we conceal the actual names of the speaker for privacy purposes.

- ❖ *"The project contributed to capacity building and health system strengthening at the border level"*  
**DVSSER official**

- ❖ *“The project has been a great help to us. We were able to exchange knowledge with professionals in the field of immigration. Now we have prospects of partnership for the future”*  
**PAF official, Tamatave**
- ❖ *“As part of the project, we gained a lot of contacts, which will improve communication between airport services”* **Customs official, Antananarivo (DGD)**

#### 4.6 Sustainability

<b>Project Score on Relevance:</b>	Very good	<b>Key:</b>	Very Poor	Poor	Good	Very Good	Excellent
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The equipment provided under the project will have long-term benefits. It can be stated that the materials were of high quality and met the required technical specifications (to ensure that only high-quality equipment was purchased, the project team conducted a comparative analysis of technical advantages and considered applications from several contractors), and the full transfer of equipment was carried out in a timely manner.

As for knowledge retention of the staff, pre-formation and post-formation activities were carried out during the project, which made it possible to demonstrate progress in the competencies of the staff.

As for the trainings, at the end of them the participants mastered the principle and purpose of the SOPs and were able to perform the sanitary controls at the PoEs at the required level. The theoretical component will remain relevant for a long time to come, but should certainly be supplemented and tailored to current context.

At the moment, all the equipment is working in full capacity, and border management staff continue to carry out procedures in accordance with international regulations.

It is safe to say that in the long term, the effects the project produced will continue. Much will depend, however, on the spread of other diseases and their nature.

#### 4.7 Cross-cutting issues

With regard to gender aspects, the project team initially paid the necessary attention to this issue: the plan was to train about 30% of women, but it was complicated by the fact that very small number of women work for the border management agencies and this figure could not be achieved for objective reasons.

In addition, the composition of participants was determined directly by supervisors (agencies' directors and ministries' representatives), who, in turn, gave priority to relevance (taking into account how much training would be useful for each individual participant).

It is also worth noting that the project team collected gender disaggregated data (e.g., participant lists and pre/post-training questionnaires).

In terms of the evaluator's efforts to maintain gender balance, nearly half interviewees were women as part of the interview process.

Concerning environmental issues, an eco-friendly approach was used when purchasing equipment: e.g. washable protective coveralls were purchased.

In conclusion, it is also necessary to mention the issue of inclusiveness, which was taken into account during the trainings: a person with disabilities participated in the training. It is worth noting that the training venue (hotel) was properly equipped and there were no logistical difficulties.

## 5. Conclusions

The project was aligned with national needs, priorities and existing border management measures, and outputs delivered by the project were consistent with intended outcome and objective: to contribute to the control of COVID-19 and diseases with epidemic potential in Madagascar by improving structural capacity for disease prevention, surveillance and control at international points of entry. The project remained relevant through its entire implementation period, and its results are still pertinent today and will have a medium-term effect. It was designed to build on and complement existing national strategies and policies, yet it is a unique OIM project in its field.

The two outputs (border management and security agencies, notably the Border Police (*Police de l'Air et des Frontieres, PAF*), the Malagasy Customs Directorate (*Direction Générale des Douanes Malagasy, DGD*), the Directorate of Epidemiological Surveillance and Response (*Direction de la Veille Sanitaire et de la Surveillance Epidémiologique, DVSSER*), have the technical and material capacities and systems adapted to disease prevention, surveillance, and control; border management and security agencies have the skills, expertise, and human resources capacities to analyze and mitigate public health risk at points of entry (PoEs) in a coordinated and intersectoral manner) were successfully achieved through close coordination with main border management and security agencies, notably the Border Police (*Police de l'Air et des Frontieres, PAF*), the Malagasy Customs Directorate (*Direction Générale des Douanes Malagasy, DGD*), the Directorate of Epidemiological Surveillance and Response (*Direction de la Veille Sanitaire et de la Surveillance Epidémiologique, DVSSER*), accurate assessment of key PoEs and border agencies systems, as well as conducting border personnel trainings and material capacities and system upgrades procurement and installment. Planned activities were completed and outputs delivered within the project implementation period ending by the 30 March 2022 at the time of the evaluation. Besides for border agencies senior officials' trainings due to the lack of time of the latter, as they were concerned with preparing for the opening of borders and gave preference to conducting on-site simulation exercises.

The project evaluated was limited in terms of geographic coverage, encompassing only three of the nine national POEs. The project was designed to address border sanitary control issues related to the context of the COVID-19 crisis in accordance with the International Health Regulations (2005). Therefore, despite the undoubted effectiveness of the effort, the broader and longer-term impacts on border sanitation outside the context of the COVID-19 pandemic were not the focus of this project. Nevertheless, the project significantly contributed to improving the structural capacity for disease prevention, surveillance, and control at international points of entry.

The equipment provided by the IOM staff will have mid- and long-term benefits. Government partners indicated that the equipment provided was of high quality and met the required technical specifications. With respect to the trainings, the representatives of the government management agencies noted that the knowledge they had received had deepened both their professional knowledge and their general outlook, and that they would try to extend the knowledge gained within their organizations. This indicates an excellent content of the trainings and a strong interest expressed by direct beneficiaries.

In the future, representatives of the departments involved would also like to expand the trainings - both geographically and in terms of content and extend them to a wider audience. The conclusions outlined above align well with the overall conclusion that this project has successfully delivered what it promised, and no doubt left a positive legacy of useful equipment and knowledge, as well as stakeholder mobilization. The project has justified the investment made.

## 6. Recommendations

Based on the findings and conclusion, the evaluator suggests the following recommendations for the consideration of IOM staff, the government and donors:

### *Recommendations for IOM staff:*

- ✚ Monitor the installation and use of the equipment provided, as well as the transfer of knowledge from participants to their colleagues and print key documents for all the beneficiaries from all the national agencies (essential content of training, SOPs, procedures, etc.)
- ✚ Carry out a mix of theoretical and practical sessions – instead of separate theoretical trainings and practical simulations, as theory alone is difficult to perceive during training sessions.
- ✚ Strengthen the visibility of the project, including through increased numbers of banners and posters.
- ✚ When inviting foreign speakers during trainings to ensure their presence on-site, conduct coordination sessions between foreign speakers and national experts.
- ✚ Conduct trainings and workshops in more convenient locations - in the city limits or at workplaces.

### *Recommendations for national partners:*

- ✚ Increase coordination between the agencies involved, e.g. holding coordination meetings on a regular basis, strengthen coordination of stakeholder agencies.
- ✚ Equip Tamatave seaport administrative buildings appropriately to ensure the normal functioning of the agency.
- ✚ Build passenger information sharing between the border management agencies (police, customs, etc.) and improve data management and support official document digitalization Passengers Data Analysis and border management information system.
- ✚ Conduct trainings on a permanent basis to keep staff knowledge and skills current.

### *Recommendations for donor:*

- ✚ Based on Standard Operating Procedures approved after simulations, expand the project to the remaining six of nine national airports and seaports.
- ✚ Continue financial support to IOM programmes, notably to the implementation of Madagascar Plan on Sanitary Control in six other international POEs and for the development of an Emergency plan on international POEs.

## **7. Annexes**

Annex 7.1 – Evaluation terms of references

Annex 7.2 – Evaluation matrix

Annex 7.3 – List of documents reviewed

Annex 7.4 – List of data collection tools

Annex 7.5 – List of persons interviewed or consulted



## Terms of Reference

### **Consultancy to conduct the final evaluation of the project: “Recover from the COVID-19 Adverse Mobility Restrictions Induced Impacts in Madagascar (REfrAMe Madagascar)”**

**Proj ID (Gateway):** 00118935 (IRF-320)

#### **1. CONTEXT**

In response to the evolving global pandemic of COVID-19, the International Organization for Migration's mission in Madagascar has implemented the “Recover from the COVID-19 Adverse Mobility Restrictions Induced Impacts in Madagascar (REfrAMe Madagascar)”. This 12-month project was funded by the Government of Japan through the Japan Supplementary Budget of the Ministry of Foreign Affairs of Japan (MOFA) in the amount of USD 272,277.

With the objective of strengthening the control and surveillance of the COVID-19 pandemic and diseases with epidemic potential at Madagascar's air and maritime borders through the support and improvement of the structural and operational capacities of prevention, surveillance, and control of the entities in charge of border management, the project supported the partner entities with ICT and medical equipment as well as with the development of border staff and personnel' skills. Indeed, the three busiest entry points of the country, namely the international airports of Ivato and Nosy Be as well as the seaport of Tamatave have been supported following a rapid technical assessment of their technical capacities in terms of management of diseases with epidemic potential.

As agreed with the donor, the final evaluation of the project is to be conducted internally at IOM at the end of the implementation. However, the duration of this evaluation must be within the 12 months of project implementation.

#### **2. PURPOSE, SCOPE AND OBJECTIVES OF THE EVALUATION**

This final independent evaluation of the "RefrAMe" project is in accordance with the current IOM evaluation arrangements and applicable evaluation standards of the UN system.

The evaluation will cover the full duration of the “RefrAMe” project implementation period (April 2021 to March 2022).

It will address the overall performance of the project in achieving its assigned results and its capacity to produce the expected outcomes. It will cover all aspects of the project's implementation, including institutional, operational, technical and partnership aspects, and will include an analysis of the implementation context in relation to the COVID-19 health crisis.

The general objective of this final evaluation is to analyze/measure the performance of the project

and this analysis will make it possible to identify the lessons learned from its implementation and the achievements for accountability purposes vis-à-vis the various partners and for decision-making, but also with a view to building on them in future interventions.

The specific objectives of the evaluation will include the following:

- Assess the project design (development of the project matrix, vertical and horizontal logic between activities/outputs/outcomes/objectives, in accordance with the indicators);
- Analyze the achievement of the expected results, including the factors that facilitated their achievement and the main difficulties encountered;
- Analyze the implementation mechanisms (coordination and management) of the project;
- Analyze the project's ability to adapt to the country's changing social and economic, health and political context;
- Analyze the project's contribution to border health management in relation to compliance with the International Health Regulations (2005) at the points of entry;
- Assess the immediate, intermediate, and long-term impact (to the extent possible) of the project interventions;
- Assess constraints, if any, that have affected the successful implementation of the project and propose corrective actions for future programming;
- Analyze the consideration of cross-cutting issues (gender aspects, etc.) in the implementation of the project;
- Assess the synergies between the project and other IOM interventions, the consistency of the project with relevant international norms and standards, and with the interventions of other actors in the same context;
- Determine lessons learned from implementation and identify measures taken to ensure sustainability of gains.

### **3. EVALUATION CRITERIA AND KEY QUESTIONS**

Specifically, the evaluation should address but not be limited to the following questions. These questions are indicative and the evaluation should not answer all of these questions individually but rather have sections based on these questions in a clear and non-repetitive manner:

#### **BENEFICIARIES**

##### **1. Relevance**

- 1.1. Does the project design and objectives meet your needs?
- 1.2. Have all beneficiaries (stakeholders) been involved?
- 1.3. To what extent are the expected results of the project appropriate to the context?
- 1.4. Was the gender aspect respected?

##### **2. Coherence**

- 2.1. Are you aware of other similar projects? If so, how is this project different from them, what are its advantages/disadvantages compared to them?

### **3. Effectiveness**

- 3.1. Did the project results meet your expectations?
- 3.2. What factors helped or hindered the achievement of the results? From your perspective, did the project adopt mitigating measures to address these obstacles?
- 3.3. What did you lack during the project?

### **4. Impact**

- 5.1. Were there any positive consequences during and after the activities implemented? Are there any outcomes that have occurred as a result of the project?
- 5.2. Do you think the project had a positive or negative indirect impact (i.e., environmental, social, cultural, gender, and economic impact)?

### **5. Sustainability**

- 6.1. Are the conditions in place for the continuation of project outputs and outcomes after the end of the intervention (financial, institutional, legal, technical and political)?
- 6.2. Have mechanisms been put in place to ensure the sustainability of project results? Are they functional?

## **TRAINERS**

### **1. Relevance**

- 1.1. Did the project design meet the needs and priorities of the key project stakeholders? Did the expected results remain valid and useful as originally planned?
- 1.2. Were the beneficiaries correctly identified?
- 1.3. Was the gender aspect of beneficiary identification respected?

### **2. Coherence**

- 2.1. How was the project harmonized with other similar initiatives by the government or other stakeholders? To what extent was the project complementary or coordinated with other similar or complementary projects?
- 2.2. To what policies, priorities, laws or frameworks did the project contribute and how? Are the results/outputs of the project used by the government and stakeholders?

### **3. Effectiveness**

- 3.1. What is the overall performance of the REfrAMe project in achieving the expected outputs and outcomes? Have the project outcomes been achieved according to the established plans? What data are available to demonstrate these achievements?

- 3.2. Were there any obstacles, were they overcome, and how were they overcome?
- 3.3. Were the strategies and tools (including M&E) used effective in implementing the project?  
What were the most and least effective coordination instruments and mechanisms?
- 3.4. Did the project reach the intended beneficiaries? Are the target beneficiaries satisfied with the services provided? If not, why, and how can gaps be closed in the post-PBF period?
- 3.5. Were there any unexpected positive or negative effects of the expected results?

#### **4. Efficiency**

- 4.1. Were project expenditures used appropriately and/or as intended?
- 4.2. Does the evaluation of the project's results relative to the project's investment of human, financial, and time resources show value for money? Was the project implemented in the most efficient manner compared to the alternatives?
- 4.3. Were the activities implemented on time, as planned, and in a well-organized manner?
- 4.4. How well did the contribution or participation/engagement of partners work?

#### **5. Impact**

- 5.1. Were there any positive consequences during and after the activities implemented? Are there any outcomes that have occurred as a result of the project?
- 5.2. To what extent does/will the project have positive and/or negative indirect impacts? (i.e. environmental, social, cultural, gender, and economic)

#### **6. Sustainability**

- 6.1. Are the conditions in place for the continuation of project outputs and outcomes after the end of the intervention (financial, institutional, legal, technical, and political)?
- 6.2. Have the mechanisms for sustaining (empowering) the project results been put in place? Are they functional?
- 6.3. Is there evidence that the benefits generated by this project continue after external support ceases, that catalytic effects are identified and have impact or will impact the sustainability of the project?

#### **4. EVALUATION METHODOLOGY**

This evaluation will be conducted by at least one M&E officer who is external to the IOM Mission in Madagascar but affiliated with a francophone IOM Mission in the area. A more specific evaluation methodology and work plan will be presented by the identified evaluators. The evaluators will be expected to adopt a participatory and consultative approach that ensures close collaboration with the IOM Country Office, the project team, the donor Government of Japan, and the project's main stakeholders, i.e., the three government entities that are partners in the project.

The proposed methodology should be based on the conduct of various activities that will allow for the sorting of quantitative and qualitative data and provide answers to the evaluation questions, including:

- Use of the project's monitoring and evaluation system and exploitation of existing reports and documents: use of performance indicators to measure progress, particularly of actual versus expected results. Review of available progress reports. The evaluators will review all relevant sources of information and other documents that they deem useful for this evidence-based evaluation.
- Conduct individual and/or group interviews with project stakeholders:
  - IOM Country Office
  - Project team
  - Project implementing partners
  - Project beneficiaries
  - Ministries involved in the project

## 5. EXPECTED DELIVERABLES

The deliverables expected from the evaluators conducting the evaluation are:

1. An inception report containing the specific approach and methodology for the evaluation, including the analytical framework that will be used for data collection, as well as the timeline for conducting the mission. This document should contain an evaluation matrix that outlines, for each evaluation criterion, the questions and sub-questions that the evaluation will address, based on, but not limited to, the descriptions in the evaluation scope. The evaluation matrix (see table below) should specify for each question the data to be collected that will inform the question and the methods to be used to collect this information. The appendices will include the questionnaires for the interviews and focus groups. Approval of this initial report will be required to begin data collection.
2. Preliminary results and analysis feedback session;
3. Draft of the full evaluation report;
4. Finalized full evaluation report: repeats and corrects the previous report, taking into account the observations and recommendations of the reference group validation committee.

## 6. SCHEDULE OF DELIVERABLES

The deliverables are detailed below, and spread over a 3-week period between the end of March 14 and March 30, 2022. Evaluators will therefore have 12 days to complete the evaluation.

<b>Deliverables</b>	<b>Deadline (indicative)</b>
Evaluation start date	D1
Submission of the inception report containing detailed methodology and tools for conducting the evaluation; and a refined schedule for conducting the evaluation	D3
Key informant interviews at the three sites	D5
Documentary review of the project	D8
Presentation of preliminary findings and analysis to IOM Madagascar	D10

Submission of draft final report to IOM Madagascar	D10
Submission of the full, finalized report	D12

## Annex 7.2 – Evaluation matrix

Criterion	Key Evaluation Question	Sources of Data	Data Collection Tools
<b>1. Relevance</b>	Did the project design meet the needs and priorities of the key project stakeholders? Did the expected results remain valid and useful as originally planned?	Project stakeholders.	Interviews with project stakeholders.
		IOM strategy papers. Project stakeholders.	Document review. Interviews with project stakeholders.
		Project documents. Stakeholder analysis.	Document review. Interviews with project stakeholders.
	Were the beneficiaries correctly identified?	Project proposal and design documents. Project stakeholders.	Document review. Interviews with project stakeholders.
	Was the gender aspect of beneficiary identification respected?	Project documents. Stakeholder analysis.	Document review. Interviews with project stakeholders.
<b>2. Coherence</b>	Which positive/negative and intended/unintended effects are being produced by the project?	Agencies personnel Project staff	Interviews
	Does the impact come from the project activities, from external factors or from both?	Agencies personnel Project staff	Interviews

<b>2. Effectiveness:</b>	<p>What is the overall performance of the REfrAMe project in achieving the expected outputs and outcomes? Have the project outcomes been achieved according to the established plans? What data are available to demonstrate these achievements?</p> <p>Were there any obstacles, were they overcome, and how were they overcome?</p> <p>Were the strategies and tools (including M&amp;E) used effective in implementing the project? What were the most and least effective coordination instruments and mechanisms?</p> <p>Did the project reach the intended beneficiaries? Are the target beneficiaries satisfied with the services provided? If not, why, and how can gaps be closed in the post-PBF period?</p> <p>Were there any unexpected positive or negative effects of the expected results?</p>	<p>Project staff Agencies personnel</p>	<p>Interviews Document review</p>
<b>3. Efficiency:</b>	<p>Were project expenditures used appropriately and/or as intended?</p>	<p>Project staff Project documents</p>	<p>Document review Interviews</p>
	<p>Does the evaluation of the project's results relative to the project's investment of human, financial, and time resources show value for money? Was the project implemented in the most efficient manner compared to the alternatives?</p>	<p>Project staff</p>	<p>Document review Interviews</p>
	<p>Were the activities implemented on time, as planned, and in a well-organized manner?</p>	<p>Project staff</p>	<p>Interviews</p>



<b>4. Impact:</b>	Were there any positive consequences during and after the activities implemented? Are there any outcomes that have occurred as a result of the project?	Agencies personnel Project staff	Interviews
	To what extent does/will the project have positive and/or negative indirect impacts? (i.e. environmental, social, cultural, gender, and economic)	Agencies personnel Project staff	Interviews
<b>5. Sustainability:</b>	Are the conditions in place for the continuation of project outputs and outcomes after the end of the intervention (financial, institutional, legal, technical, and political)?	Agencies personnel Project staff	Interviews
	Have the mechanisms for sustaining (empowering) the project results been put in place? Are they functional?	Agencies personnel Project staff	Interviews
	Is there evidence that the benefits generated by this project continue after external support ceases, that catalytic effects are identified and have impact or will impact the sustainability of the project?	Agencies personnel Project staff	Interviews

### Annex 7.3 – List of documents reviewed

- Project Proposal
- Original project document (narrative and budget)
- OIM Donation Acceptance Forms
- Final Report of the Rapid Technical Assessment of Technical and Physical Capacities and Coordination Practices for the Prevention, Surveillance and Control of Potential Epidemics at International Points of Entry, September 2021
- Evaluation Questionnaire International Points of Entry (PoE) Assessment (Antananrivo, Nosy-Be International Airports and Tamatave Seaport)
- Training curriculum content and overview
- Training pre- and post-test questionnaire templates

### Annex 7.4 – List of data collection tools

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Tool	Description	Information Source
Project document review (desk research)	Review of main project documentation (listed in the Annex 7.3)	IOM documentation on PRIMA, including project proposal, RTA reports, communication materials, etc.
Online interviews with stakeholders	16 semi-structured interviews using an interview guide	Virtual <ul style="list-style-type: none"><li>– IOM Madagascar country office program staff</li><li>– Selected government stakeholders, trainings and simulation exercises' participants (direct beneficiaries) and border management agencies' senior staff (supervisors)</li></ul>
Onsite observations	Observation of the procedures implementation	Ivato International Airport health control procedures at borders

### Annex 7.5 – List of persons interviewed or consulted

- Bianca MANACORDA, Officer in Charge, IOM Madagascar
- Maxime SICARD, Program Coordinator, IOM Madagascar

- Brigida RALAIZARA, Project Assistant, IOM Madagascar
- Herintsoa RAKOTOMANGA, Reframe Madagascar Project Intern
- Six representatives from the Directorate of Epidemiological Surveillance and Response (DVSSER): 6 (Antananarivo)
- Four representatives of the Border Police (PAF): 1 from Antananarivo, 1 (Tamatave), 2 (Nosy-Be)
- Two representatives of the Malagasy Customs Directorate (DGD): 1 (Antananarivo), 1 (Nosy-Be)
- One representative of the Civil Aviation of Madagascar (ACM): 1 (Antananarivo)
- One representative of the National Gendarmerie (GN): 1 (Tamatave)
- One representative of the Ravinala Airports: 1 (Antananarivo), 1 (Nosy-Be)