Regional Summary Report: Horn of Africa

U.S. Department of State
Bureau of Population, Refugees, and Migration

Evaluating the Effectiveness of Regional Migration Program Models on Providing Assistance to Vulnerable Migrants
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Evaluating the Effectiveness of Regional Migration Program Models on Providing Assistance to Vulnerable Migrants

Regional Summary Report: Horn of Africa

Submitted April 11, 2017

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# Acronyms

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<th>Full Form</th>
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<tr>
<td>AVR</td>
<td>Assisted Voluntary Return</td>
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<td>AVRR</td>
<td>Assisted Voluntary Return and Reintegration</td>
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<td>CTIP</td>
<td>Counter-Trafficking in-Persons</td>
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<td>DoS</td>
<td>U.S. Department of State</td>
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<td>ET</td>
<td>Evaluation Team</td>
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<td>Focus Group Discussions</td>
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<td>HQ</td>
<td>Headquarters</td>
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<td>FY</td>
<td>Fiscal Year</td>
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<td>IGAD</td>
<td>Inter-Governmental Authority on Development</td>
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<td>ILO</td>
<td>International Labor Organization</td>
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<td>IOM</td>
<td>International Organization of Migration</td>
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<td>KIIs</td>
<td>Key Informant Interviews</td>
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<td>LGBT</td>
<td>Lesbian, Gay, Bisexual, and Transgender</td>
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<td>MCIC</td>
<td>Migration in Countries in Crisis</td>
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<td>MCOF</td>
<td>Migration in Crises Operational Framework</td>
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<td>MMTF</td>
<td>Mixed Migration Task Force</td>
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<td>MRC</td>
<td>Migration Response Center</td>
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<td>NRM</td>
<td>National Referral Mechanism</td>
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<td>PMV</td>
<td>Project Monitoring Visit</td>
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<td>PRM</td>
<td>Bureau of Population, Refugees, and Migration (US Department of State)</td>
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<td>RCPs</td>
<td>Regional Consultative Processes</td>
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<td>SGBV</td>
<td>Sexual and Gender-Based Violence</td>
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<td>Trafficking In Persons</td>
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<td>ToT</td>
<td>Training of Trainers</td>
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<td>UAMC</td>
<td>Unaccompanied Migrant Children</td>
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<td>UNHCR</td>
<td>United Nations High Commissioner for Refugees</td>
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<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<tr>
<td>UN WOMEN</td>
<td>United Nations Entity for Gender Equality and the Empowerment of Women</td>
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Acknowledgements

Numerous people helped to commission and shepherd this evaluation. These include Maria Rowan and a number of colleagues from the US Department of State Bureau of Population, Refugees, and Migration and several individuals from the International Organization for Migration’s (IOM).

Furthermore, the Evaluation Team goes well beyond the authors of these reports and includes individuals from Social Impact’s Headquarters (HQ) management team composed of Program Manager Catherine Ludwig Villada, Program Director Erica Holzaepfel, and Program Assistant Kate Seibold. In the field, invaluable support with data collection and analysis was provided by Ethiopia Tadesse in Ethiopia and by Abdiaziz Aden in Djibouti.

Lastly, the Evaluation Team would like to acknowledge the wide range of people who gave their time, thoughts, and efforts to make this evaluation a success. While such individuals are not named here in the interest of confidentiality and anonymity, they include representatives of governments, regional organizations, and international, national, and local aid and civil society organizations – as well as vulnerable migrants and voluntary returnees themselves.
Executive Summary

Background and Methodology
This evaluation focuses on the Regional Migration Program in the Horn of Africa (HoA) implemented by the International Organization for Migration (IOM) during FY 2015 and FY 2016, and funded by the US Department of State’s Bureau for Population, Refugees, and Migration (DoS/PRM).

The purpose of this evaluation is to identify the regional program model’s strengths and areas for improvement and to capture best practices, lessons learned, and actionable recommendations to inform the regional migration capacity building programming of DoS/PRM and its partners. The evaluation will be used by DoS/PRM as it determines how best to shape similar regional migration programs around the world and how to tailor monitoring and evaluation and other elements. Likewise, this evaluation will be used by implementing agencies, primarily IOM, as it refines its delivery of the Regional Migration Program in the Horn and how it approaches similar programs elsewhere in the world.

The HoA program is managed from Kenya and is being implemented in Djibouti, Ethiopia, Somaliland, Puntland, and Yemen; it has a combined FY 2015 and 2016 budget of $3,300,000. The program model includes five pillars, including capacity building, direct assistance, links to regional migration dialogues, IOM coordination with the United Nations High Commissioner for Refugees (UNHCR), and emergency migration management. While the program is intended for a primary focus on capacity building, in the Horn of Africa program the primary focus has been on direct assistance, including support to migrants via Migration Response Centers (MRCs) and the assisted voluntary return (AVR) of migrants from places such as Djibouti, Yemen, and Somaliland back to Ethiopia.

In evaluating this program, the evaluation team (ET) was asked to answer the following questions:

1. To what extent are the Regional Migration Programs effective in building government capacity to humanely manage migration and address the needs of vulnerable migrants?
   a. To what extent is IOM responsive to feedback provided by beneficiaries including government partners and migrants?
2. To what extent do the focus areas of the Regional Migration Programs indirectly or directly contribute to strategic regional responses to irregular migration and vulnerable migrants?
   a. Capacity building
   b. Direct assistance to vulnerable migrants
   c. Links to regional migration dialogues
   d. IOM-UNHCR coordination
   e. Emergency migration management

The regional evaluation in the Horn of Africa is part of a wider evaluation of DoS/PRM’s regional migration programs which has already included a desk review phase and which will involve further field work in Mesoamerica.

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1 This includes $1,500,000 for FY 2015 and $1,800,000 for FY 2016.
This evaluation of the Horn of Africa program included a combination of qualitative and quantitative data collection methods, including key informant interviews, focus group discussions, and mini-surveys. These methods were applied in the program’s management hub, Nairobi, Kenya, as well as in multiple locations in Djibouti and Ethiopia. In total, 171 people were consulted in the course of this evaluation, including 84 in interviews, 72 in focus group discussions, and 15 via short online surveys. Nearly half of the respondents were beneficiaries (mostly migrants and returnees but also beneficiaries of awareness-raising activities) while another 22% were government personnel and 21% were IOM staff members.

The evaluation also faced certain limitations. Secondary data related to project results had not been systematically collected by IOM, which demonstrated major gaps in even basic monitoring and evaluation performance. Furthermore, the ET identified problems even with IOM’s basic counting of activities and outputs which complicate an evaluation such as this. Furthermore, the evaluation most fully reflects the three locations where data was collected, and this report perhaps speaks somewhat less to the program’s performance in Somaliland, Puntland, and Yemen, where a smaller number of stakeholders were consulted via phone-based interviews and online surveys.

FINDINGS

Q1: Effectiveness of capacity building activities

Overall, capacity building has not been the most prevalent program activity but has improved government officials’ understandings of migration and the needs of vulnerable migrants. The evaluation found very divergent levels of attention to capacity building between countries. In Ethiopia, for example, 334 people were involved in trainings and workshops as opposed to only 30 in Puntland and 44 in Djibouti. Only one training or workshop had been carried out under this program in Djibouti in the past year. Capacity building activities also appear to have been conducted at the end of FY 2015 rather than consistently across the year.

Data on changes in capacity have not been gathered through relatively basic measures such as consistent pre- and post-training surveys. Furthermore, IOM has not necessarily taken logical steps to maximize the impact of its capacity building activities – in light of resource constraints – by using a training-of-trainers approach on a large scale, by building e-learning platforms, or by creating easy-to-use training materials in local languages that governments (and others) could easily integrate into their civil service and police academies or into their onboarding for new hires.

The greatest achievement with regards to capacity building involved attitudes and awareness rather than skills or capabilities. That is, this program appears, based on the ET’s interviews with officials and IOM staff, to have improved government officials’ and others’ attitudes towards migration and migrants through trainings and workshops as well as through the Regional Committee on Mixed Migration (RCMM). IOM staff members surveyed mostly felt that capacity building activities were somewhat effective (30.4%) or effective (43.5%). Smaller numbers, at 15.2%, found the capacity building activities to be very effective.

In addition, IOM perceives an improvement in the humane treatment of migrants in recent years as a result of their capacity-building and awareness-raising work with officials and members of the security services. According to one IOM staff member: “Two or three years ago, we saw a lot more instances where border authorities rounded up migrants and dropped them off at the border. Now they either don’t do this, or in a few cases they call IOM and ask
if we could lend a hand." However, there is not necessarily evidence that concretely attributes any changes in government officials’ actions to IOM’s work or this program.

In Ethiopia, the move to Community Conversations appears to offer some benefits in terms of capacity building among local communities that see high levels of outward migration. The Community Conversational model involves training Community Facilitators, selected by the Government of Ethiopia, who are then tasked with organizing events approximately every two weeks with a group of hand-selected community members. These events allow the Community Facilitators to not only raise awareness about migration, but also to plan tangible steps for reducing high-risk migration (e.g., by helping to link up potential migrants with jobs or training). The ET believes that it is particularly promising given that it helps to unleash communities’ own pre-existing capacities to, for instance, raise awareness about the risks of migration among the local population.

**Q1a: Responsiveness to feedback**

This sub-question considers whether IOM (a) solicited feedback from beneficiaries (including government officials as well as migrants/returnees) and (b) acted on this feedback where feasible and appropriate. With regards to government officials, IOM has been generally responsive to feedback. More than 90% of government respondents noted that IOM had been responsive to feedback related to program activities (e.g., the content of regional meetings and the work of MRCs), and most of the remainder noted that they had not provided meaningful levels of feedback to IOM. In the context of the RCMM, governments generally set the agenda, and IOM has been responsive to their suggestions about this forum. More broadly, IOM has established MRCs at the request of the government and in locations proposed by government officials.

IOM has been less responsive to beneficiary feedback. While the ET was informed that MRCs have been conducting satisfaction surveys of migrant beneficiaries, only a small number of such forms could be identified. They had often been maintained in a hand-written format rather than being entered into any sort of a database so that IOM could analyze trends. There was no indication that IOM had been analyzing the results of such surveys and using them to learn or to modify activities. The one exception may be the IOM Transit Center in Addis Ababa, where they had reportedly used voluntary returnee surveys in order to improve their services. IOM indicates that the quality of food at the center was improved in response to beneficiary feedback and that they were – again, in response to feedback – in the process of organizing outings for minor returnees hosted at the center.

**Q2: Contribution to a strategic regional response**

Overall, the program has not necessarily contributed to a strategic regional response by, for instance, leading to inter-governmental cooperation or the harmonization of migration policies or practices. This sentiment was repeatedly reiterated by both IOM staff, government officials, and other international migration-related actors. IOM staff also emphasized that the program’s activities remain divergent between countries in the region and that cross-border activities have been generally non-existent except where necessary to return migrants home from elsewhere in the region. This lack of a strategic regional response is not, however, unexpected. This program, particularly given its relatively small size, does not necessarily have the ability to contribute to a strategic regional response. Hence, rather than dwelling on the potential for a broader regional response, this section considers whether each of the five pillars has overall performed as intended and led to better responses and protection for
migrants at, in particular, the national levels. That is, have capacity building, direct assistance, regional migration dialogues, IOM-UNHCR coordination, and emergency migration management led to improvements across the region – even if disconnected from a broader strategic regional response?

Q2a: Capacity building

- The ET found that IOM capacity building activities under this program have not been based on any region-wide or country-level capacity needs assessment. However, IOM was able to identify capacity needs among government officials based on their regular engagement with these officials and their institutions.
- The evaluation found that trainings have generally been one-off and only in a small number of instances have built upon past trainings (i.e., by providing a graduated set of trainings to a single group of officials). Government officials commonly receive a one-off training from IOM and do not move on to more advanced topics or skills-building.
- The evaluation found that practical manuals are particularly important in building capacity. In this regard, the Community Consultation manual developed by IOM has proven particularly effective and was widely lauded by national, sub-national, and local government officials in Ethiopia. IOM has not developed other such materials for authorities.
- IOM is implementing some additional approaches towards capacity building, awareness raising, and attitude shaping. These include media trainings on migration and peer-education initiatives in which older children talk to younger children about the risks posed by migration. Like other capacity-building activities, the impact of these approaches has yet to be monitored or studied.

Q2b: Direct assistance

- Migration Response Centers (MRCs) have been established under this project in a range of locations, including Ethiopia (Metema and Mile/Semera), Djibouti (Obock), Puntland (Bosasso), Somaliland (Hargeisa), and Yemen (where they are called Migration Response Points). With regards to infrastructure and services, the MRCs are relatively bare bones. This is by design, as IOM has sought, under the direction of DoS/PRM, to ensure that migrants are able to receive basic, life-saving or life-sustaining assistance at MRCs – but not more generous levels of assistance that could be seen as facilitating onward migration. The MRCs have recently begun collecting registration data from migrants using a phone-based ‘app’ that allows IOM to aggregate data on migrants using the MRCs from across the region; this data is then turned into publicly-available reports by IOM in Nairobi.
- The ET found gaps in terms of protection and vulnerability, particularly with regards to screening of migrants. MRCs do not offer tailored services for particularly vulnerable groups of migrants such as child migrants, unaccompanied migrant children, female migrants, pregnant women, infants, or members of other vulnerable groups (e.g., victims of trafficking).
- The MRC in Metema, Ethiopia was found to be operating as a de facto detention center for the police and represents negative practices in terms of design, staff training, and IOM monitoring – which had not happened for a year and a half prior to the ET’s visit. IOM monitoring had to some extent been affected by insecurity in the area and UN security restrictions. Readers are encouraged to view the content about the Metema MRC in the full text (Box 1).
On the whole, IOM’s assisted voluntary return (AVR) strategy under this program is appropriate and effective. It eschews costly forms of reintegration assistance, which DoS/PRM believes should be provided by development actors, in order to be able to support as many people as possible with AVR assistance. The IOM-operated Transit Center in Addis Ababa is also generally functioning smoothly and provides a safe space; it accommodates adult returnees to Ethiopia for one night and unaccompanied minor returnees for a longer period of time.

This evaluation found that IOM has responded particularly effectively to individual migration crises. These include, for instance, the large-scale, voluntary return of 2,987 migrants to the Horn of Africa (HoA) from Yemen in FY 2014 and 2015. Furthermore, IOM has effectively used PRM resources to repatriate detained Ethiopian migrants from Zambia and elsewhere in southern Africa. In 2016, 21 Ethiopian migrants were voluntarily returned to Ethiopia with PRM support in 2016, and 147 more were returned in 2017.

Q2c: Links to regional migration dialogue

The ET noted that IOM had generally done a very strong job in preparing delegations to participate in the RCMM and had regularly organized follow-up meetings to see how the RCMM recommendations could be put into practice. This was particularly evident in Ethiopia and Somaliland.

The RCMM has many benefits beyond regional coordination and information-sharing which make it an important program component. The RCMM keeps the issue of migration, particularly irregular migration, and vulnerable migrants on the radar screen of government officials who might otherwise pay these issues little heed. The RCMM may have a moderating effect and reduce undesirable behaviors such as the mass deportation or incarceration of irregular migrants, according to IOM staff, though the evaluation did not necessarily identify specific examples that could be attributed back to the RCMM. The RCMM renews IOM’s contacts with government officials in the region, which means that such officials will have a personal contact at IOM when they face a migration challenge.

Q2d: IOM-UNHCR coordination

Overall, coordination and cooperation is strong. UNHCR described strong relations with IOM and an absence of competition over access to beneficiaries or resources. UNHCR, as well as UNICEF, is involved in the annual Regional Committee on Mixed Migration (RCMM) organized with support from this PRM-funded program.

IOM and UNHCR refer refugees and migrants to one another following a determination of status, and in Djibouti IOM and UNHCR jointly screen beneficiaries to determine their status. In Somaliland, IOM is also regularly referring asylum seekers to UNHCR. IOM and UNHCR noted that referrals of refugees and migrants are also strong in Yemen.

IOM and UNHCR co-chair the Mixed Migration Task Forces (MMTFs) across the region aside from Ethiopia, where no MMTF exists. Furthermore, UNICEF notes several instances of joint planning between the two agencies (though this has not necessarily resulted in large-scale programmatic collaboration at this stage).

Q2e: Emergency migration management

The emergency migration management (EMM) pillar was introduced by PRM in FY2016, which began on October 1, 2016. However, at the time of the evaluation fieldwork, in January and early February 2017, EMM activities had not yet begun. IOM is reportedly
beginning to plan for an April 2017, region-wide EMM workshop focusing on the Migration in Crises Operational Framework (MCOF) and the Migration in Countries in Crisis (MCIC) initiative. IOM staff expressed some uncertainty about the aims and benefits for the EMM pillar and noted that government officials briefed on potential future EMM activities had felt the introduction of the pillar comprised an implicit critique of their readiness to deal with migration emergencies.

Management issues

The effectiveness of this program has been undercut by management challenges. As previously noted, monitoring and evaluation – and even simple beneficiary and activity counting – is inconsistent and generally absent. IOM’s lack of monitoring of the MRC in Metema, Ethiopia led to major lapses there; IOM staff misled the ET repeatedly about the frequency of monitoring at that MRC. Staff members, where funded primarily by this program, are often being pulled into other projects and programs and do not necessarily prioritize this program given its small financial size. In another case, IOM Ethiopia indicated it was unaware that one of its two MRCs in the country had been closed by the Federal Police for a period of three months. While such issues were primarily identified in Ethiopia, the recent firing of the IOM Djibouti staff member in charge of this program – approximately one month before the ET’s field work – also suggests that broader management issues may exist elsewhere and need to be urgently assessed.

RECOMMENDATIONS

This evaluation identified a range of recommendations for improving the program during the current fiscal year and during subsequent fiscal years if continued by DoS/PRM, which has proven to be a consistent and highly flexible donor. The following are among the most important, overarching recommendations from this evaluation; in Section 5 they are accompanied by a set of more specific recommendations applicable to each of the program’s pillars.

- **Strengthen program monitoring and evaluation.** IOM should fulfill past M&E commitments and introduce far more robust approaches.

- **Prioritize capacity building within the program.** The original intent of the program to build lasting capacities among officials across the region has been largely subsumed to more pressing humanitarian needs among migrants. IOM should develop and implement a focused capacity building strategy within this program and ensure, through discussions with national governments, that officials across the region benefiting from this strategy do not experience frequent turnover.

- **Develop and gradually implement a transition/handover plan.** In line with an increased emphasis on capacity building, IOM should develop, during FY 2016-17, a detailed transition plan for this program and focus on intense capacity building efforts to make this a reality. IOM should then gradually shift responsibility for implementation to governments and/or civil society organizations in the region.

- **Develop a new funding allocation formula.** IOM should develop a formula for allocating resources to the various countries in the region. This formula should likely be developed independently by technical experts and should weigh factors such as the numbers of migrants and returnees, past numbers of project beneficiaries, and evidence of strong government support for the project.
• **Change the management arrangements.** IOM should strongly consider appointing a regional program coordinator based in Ethiopia, which would enable greater linkages between this program and field staff and regional organizations based in Addis Ababa.

• **Ensure dedicated staffing for this program.** To ensure greater management focus and accountability, IOM should either finance a smaller number of fully-dedicated staff at 100% under this program or closely monitor assignments that PRM-funded staff take on outside of this program.
1. Introduction and Background

Section Summary:
- This evaluation addressed the contribution of the regional mixed migration program to capacity building and to strategic regional responses to migration.
- More than 150 people were consulted in the course of this evaluation in person in Kenya, Djibouti, and Ethiopia as well as in person and over the phone elsewhere in the region and at the headquarters level.
- The evaluation did face limitations given that not all countries were visited and given that IOM has major gaps in routine data collection on outputs, beneficiaries, and results.

1.1. About the evaluation: rationale and guiding questions/issues

This evaluation focuses on the Regional Migration Program in the Horn of Africa (HoA) implemented by the International Organization for Migration (IOM) during FY 2015 and FY 2016. The HoA program is managed via Kenya and is being implemented in Djibouti, Ethiopia, Somaliland, Puntland, and Yemen; it has a combined FY 2015 and 2016 budget of $3,300,000.²

The purpose of this evaluation is to identify program strengths and areas for improvement and to capture best practices, lessons learned, and actionable recommendations to inform the regional migration capacity building program model of PRM and IOM. The evaluation will be used by PRM as it determines how best to shape similar regional migration programs around the world and how to tailor proposal guidance, monitoring and evaluation, and other elements. Likewise, this evaluation will be used by implementing agencies, primarily IOM, as it refines its delivery of the Regional Migration Program in the HoA region and how it approaches similar programs elsewhere in the world.

The evaluation team (ET) has responded to the following evaluation questions established by PRM in the Statement of Work (SOW).

1. To what extent are the Regional Migration Programs effective in building government capacity to humanely manage migration and address the needs of vulnerable migrants?
   a. To what extent is IOM responsive to feedback provided by beneficiaries including government partners and migrants?

2. To what extent do the focus areas of the Regional Migration Programs indirectly or directly contribute to strategic regional responses to irregular migration and vulnerable migrants?
   a. Capacity building
   b. Direct assistance to vulnerable migrants
   c. Links to regional migration dialogues
   d. IOM-UNHCR coordination
   e. Emergency migration management

² This includes $1,500,000 for FY 2015 and $1,800,000 for FY 2016.
1.2. Evaluation methodology and sample

The evaluation included a combination of qualitative and quantitative methods; this section captures a brief summary of the methods employed, which are further elaborated in Annex A. The process began with a structured literature and documentation review that enabled the ET to better understand the program in question and to engage in a degree of benchmarking (i.e., identifying good practices from the research to assess their presence in IOM’s HoA program). The subsequent, field-based portion of the evaluation included data collection in the program’s management hub, Nairobi, Kenya, as well as in multiple locations in Djibouti and Ethiopia. These countries were specifically chosen — out of the five locations in which the program operates — given the number of beneficiaries and range of activities in these two countries; security and access issues also played a role in country selection. Djibouti is home to large numbers of migrants and serves as a major transit point for migrants leaving the HoA for Yemen and the Gulf, and it serves as a significant hub for returnees. Ethiopia is the only location in the program with two Migration Response Centers (MRCs), is the source of more than 80% of all migrants from the HoA, and is home to IOM’s largest awareness-raising initiatives under this program.

The field-level data collection involved a range of methods, including the following:

- **Key-informant interviews (KIIs)** with IOM personnel, national and subnational government representatives, representatives of other relevant agencies (e.g., UNICEF and UNCHR), and donor focal points.

- **Beneficiary interviews and focus group discussions (FGDs)** were conducted with migrants, returnees, and others (e.g., those involved in awareness-raising activities) who had benefited from the program. Six FGDs were conducted in addition to nine interviews. In several instances migrants and returnees were interviewed individually, though in cases where beneficiaries had close connections with one another and had lived in proximity to one another for an extended time period (e.g., in the case of Eritrean refugees in Ethiopia), FGDs were deemed more appropriate and less disruptive to program activities.

- **Mini-surveys** were used to capture information from some stakeholders who could not necessarily be reached in person, including IOM staff members outside of the field visit locations and participants in the Regional Committee on Mixed Migration (RCMM) from across the region.

The sampling process was purposive with regards to key informants, and the evaluation team sought to interview all those individuals familiar with the program and related work on migration management. Given the relatively transient nature of the beneficiary population, an opportunistic sampling approach was adopted; that is, migrant and returnee beneficiaries were identified and consulted where they could be found and where they consented to speak with the ET. **All interviews, FGDs, and surveys were preceded by an informed consent discussion** that ensured respondents understood how their information would be used and how their identities would be safeguarded in the course of the evaluation process and in the evaluation report; respondents were given the choice not to participate in the interviews and were told they could end the interview at any time or decline to answer particular questions.

In total, 156 individuals were consulted in the course of this evaluation across six focus group discussions and more than 60 interviews (see the breakdown in Table 1). A further 15

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3 These are Djibouti, Ethiopia, Puntland, Somaliland, and Yemen.
respondents provided inputs via the mini-surveys; these included 13 IOM staff respondents out of 36 contacted and two respondents who had participated in the RCMM in 2015 and 2016.4

Table 1: Breakdown of interview and FGD respondents by type (n=156)

<table>
<thead>
<tr>
<th>Type of respondent</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>27.3%</td>
</tr>
<tr>
<td>Male</td>
<td>72.7%</td>
</tr>
<tr>
<td>National background</td>
<td>33.7%</td>
</tr>
<tr>
<td>International background</td>
<td>19.2%</td>
</tr>
<tr>
<td>Regional (incl. migrants out of own country)</td>
<td>47.1%</td>
</tr>
<tr>
<td>IOM staff</td>
<td>20.9%</td>
</tr>
<tr>
<td>National government</td>
<td>7.6%</td>
</tr>
<tr>
<td>Subnational or local government</td>
<td>14.5%</td>
</tr>
<tr>
<td>Other UN or NGO</td>
<td>7.0%</td>
</tr>
<tr>
<td>Beneficiary/migrant/returnee</td>
<td>47.1%</td>
</tr>
<tr>
<td>Donors</td>
<td>2.9%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Breakdown of beneficiary respondents</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult female</td>
<td>18.5%</td>
</tr>
<tr>
<td>Adult male</td>
<td>72.8%</td>
</tr>
<tr>
<td>Unaccompanied children</td>
<td>8.6%</td>
</tr>
</tbody>
</table>

1.3. Evaluation constraints and limitations

With regards to the programs being evaluated, it is important to acknowledge that relatively little secondary data, particularly monitoring data, had been collected by IOM. Hence, this evaluation was unable to draw upon information sources such as pre- and post-training tests/surveys of individuals participating in capacity building activities, migrant satisfaction surveys, or research/surveys to help identify the extent to which communication/awareness campaigns were effective. Such data was available in only a small number of instances covering brief time periods. Where information had been gathered from training participants, the results – few in number – were often provided to the evaluation team in the form of copies of handwritten forms that had been completed by training participants or beneficiaries; this information was not being kept in a structured manner that IOM could readily analyze and use to inform programming. These gaps in IOM’s monitoring are taken up later in this report (see Section 4.6). It is important to understand that such gaps make it difficult for the ET to bring data to bear in developing several findings for this evaluation given that key issues such as migrant or training recipient beneficiaries’ experiences can only be ascertained on a large scale by reviewing past monitoring records from the implementing agency. In the absence of basic IOM monitoring, many of the findings of this evaluation are based on somewhat broad-based perceptions from key stakeholders and from a limited sample of migrant and returnee beneficiaries.

In addition, many interviewees had relatively little awareness of the program and had a very hard time separating this particular program from IOM’s broader portfolio of migration management activities in a given country. Hence, at times it was difficult for IOM and non-IOM

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4 The RCMM mini-survey was sent to more than 30 individuals.
interviewees to clarify where they were discussing this PRM program versus IOM’s other work with migrants. The ET repeatedly sought to clarify where the PRM-funded program or other initiatives were being discussed. However, there is a chance that perceptions regarding IOM’s broader work may influence some of the information provided to the ET.

Another related constraint concerns the actual contribution of PRM/DoS funding to this program and the corresponding level of outputs in terms, most notably, of beneficiaries. IOM notes – and has reportedly informed PRM – that it cannot accurately report on the contribution of this PRM program funding to its activities in Yemen given that the relatively modest contribution of this program is co-mingled with funding from other projects worth substantially more. Beyond Yemen, IOM further noted that its beneficiary numbers are generally approximations and that they face significant internal reporting challenges (e.g., program staff provide inconsistent figures to personnel in the Regional Office from one day or week to the next).

Similar challenges surrounding beneficiary and activity reporting were identified in the course of this evaluation. The MRC in Bosasso reportedly registered 4,807 migrants in FY2015, but it did not report providing any non-food items (NFIs) or psychosocial assistance; the Bosasso MRC also reported no AVR cases and only 113 medical referrals. IOM personnel agreed that such figures do not make intuitive sense – given that such large numbers of migrants would normally require more assistance in terms of psychosocial support, NFIs, and medical referrals – and may reflect some serious internal reporting challenges. In the case of Ethiopia, AVR figures obtained by IOM staff from their internal finance system showed that, in FY 2015-16, this program had benefited 934 returnees; however, IOM’s fourth quarter report for FY 2015-16 to PRM lists exactly 900 more beneficiaries (1,834 AVR beneficiaries in Ethiopia).

Likewise, IOM personnel noted that AVR beneficiary figures, in particular, may involve double- or even triple-counting where a returnee is first assisted by IOM Yemen and then transferred to IOM Djibouti for one to two days of assistance en route to IOM Ethiopia; two IOM missions or all three country missions may count this single individual as a beneficiary of AVR activities. As a result of such factors, the Evaluation Team feels it is necessary to note that some figures cited herein – and provided to the ET (as well as to PRM) by IOM – may not necessarily be completely accurate and should be understood as such.

Furthermore, the evaluation included fieldwork in three countries – Djibouti, Ethiopia, and Kenya – and only a small number of phone/Skype-based interviews and survey responses with stakeholders in Yemen, Somaliland, and Puntland. Hence, it is difficult to fully generalize the findings across the entire region in all instances, and it is important to note that – as specified in certain sections of the report – particular findings apply most fully to Djibouti and Ethiopia.

It is also important to note that responses to mini-surveys were relatively limited. Approximately one-third of IOM staff responded to an online survey that the IOM Regional Office asked them to complete. Only two past RCMM participants (government officials) responded to a separate online survey which was circulated to them.

Lastly, responses from vulnerable migrants are relatively limited given that these groups are transient and could only be identified where encountered at MRCs in Ethiopia and Djibouti,
Despite this challenge, the Evaluation Team made all efforts to consult beneficiaries and spoke with 81 in total – far more than was envisioned at the beginning of the field work. However, these figures, of course, reflect a modest proportion of those who have been assisted under this program.

1.4. Structure of the report

This report, following this introduction, provides a very succinct overview of the HoA program in FY2015 and FY2016 in Section 2. It then turns, in Section 3, to the extent to which the program has built governmental capacity to more humanely manage migration and secondarily considering IOM’s level of responsiveness to beneficiary (i.e., government and migrant) feedback/input. Section 4 considers each of the five program pillars and the degree to which they have or have not contributed to strategic regional responses to irregular migration and vulnerable migrants. Section 5 identifies recommendations for strengthening the HoA program.

2. Brief Overview of the Horn of Africa Program

Section Summary:

- This program has addressed a wide range of activities related to capacity building, direct assistance, regional migration dialogues, inter-agency coordination, and emergency migration management with relatively modest resources.
- In the Horn of Africa, the focus of the program is on direct humanitarian assistance with capacity building being a lower priority. This focus on direct assistance, according to this evaluation, is appropriate given the challenges facing migrants in the region.

2.1. Overview

The HoA program addressed here is one of 10 regional migration programs supported by PRM and implemented by IOM. The program has been ongoing for more than seven years, and is based on a core model developed by PRM with IOM. This model includes five pillars summarized below— the final of which was added in FY 2016-17.

- **Capacity Building:** An emphasis on building the capacity of host governments to better manage international migration. Capacity-building is the most important component and the foundation for other program components.
- **Direct Assistance to Vulnerable Migrants:** This involves the provision of assistance to migrants, including but not limited to temporary shelter, non-food items (NFIs), and the assisted voluntary return of migrants.
- **Links to Regional Migration Dialogues:** Where regions have migration dialogues or “regional consultative processes” (RCPs), the programs attempt to link to and enable these.

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5 The following summary draws directly on the FY 2016 “PRM Regional Migration Program Model” document shared with the Social Impact ET.
• **IOM-UNHCR Coordination:** This program promotes coordination among these agencies in responding to mixed flows. In practical terms this involves referrals between the two organizations as well as varying degrees of joint planning. (Note: This evaluation takes a slightly broader approach to this pillar and also considers IOM-UNICEF coordination.)

• **Emergency Migration Management:** This pillar, added for FY 2016, increases government capacity to anticipate migration crises and better respond to migration flows through development of planning and response tools for humane responses to vulnerable migrants in emergencies and crisis situations.

These pillars are all intended to contribute to a broader capacity-building objective that will allow governments in the region to individually and jointly tackle regional migration issues, particularly among vulnerable migrants.

With regards to finances, the ET obtained the following budget breakdown from IOM for FY2015 (actual) and FY2016 (planned/ongoing). While this evaluation does not necessarily involve a discussion of cost effectiveness or financial accountability, the ET felt it was important to obtain such a breakdown given that IOM staff members repeatedly noted in interviews that funds for this program had been reallocated between locations/countries and activities. As the breakdown (Table 2) shows, geographically the funds are divided across the various countries. The largest spend is in Kenya, for the Regional Office and the Somalia Support Office, while Ethiopia receives more funding than other countries where assistance is being provided directly to migrants and returnees. In terms of activities, direct assistance – such as MRCs and AVR – account for more than 43% of the spending while IOM personnel and facilities account for nearly another 40%. Such figures confirm that this program is heavily geared towards direct assistance rather than components such as capacity building (5.1% of the funding) and regional meetings and processes (3.3%).

*Table 2: Budget breakdown by FY and location*

<table>
<thead>
<tr>
<th>Location</th>
<th>FY 2015-16</th>
<th>FY 2016-17</th>
<th>Total</th>
<th>% of Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>Djibouti</td>
<td>165,300</td>
<td>266,500</td>
<td>431,800</td>
<td>13.1</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>266,900</td>
<td>332,300</td>
<td>599,200</td>
<td>18.2</td>
</tr>
<tr>
<td>Kenya (Regional Office)</td>
<td>380,069</td>
<td>339,043</td>
<td>719,112</td>
<td>21.8</td>
</tr>
<tr>
<td>Puntland</td>
<td>179,400</td>
<td>227,400</td>
<td>406,800</td>
<td>12.3</td>
</tr>
<tr>
<td>Somaliland</td>
<td>179,400</td>
<td>231,400</td>
<td>410,800</td>
<td>12.4</td>
</tr>
<tr>
<td>Somalia Support Office (Nairobi)</td>
<td>21,000</td>
<td>29,400</td>
<td>50,400</td>
<td>1.5</td>
</tr>
<tr>
<td>Yemen</td>
<td>209,800</td>
<td>256,200</td>
<td>466,000</td>
<td>14.1</td>
</tr>
<tr>
<td>Institutional Overhead</td>
<td>98,131</td>
<td>117,757</td>
<td>215,888</td>
<td>6.5</td>
</tr>
<tr>
<td><strong>Sub-total by Project</strong></td>
<td><strong>1,500,000</strong></td>
<td><strong>1,800,000</strong></td>
<td><strong>3,300,000</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cost/Activity</th>
<th>FY 2015-16</th>
<th>FY 2016-17</th>
<th>Total</th>
<th>% of Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>IOM Personnel</td>
<td>436,800</td>
<td>429,000</td>
<td>865,800</td>
<td>29.2</td>
</tr>
<tr>
<td>IOM Facilities</td>
<td>142,800</td>
<td>152,230</td>
<td>295,030</td>
<td>10.0</td>
</tr>
<tr>
<td>MRC support</td>
<td>228,000</td>
<td>341,200</td>
<td>569,200</td>
<td>19.2</td>
</tr>
<tr>
<td>Direct assistance, including AVR</td>
<td>310,000</td>
<td>419,000</td>
<td>729,000</td>
<td>24.6</td>
</tr>
<tr>
<td>Awareness-raising</td>
<td>98,000</td>
<td>107,000</td>
<td>205,000</td>
<td>6.9</td>
</tr>
<tr>
<td>Capacity building trainings</td>
<td>68,000</td>
<td>83,000</td>
<td>151,000</td>
<td>5.1</td>
</tr>
<tr>
<td>Regional meetings and processes</td>
<td>34,000</td>
<td>64,413</td>
<td>98,413</td>
<td>3.3</td>
</tr>
<tr>
<td>Monitoring and evaluation</td>
<td>24,000</td>
<td>24,400</td>
<td>48,400</td>
<td>1.6</td>
</tr>
</tbody>
</table>
2.2. Selected beneficiary figures

These funds have contributed to relatively high, though varied, levels of outputs. The figures vary widely not only by year but also by location (see Table 3). The beneficiary figures from Yemen, while high, should also be viewed as approximations given that IOM Yemen is unable to determine exactly which activities and beneficiaries this PRM program supported. Other discrepancies may also reflect reporting challenges within IOM. For instance, IOM and its two MRCs in Ethiopia reported no medical referrals in FY2015 despite having informed the ET that many such referrals had occurred.

Table 3: Key activity/beneficiary numbers, by project location and year

<table>
<thead>
<tr>
<th>Location</th>
<th>Migrants provided with medical referral and assistance by MRC and IOM</th>
<th>Non-food item distribution to migrants</th>
<th>Assisted voluntary return completed by MRC and IOM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hargeisa</td>
<td>1,643</td>
<td>2,277</td>
<td>1,916</td>
</tr>
<tr>
<td>Bosasso</td>
<td>34</td>
<td>21</td>
<td>113</td>
</tr>
<tr>
<td>Djibouti</td>
<td>1,666</td>
<td>482</td>
<td>0</td>
</tr>
<tr>
<td>Yemen</td>
<td>527</td>
<td>15,446</td>
<td>7,468</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>19</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>3,889</td>
<td>18,226</td>
<td>9,497</td>
</tr>
</tbody>
</table>

2.3. Challenges and limitations

This program faces a set of challenges, all of which are well known to IOM. These include high rates of turnover among government personnel, which means that capacity building and awareness raising activities intended to draw attention to the plight of vulnerable migrants are often undone quite rapidly and must be repeated with newly installed officials. Likewise, governments in the region have major priorities and challenges beyond migration and the conditions of vulnerable migrants. Hence, government officials engaging with migration issues are often asked to do so on top of their regular duties. Furthermore, insecurity in Yemen and parts of Somalia also poses a challenge, as did protests and violence. A violent political crisis in Ethiopia started in late 2015 and reached its peak around August 2016.

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6 These categories do not necessarily capture every element of spending. Hence, the figures here do not necessarily add up to the total program budget/expenditure.

7 Some of the figures under AVR reflect double or, potentially, triple-counting. An AVR case will be counted as a beneficiary in the sending as well as in the receiving country. A single AVR case may be first counted in Yemen and then counted upon arriving in Ethiopia; if the returnee also receives assistance in Djibouti in transit – while awaiting transportation from Djibouti to Ethiopia – he or she may also be triple-counted by all three missions.
3. To what extent are the Regional Migration Programs effective in building government capacity to humanely manage migration and address the needs of vulnerable migrants?

Section Summary:

- The level of attention to capacity building has varied widely between locations in the region, with several locations seeing very sporadic attention to this issue.
- While capacity building activities have only reached a small fraction of the officials involved in managing migration, they have improved government officials’ understandings of migration and the needs of vulnerable migrants.
- Aside from training, other activities – such as Community Conversations and the RCMM – have contributed to capacities in a useful way. They have particularly influenced attitudes towards migrants, particularly towards vulnerable migrants.
- IOM has proven responsive to feedback from government officials in the region but has not necessarily gathered the necessary data to understand or respond to beneficiaries’ sentiments.

This section discusses the effectiveness of this program with regard to capacity building. It is important to note that capacity building does not only comprise trainings and workshops, but also the Regional Committee on Mixed Migration (RCMM), which builds relatively senior government officials’ capacities by exposing them to experiences from across the region. Furthermore, the Community Conversations in Ethiopia help to build capacity by training community facilitators who then take the knowledge they have gained and share it with an inclusive array of stakeholders (e.g., youth, religious leaders, elders, government officials, etc.) from their communities.

3.1. Varied levels of engagement with capacity building

The evaluation found very divergent levels of attention to capacity building between countries, which is reflected in IOM’s own figures for FY 2015-16. In Ethiopia, for instance, 334 people were involved in trainings and workshops as opposed to only 30 in Puntland and 44 in Djibouti. While smaller countries may reasonably be home to fewer activities, the ET found that over the past year, only one training or workshop had been carried out under this program in Djibouti in the past year – and this focused on raising awareness about a new trafficking-in-persons (TIP) law in the country rather than necessarily building any lasting capacities and skills among government officials. Training activities also appear to have been conducted at the end of FY 2015 rather than consistently across the year; nearly 60% of all training participants participated in capacity building activities in the final quarter of the fiscal year. Given that capacity building generally requires sustained engagement rather than one-off trainings or workshops, the absence of more consistent capacity building activities across the year – and repeatedly focusing on a core group of key change agents – is problematic.
Table 4: Training Participants, FY 2015-16

<table>
<thead>
<tr>
<th>Location</th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
<th>Total</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hargeisa</td>
<td>49</td>
<td>0</td>
<td>0</td>
<td>20</td>
<td>69</td>
<td>12.0%</td>
</tr>
<tr>
<td>Bosasso</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>30</td>
<td>30</td>
<td>5.2%</td>
</tr>
<tr>
<td>Djibouti</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>44</td>
<td>44</td>
<td>7.6%</td>
</tr>
<tr>
<td>Yemen</td>
<td>0</td>
<td>16</td>
<td>64</td>
<td>84</td>
<td>100</td>
<td>17.3%</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>0</td>
<td>105</td>
<td>64</td>
<td>165</td>
<td>334</td>
<td>57.9%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>49</td>
<td>121</td>
<td>64</td>
<td>343</td>
<td>577</td>
<td><strong>-</strong></td>
</tr>
<tr>
<td><strong>% of Total</strong></td>
<td>8.5%</td>
<td>21.0%</td>
<td>11.1%</td>
<td>59.4%</td>
<td>100.0%</td>
<td><strong>-</strong></td>
</tr>
</tbody>
</table>

3.2. Limited evidence for effectiveness – and limited reach

Data on changes in capacity have not been gathered through relatively basic measures such as consistent pre- and post-training surveys, according to IOM staff members interviewed by the ET. Furthermore, while IOM may have trained dozens or, in certain locations, hundreds of individuals (as noted in Table 4, above), these numbers pale in comparison to the number of local, subnational, and national stakeholders in government agencies and security services that are involved with managing migration, according to both IOM staff and government officials in Ethiopia and Djibouti. IOM’s contribution has been relatively modest, as have the resources available for capacity building under this program.

That said, **IOM has not necessarily taken logical steps to maximize the impact of its capacity building activities** – in light of the resource constraints – by using a training-of-trainers approach on a large scale, by building e-learning platforms, or by creating easy-to-use training materials in local languages that governments (and others) could easily integrate into their civil service and police academies or into their onboarding for new hires. The absence of such approaches is evident in program documents and was confirmed by interviews with IOM staff and government officials.

3.3. Changes in attitudes/understandings of vulnerability

The greatest achievement with regards to capacity building involved attitudes and awareness rather than skills or capabilities. That is, IOM appears, based on interviews with governmental beneficiaries in Ethiopia and Djibouti, to have achieved improvements in government officials’ and others’ attitudes towards migration and migrants through trainings and workshops as well as through the Regional Committee on Mixed Migration (RCMM). **Whereas government officials, including law enforcement, may have formerly seen irregular migrants as law-breakers or nuisances, they now approach them with greater understanding.** They understand that migrants may, in many cases, be vulnerable and in need of protection. Furthermore, some source communities for migrants now understand, as a result of this program and components like awareness raising and Community Conversations, that irregular migration, particularly among youth, may pose risks that far outweigh the potential benefits. Such attitudinal improvements were bolstered by the IOM staff survey undertaken as part of the evaluation. IOM staff members surveyed mostly felt that capacity building activities were somewhat effective (30.4%) or effective (43.5%). Smaller numbers, at 15.2%, found the capacity building activities to be very effective.
These changes in attitudes appear to have had some tangible benefits on government officials’ behaviors. For instance, IOM perceives an improvement in the humane treatment of migrants in recent years as a result of their capacity-building and awareness-raising work with officials and members of the security services. According to one IOM staff member: “Two or three years ago, we saw a lot more instances where border authorities rounded up migrants and dropped them off at the border. Now they either don’t do this, or in a few cases they call IOM and ask if we could lend a hand.” However, there is not necessarily evidence that concretely attributes any changes in government officials’ actions or decisions to IOM’s work or this program.

3.4. Community Conversations and awareness-raising as capacity building

In Ethiopia, the move from more traditional awareness raising activities, such as posters and radio spots, to Community Conversations appears to offer some benefits in terms of capacity building. The Community Conversations model involves training Community Facilitators – selected by IOM from among a community – who are then tasked with organizing events approximately every two weeks with a group of hand-selected community members that includes men and women, youth, religious leaders, elders, local government officials, and others. These events allow the Community Facilitators, who receive just three days of training on key migration concepts and issues, to not only raise awareness about migration among their communities but also to plan tangible steps for reducing high-risk migration (e.g., through further awareness raising, by reporting on smugglers, or helping to link up potential migrants with jobs or training). While the Community Conversations are not squarely within the capacity building pillar of this program, the ET believes – based on interviews with IOM staff and sub-national and local government officials – that it is particularly promising given that it has multiplier effects and given that it helps to unleash communities’ own pre-existing capacities. That is, Community Conversations most notably empower communities to develop and implement their own, locally-appropriate approaches to raising awareness about high-risk migration.

Elsewhere in the region awareness-raising activities have also contributed to capacity building with varied levels of success. In Djibouti, IOM undertakes awareness-raising concerning the dangers of irregular migration across Obock using posters, public service advertisements, and other methods. The goal of such activities is to reach migrants with information regardless of whether or not they choose to enter the MRC in Obock, where additional information is shared with migrants. These public methods also help the local Djiboutian population to understand the dangers that migrants face in order to mitigate tensions between migrants and local communities. Such awareness-raising activities build capacities, to some extent, given that they shape attitudes towards migration among a wide audience. That said, gaps were identified in this area. For instance, the benefits of awareness-raising activities among migrants in Djibouti are blunted by the fact that awareness-raising visual information materials viewed by the ET featured French messages, which the vast majority of migrants, who are Ethiopian, cannot understand. Such messages, however, were translated by IOM staff who speak Oromo, Amhara, and Tigray.

3.5. Question 1a: IOM responsiveness to feedback

This particular sub-question asks: To what extent is IOM responsive to feedback provided by beneficiaries including government partners and migrants? In addressing this question, the
ET considered whether IOM (a) solicited feedback from beneficiaries (including government officials as well as migrants/returnees) and (b) acted on this feedback where feasible and appropriate.

**With regards to government officials, IOM has been generally responsive.** More than 90% of government respondents noted that IOM had been responsive to feedback concerning program activities (e.g., the content of regional meetings or locations of MRCs), and most of the remainder noted that they had not provided meaningful levels of feedback to IOM. In the context of the RCMM, governments generally set the agenda, and IOM has been responsive to their suggestions about this forum. More broadly, IOM has established MRCs at the request of the government and in locations proposed by government officials. In the case of the Afar region of Ethiopia, IOM recently moved the MRC from Mile to Semera and re-vamped the management arrangements for the MRC – putting the regional Bureau of Labor and Social Affairs (BOLSA) in charge and establishing an intra-governmental Management Committee – as a result of feedback from officials. Across the region, from Yemen to Djibouti and beyond, IOM has also undertaken emergency responses to migrant/returnee/detainee issues under this program at the specific request of government officials. This is an area where IOM’s engagement with governments and responsiveness to feedback is strong and laudable.

**IOM has, in contrast, been less responsive to beneficiary feedback.** In fact, based on interviews with program staff from IOM, it is not clear that IOM is gathering or analyzing beneficiary feedback. While the ET was informed that MRCs have been conducting satisfaction surveys of migrant beneficiaries, only a small number of such forms could be identified. They had often been maintained in a hand-written format rather than being entered into any sort of a database so that IOM could analyze trends. For the MRC in Mile, migrant satisfaction survey results were only available for a one-month period in 2016. There was no indication that IOM had been analyzing the results of such surveys and using them to learn or to modify approaches or activities. The one exception may be the IOM Transit Center in Addis Ababa, where they had reportedly used returnee surveys in order to improve their services. IOM indicates that the quality of food at the center was improved in response to beneficiary feedback and that they were – again, in response to feedback – in the process of organizing outings for minor returnees residing at the center.

There are substantial opportunities for IOM to build on these areas both as part of day-to-day management and in terms of longer-term monitoring, evaluation, and learning – something that is taken up further in the recommendations section.
4. To what extent do the focus areas of the Regional Migration Programs indirectly or directly contribute to strategic regional responses to irregular migration and vulnerable migrants?

Section Summary:

- The program includes numerous components and reached a large number of beneficiaries with relatively modest resources.
- The direct assistance component is the most important and largest set of activities and is performing well on the whole despite some gaps – and despite major quality, protection, and monitoring gaps identified at the MRC in Metema, Ethiopia (see Box 1).
- IOM’s engagement in regional migration dialogues and IOM-UNHCR coordination are two areas where the program’s performance is particularly strong.
- IOM’s response has, however, been undercut by a lack of emphasis on monitoring, evaluation, and learning – and by significant gaps in management and oversight.

To address this question one must first explore the notion of “strategic regional responses”. If the question pertains to the alignment or harmonization of governmental approaches to migration – or the formation of a more unified and integrated regional migration management system – then the answer is largely negative. To quote one IOM staff member – who reflected the perspectives of other IOM staff members and some external stakeholders – “the only thing that’s regional about this program is the regional migration conference”. The RCMM brings together representatives of governments across the region to discuss issues, though officials note that it has not necessarily led to the harmonization of policies or approaches; nor has it led to regular communication among relevant officials in the various countries involved, according to officials in Ethiopia and Djibouti. Furthermore, cross-border activities have largely been nearly non-existent in the scope of this program, as confirmed by program documents and by IOM staff members.

This lack of a more regional approach somewhat contravenes the design of the program, which calls for a fully regional approach that leads to intergovernmental cooperation. However, the limited regional focus of this program is also a reflection of basic realities. A project of this size, in financial terms, has little potential to push governments to more genuinely cooperate on an issue that, according to experts, many governments in the region consider to be of relatively limited importance.

Hence, rather than dwelling on the potential for a broader regional response, this section considers whether each of the five pillars has overall performed as intended and led to better responses and protection for migrants at, in particular, the national levels in the Horn of Africa and Yemen. That is, have capacity building, direct assistance, regional migration dialogues, IOM-UNHCR coordination, and emergency migration management led to improvements across the region – even if disconnected from a broader strategic regional response?
4.1. Capacity building

While Section 3 of this report considered the effectiveness of the program with regards to capacity building, this section discusses a number of specific elements related to capacity building activities. However, as the topic has already been addressed quite extensively in this report, here the ET chooses to highlight a few more procedural elements.

Firstly, the ET found that IOM capacity building activities under this program have not necessarily been based on any region-wide or country-level capacity needs assessment, according to program documents and interviews with IOM staff members. Such assessments are routine – a standard practice – for any program with a major capacity building element, and their absence here is noteworthy. Yet both IOM staff members and government officials indicated that IOM had not conducted any structured capacity needs assessments, though they did reportedly hold conversations about what government officials perceived to be some key capacity needs. Despite the lack of structured assessments, at the country level, the evaluation generally finds that IOM focused on relevant capacity building needs as a result of its knowledge of the local context and institutions/officials. However, moving forward, particularly as government officials and IOM staff members turn over, relying on unstructured means of assessing capacity requirements may no longer be adequate.

Secondly, the evaluation found that trainings have generally been one-off and only in a small number of instances have reached the same individuals, according to IOM staff and government officials at the national, sub-national, and local levels in Ethiopia and Djibouti. This means that training participants are not necessarily getting an approach to capacity building where later trainings build on earlier lessons. Instead, participants are, by and large, receiving trainings on basic issues such as the meaning of migration, trafficking, vulnerability, and so on – but are not – aside from minor exceptions – acquiring more advanced skills for assessing vulnerability, providing psychosocial support, building referral networks, and the like. To echo the point above, the lack of structured capacity needs assessments also means that IOM has little way of knowing what sorts of more advanced capacity building government officials in the region may require.

Thirdly, the evaluation found that practical manuals are particularly important in building capacity. In this regard, the Community Consultation manual developed by IOM has proven particularly effective and was cited by a wide range of governmental stakeholders at the national, subnational, and local levels in Ethiopia as being a particularly useful tool. IOM has not developed other such materials for authorities in particular nations or across the region as a whole; this represents a promising area for further IOM engagement under the current phase, and potential future phases, of this program.

Lastly, IOM is exploring some relatively novel approaches towards capacity building, awareness raising, and attitude shaping. These include media trainings on migration and peer-education initiatives in which older children talk to younger children about the risks posed by migration. While such initiatives are relatively nascent and have not been subject to any meaningful data collection by IOM, they do appear to have merit. This finding is based on statements from IOM staff, on FGDs in Eritrean refugee camps in Ethiopia, and on the ET’s review of international good practices for migration management. In particular, peer education could be a useful accompaniment to Community Conversations at the school level and should perhaps be scaled up – and rigorously studied – in the future.
4.2. Direct assistance to vulnerable migrants

The direct assistance component of this program includes a number of elements: MRC services (including shelter, food, water, sanitation, and sometimes transportation), the assisted voluntary return (AVR) of migrants, and ad hoc responses to sudden migration situations. Overall, as previously stated, it is important to note that IOM has – despite a series of gaps noted below – delivered a significant amount of direct assistance under this program despite the relatively limited resources involved.

4.2.1. MRC services

MRCs have been established under this project in a range of locations, including Ethiopia (Metema and Mile/Semera), Djibouti (Obock), Puntland (Bosasso), Somaliland (Hargeisa), and Yemen (where they are referred to as Migration Response Points given their limited nature). The ET was able to visit three of these MRCs, including the two in Ethiopia and the one in Obock. Hence, much of this section must focus upon these MRCs rather than attempting to characterize the others elsewhere in the region. This caveat is particularly important given that each MRC is run in a different manner. For instance, the Metema and Semera MRCs have, until recently, primarily been run by a single civilian hired by the Ethiopian Federal Police; they assist only Ethiopian nationals. In contrast, the Obock MRC is staffed by 10 IOM personnel and, being on a vital route for both migrants and returnees, helps nationals of several countries (most of whom are Ethiopian). The Yemen MRCs (known as Migration Response Points) are also staffed by IOM personnel, though government ministries also run the MRCs in Somaliland and Puntland to varying extents.

With regards to infrastructure and services, the MRCs appear relatively bare bones. This is by design, as IOM has sought to ensure that migrants are able to receive basic, life-saving or life-sustaining assistance at MRCs – but not more generous levels of assistance that could be seen as facilitating onward migration. For the most part, MRCs including sleeping and eating quarters and, at times, sanitary facilities. The MRC in Metema has neither toilets nor other sanitary facilities on site (see Box 1). The sanitary facilities at the MRC in Semera are partly completed but are still under construction – which is understandable since the MRC was recently relocated from Mile to a newly constructed building complex in Semera. In Obock the sanitary facilities are better and have recently been upgraded; a community center (big tent with tables and benches) has been set up in Obock, and an ambulance is available for migrants.

All the MRCs provide – following an initial registration and screening process – food, water, and shelter to migrants, and they are all charged with referring individuals to health centers when they require more advanced medical care. Outside of Ethiopia, the MRCs also distribute non-food items such as hygiene materials, blankets, and bed nets, according to IOM staff. The evaluation found that these levels of support are adequate – a sentiment that was supported by more than 90% of the MRC beneficiaries interviewed by the ET in Djibouti and Ethiopia. However, the ET also found gaps in terms of protection and vulnerability (listed below).

- Screening of migrants at MRCs in Ethiopia was described as particularly limited, with little in terms of psychosocial screening, according to the MRC staff. Medical screening also appears to be limited to self-reporting of major medical issues by migrants. When large numbers of migrants arrive at MRCs in Ethiopia, MRC staff indicated that screening at
times becomes cursory and lasts only 10-15 minutes (as opposed to the 90 minutes or so intended for the process).

- MRCs did not offer tailored services for particularly vulnerable groups of migrants such as child migrants, unaccompanied migrant children, female migrants, pregnant women, infants, or members of other vulnerable groups (e.g., victims of trafficking, survivors of SGBV).
- MRCs lack child-friendly spaces and other services appropriate for minors, including recreation opportunities, psychosocial support, and the required levels of medical expertise. This was confirmed by IOM and MRC staff in Djibouti\(^8\) and Ethiopia and was confirmed by other aid agency representatives who had also visited MRCs.\(^9\)
- Referrals – beyond referrals to medical centers – are not systematic, and most referrals take place in a rather ad hoc manner, according to MRC staff interviewed by the ET. Established relationships with service providers (e.g., youth-focused NGOs, psychosocial care providers, etc.) are not in place, a finding which was also confirmed by an MRC assessment undertaken by 2016 by Altai Consulting. That said, IOM staff in Somaliland do report having a more systematic referral approach that involves UNHCR, UNICEF, and Save the Children, among others.

The potential challenges in protection and services for vulnerable migrants were partly reflected in the IOM staff survey undertaken as part of this evaluation. **While IOM staff, as expected, rated all forms of direct assistance rather positively (with the exception of psychosocial care), it is interesting to note that the lowest-rated items (i.e., the bottom-ranked five out of the 10 options presented) almost all concern women, children, and psychosocial or referral services.** The sixth to tenth-rated items are: (6) Unaccompanied children assistance and family reunification; (7) Referral to partners; (8) NFIs; (9) Assistance to pregnant girls and new-born babies; and (10) Psycho-social care.\(^{10}\) Improvements in these areas may be needed given that a between 11% and 43% of migrants in any given month at the MRCs have been children (Table 5).

\(^8\) In its response to this report IOM indicates that they have recently completed a shelter for children in the MRC in Obock. However, this was not observed or noted during the ET visit; the MRC Manager in Obock informed the ET that unaccompanied children are referred to an external child protection entity.

\(^9\) IOM notes that since the ET’s visit a shelter for children has been completed at the MRC in Obock.

\(^{10}\) The top five rated forms of direct assistance were: (1) MRC support; (2) Assistance with documentation; (3) Assisted voluntary return; (4) Health care; and (5) Transportation.
Table 5: Migrants surveyed at PRM-IOM-Supported MRCs across the region

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<tbody>
<tr>
<td>Migrants interviewed</td>
<td>357</td>
<td>793</td>
<td>933</td>
<td>1,313</td>
<td>812</td>
<td>527</td>
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<tr>
<td>Child migrants</td>
<td>153 (42.9%)</td>
<td>145 (18.3%)</td>
<td>221 (23.7%)</td>
<td>184 (14.0%)</td>
<td>90 (11.1%)</td>
<td>87 (16.5%)</td>
</tr>
<tr>
<td>Unaccompanied child migrants (and % of total migrants interviewed)</td>
<td>76 (21.3%)</td>
<td>51 (6.4%)</td>
<td>64 (6.9%)</td>
<td>86 (6.5%)</td>
<td>62 (7.6%)</td>
<td>20 (3.8%)</td>
</tr>
<tr>
<td>Unaccompanied child migrants wishing to return home</td>
<td>53%</td>
<td>55%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Potential victims of trafficking (% of migrants interviewed)</td>
<td>25.2%</td>
<td>2%</td>
<td>14%</td>
<td>16%</td>
<td>27%</td>
<td>15.2%</td>
</tr>
</tbody>
</table>

Source: Monthly reports based on the results of a smartphone-based survey; data for earlier or subsequent months was not available from IOM.

The locations of the MRCs on the whole appear to be appropriate, with some exceptions. The Obock MRC is located along a major migration route, and the Yemen MRPs are situated across major entry and exit points for migrants. In Semera (formerly Mile) in Ethiopia, the MRC is located along a major migrant route; that said, the earlier Mile location was far less suitable and less accessible for migrants. That said, the ET did identify some less positive findings related to MRC location. In particular, placing the Metema MRC only a few hundred meters from the border with Sudan meant that it was primarily used to hold people who the border authorities had captured trying to sneak into Sudan. That is, being located at a land border may lead to inappropriately close relationships with the border authorities and create reputational issues for the MRC. Furthermore, the MRCs in Bosasso and Obock also pose another challenge: migrants who have reached these seaports are, according to IOM staff and personnel from other aid agencies, far less likely to stop their journeys and accept offers of return. Hence, they may be used rather infrequently by migrants seeking to leave the Horn of Africa (particularly in places like Obock where smugglers and others have spread false rumors that the MRC will force migrants to return home). There is some merit in considering whether MRCs should not necessarily be located too close to land borders or sea ports.

The evaluation also finds that the fixed-location model of MRCs is somewhat inappropriate given that migration routes are prone to changing. While the Obock MRC is used quite a bit (though only be a small proportion of outward-bound migrants in the area), the ones in Bosasso and Metema seem to see far lesser use according to IOM program documents. By investing in fixed infrastructure, IOM is tying itself to providing assistance in a particular location, which means that beneficiary numbers may dry up if migrants take different routes, if migrants are fearful of detection in the area and decide to travel at night, or if other factors disrupt current migration channels. Furthermore, providing assistance in single locations means that IOM may be less able to access migrants in treacherous, remote areas.

Furthermore, the physical MRC premises mean that IOM and its implementing partners are locked into supporting infrastructure, staff, and security guards even during times when migration levels are limited. While some MRCs in locations like Obock will always be necessary given its very strategic location for migrants and returnees, it is not entirely clear why IOM could not instead develop a referral-based model where IOM’s main role is to (a)
advertise its services to migrants, (b) physically pick up migrants in need of assistance, (c) screen those migrants, (d) refer them to pre-arranged networks of service providers which IOM could compensate for any services they provide on a cost-recovery basis, and (e) provide a degree of monitoring to ensure that referral partners provide high-quality assistance. Such a model, which is also suggested in Altai’s recent MRC assessments, is outlined in Annex C.

Box 1: Quality, protection, and monitoring gaps at the MRC in Metema, Ethiopia

The Migration Response Center (MRC) in Metema, Ethiopia faces a series of challenges. The building is constructed of corrugated metal and is extremely hot and inhospitable for migrants. There is no bathroom, shower, or other sanitary facility on the site, which has been in use since 2014; migrants are escorted by MRC security guards to a nearby government office to use the facilities. Nor is the MRC in heavy use, benefiting just 43 migrants in 2016, according to the ET’s review of the center’s own records.11 As a result of the limited beneficiary figures, IOM has not provided additional financial support to this MRC since Phase IV (FY2013) while nonetheless reporting it as an ongoing output of this program under all subsequent phases. The Federal Police in Addis Ababa, which runs the MRC from 900 km away, under-staffed the MRC (i.e., hiring only one staff member for the MRC), hired just-graduated individuals with no experience with migrants or assistance/protection, and withheld payments for MRC needs (e.g., not building a planned bathroom).

11 IOM reports that nearly three times as many migrants were assisted at the MRC in Metema in 2016, though the ET’s close examination of MRC records at the MRC – and statements from the MRC staff – confirm the numbers reported here.
More troubling, this IOM-supported facility acts as a de facto detention facility for the police, who drop off migrants there when caught trying to cross into Sudan. Migrants only enter the facility involuntarily after being detained by the police; they are not referred there by civilian entities, nor do they voluntarily choose to enter the MRC facility to seek assistance. MRC personnel noted that migrants brought to the MRC often ask to leave right away and are informed by the police that they are not permitted to leave. The MRC staff members hired by the Federal Police also state that migrants are not permitted to leave the MRC, a perception which is shared by the nearby regional police force but which is partly contradicted by the facility’s security guards (who say migrants can leave for short periods of time to buy food, for instance). The MRC’s own staff indicated that many migrants view the location as a “prison” and that migrants are only permitted to leave if they agree to return to their home communities. The MRC’s staff further indicated that the involuntary detention at the very harsh MRC conditions for five days or more had caused a degree of psychological harm and left some migrants “disturbed”. The regional police in Metema further noted that some migrants had tried to escape – and that some had succeeded in escaping – from the MRC, further reinforcing its role as a detention facility. Migrants’ stays there cannot in any way be considered voluntary.

The ET finds that IOM has been negligent in its supervision of the MRC. Prior to the ET’s visit, IOM personnel had not visited the MRC since August 2015 – almost 18 months earlier. This information about infrequent monitoring was only provided to the ET when all copies of IOM monitoring reports were requested. IOM staff had previously and inaccurately told the team that the MRC had been monitored in the last quarter of CY2016 and that IOM sent monitoring visits there at least once a year. IOM attributes the infrequency of monitoring to protests and a State of Emergency affecting the areas near the MRC since December 2015; a State of Emergency introduced in October 2016 reportedly made UNDSS concerned about missions to the area. Other international organizations consulted by the ET had visited Metema at various points in 2016 despite the protests and instability in the area.

In explaining the situation at the Metema MRC, IOM offered several explanations and hypotheses. Firstly, they indicated that the MRC staff had been trained by IOM and had been told that migrants’ stays at the MRCs should only be voluntary. One MRC staff member received one day of training while the other received two days of training; this level of preparation is, in the ET’s view, wholly inadequate given that the MRC staff had no prior experience working on protection issues or with migrants. Secondly, IOM noted that police turnover in Metema was high and that newly-arrived police may not have understood the purpose of the MRC and the fact that migrants were only to stay there voluntarily. Third, IOM noted that they had been planning to involve a university 200+ km from Metema in monitoring and supporting the MRC since April 2016. This arrangement with the university had not materialized at the time of the ET’s visit.

4.2.2. Assisted Voluntary Return (AVR)

AVR is one of the most integral forms of direct assistance provided under this program, as it helps migrants in trying conditions to return home. Here the report is referring to more standard AVR cases rather than emergency AVR cases which are most akin to humanitarian evacuations and which are addressed below in Section 4.2.3.

On the whole, IOM’s AVR strategy under this program is appropriate and effective. It eschews costly forms of reintegration assistance in order to be able to support as many people as possible with AVR assistance. The evaluation found that this tradeoff – opting to help more beneficiaries with basic AVR packages rather than smaller numbers with AVR plus reintegration (AVRR) – is suitable despite the fact that many IOM and non-IOM interviewees regretted the lack of reintegration packages. Interviewees from government agencies and from UNHCR and UNICEF further praised IOM’s work on accommodating, transporting, and handling paperwork for AVR beneficiaries. The IOM-operated Transit Center in Addis Ababa
is also generally functioning smoothly and provides a safe space based on what the ET observed; it accommodates adult returnees to Ethiopia for one night and unaccompanied minor returnees for a period ranging from a few days to two weeks.

**There are, however, three areas for improvement in this regard.** Firstly, as previously noted, IOM has provided rather inconsistent figures on the number of AVR cases supported by this PRM-funded program; and IOM must develop systems to better track beneficiary numbers. Furthermore, IOM must find a way to avoid the double or triple-counting of AVR beneficiaries. This speaks to a broader need for IOM to create a database to systematically track AVR cases so that it is easy to simply count the number of people assisted. Secondly, the IOM Transit Center in Addis Ababa, while solid, is not necessarily a suitable environment for unaccompanied child returnees – who it was primarily established to serve – and currently lacks child-friendly spaces, sufficient recreation opportunities, closer attention to the level of psychosocial services actually being provided (see Section 4.6), and a larger premise. IOM is aware of most of these issues and has been exploring new facilities for a period of two years but may need to prioritize this process further and recalibrate its selection criteria for a new building; interviewees from IOM and the Transit Center noted that one of the main selection criteria was proximity to IOM’s offices in central Addis, where real estate is not necessarily affordable.

**Thirdly, IOM may have an opportunity to scale up some of its awareness-raising activities in order to help convince more vulnerable migrants to take up the AVR service.** In Djibouti, in particular, it was notable that only a small number of migrants had taken advantage of the AVR activities or of the MRC services more broadly. The vast majority of migrants was either committed to onward migration or had been convinced by smugglers to continue on their journeys despite the conflict in Yemen and other protection challenges they were likely to face. If IOM was able to more effectively show the benefits of AVR – and the risks of onward migration – it may be able to expand access to AVR to a larger number of vulnerable migrants (presuming resources are available).

4.2.3. **Ad hoc responses to migration emergencies**

This evaluation finds, based on interviews with IOM staff, other aid agency, personnel, and government representatives that IOM has responded particularly effectively to
individual migration crises. These include, for instance, the large-scale return of migrants to the Horn of Africa (HoA) from Yemen in recent years (see Box 2). IOM was able to mobilize quickly and scale up services, including at the MRC, to deal with this added migrant flow in a basic-but-effective manner. Furthermore, IOM has effectively used PRM resources to voluntarily repatriate detained Ethiopian migrants from Zambia and elsewhere in southern Africa. In 2016, 22 Ethiopian migrants were returned to Ethiopia with PRM support in 2016, and approximately 150 more were returned in 2017.

These sorts of ad hoc emergency responses are so critical because they deal with migrants who are exceptionally vulnerable and who have faced violence, incarceration, and other forms of hardship. Given that IOM is so effective in these sorts of responses, this is one area where PRM support should likely be maintained or scaled up. Furthermore, IOM may wish to consider specifically how it responds to these migration emergencies and how it can specifically transfer these skills to national governments in the region (beyond the Emergency Migration Management component addressed in Section 4.5 of this report).

Box 2: Successful support to returnees from Yemen

In December 2016, the Yemeni authorities began deporting Ethiopian migrants to Djibouti. Almost 400 people were loaded on boats which crossed the Gulf of Aden. Migrants were then dropped off at some 300 meters from the Djiboutian shore. An unknown number of people who were unable to swim died, while the remaining migrants were able to reach the shore in in extremely bad condition. The local population provided the first aid to those stranded migrants, providing them with food and some non-food items, while the head of the local government administration immediately contacted IOM in Obock. IOM Djibouti was immediately alerted and an emergency operation was started with the help of the IOM Regional Office based in Nairobi. The operation allowed the efficient rescue of hundreds of stranded migrants, the provision of health care in a special space set up and equipped close to the MRC in Obock with the involvement of local physicians and nurses. Once the emergency phase was over, IOM MRC in Obock continued to host 95 people and proposed to assist them in the voluntary return to Ethiopia; 75 of the 95 accepted the offer of AVR assistance.

4.3. Links to regional migration dialogues

While much of the direct assistance and capacity building activities noted above take place at the national or local levels, the main regional element of the program comprises the Regional Committee on Mixed Migration (RCMM). Per the program documents, the regional migration dialogues are measured primarily in terms of their outputs (e.g., events and publications) and the extent to which they contribute to increased awareness of migration issues among government officials in the region. In this respect, it is clear that the program has met expectations and delivered on intended outputs. In particular, the ET noted – based on interviews with government representatives and a review of meeting reports – that IOM had generally done a very strong job in preparing delegations to participate in the RCMM and had regularly organized follow-up meetings to see how the RCMM recommendations could be put into practice. This was particularly evident in Ethiopia and Somaliland.

To what extent, however, has it proven effective? Answering such a question requires a carefully calibrated set of expectations and an understanding of applicable constraints. If one considers only the harmonization of regional migration policies and practices and the implementation of recommendations coming out of the RCMM, then this pillar has not been
particularly effective. Government participants felt that while they gained useful ideas and information about issues, particularly child protection issues, at the RCMM, the forum had little if any tangible impact on their governments' policies and programs. According to one regular RCMM participant: “We go to the meeting, give reports and then go back to the office. Nothing ever changes as a result of the meeting, though it's useful for networking.” Such a sentiment was shared by several of government participants from the RCMM who were interviewed in Ethiopia and Djibouti. None could specify a tangible policy or program change that had come out of the RCMM, though IOM has suggested that the RCMM indirectly contributed to the formation of bodies such as the Anti-Tahrib Taskforce in Somaliland and the National Anti-Trafficking and Smuggling Taskforce in Ethiopia. However, given that migration management is a low priority for governments in the region – and given that forums like the RCMM are non-binding – it is understandable that the RCMM does not directly lead to changes in policies, programs, or government structures. As one government official in Ethiopia noted, the authorities’ five-year counter-trafficking efforts are not going to be heavily influenced by an annual meeting or conference. Hence, it is worth considering other less direct benefits of the RCMM beyond directly attributable changes in governmental policies or programs. There are a range of such benefits that were specified by both IOM staff and governmental RCMM participants:

- The RCMM keeps the issue of migration, particularly irregular migration, and vulnerable migrants on the radar screen of government officials who might otherwise pay these issues little heed.
- The RCMM reminds governments in the region that the international community is scrutinizing their work in relation to the treatment of migrants. Hence, it may have a moderating effect and reduce undesirable behaviors such as the mass deportation or incarceration of irregular migrants.
- The RCMM renews IOM’s contacts with government officials in the region, which means that such officials will have a personal contact at IOM when they face a migration challenge (e.g., dealing with large numbers of returnees or repatriating migrant detainees from abroad).
- The RCCM offers a venue for governments to formulate contributions and negotiations for the Global Migration Compact.

These benefits – and the previously noted impact of the RCMM on participants’ capacities and attitudes towards vulnerable migrants – make the RCMM a valuable forum, particularly given its relatively limited cost.

IOM’s broader engagement with regional processes such as the Inter-Governmental Authority on Development (IGAD) Regional Consultative Process (RCP) has been limited. IOM has remained informed of the RCP’s progress but, given that the RCP has yet to yield much in the way of tangible outcomes, has not been overly involved with it at this stage.
4.4. IOM-UNHCR coordination

Coordination is an important element of this program given that migration management does not only involve IOM but also numerous other agencies, particularly the UN Refugee Agency (UNHCR) but also the United Nations Children’s Fund (UNICEF) and other UN agencies, NGOs, and so on.

Overall, coordination and cooperation is strong, according to IOM and other UN interviewees. UNHCR described strong relations with IOM and an absence of competition over access to beneficiaries or resources in Kenya, Ethiopia, and Djibouti. UNHCR as well as UNICEF is involved in the annual Regional Committee on Mixed Migration (RCMM) organized under with support from this PRM-funded program. IOM and UNHCR refer refugees and migrants to one another following a determination of status, and in Djibouti IOM and UNHCR noted that they jointly screen beneficiaries to determine their status. In Somaliland, IOM staff indicated that they are also regularly referring asylum seekers to UNHCR. IOM and UNHCR noted that referrals of refugees and migrants are also strong in Yemen. IOM and UNHCR co-chair the Mixed Migration Task Forces (MMTFs) across the Horn of Africa aside from Ethiopia, where no MMTF exists). Furthermore, UNICEF notes several instances of joint planning between the two agencies, though this has not necessarily resulted in large-scale programmatic collaboration at this stage. The strength of this collaboration reportedly stems, most notably, from the regional program coordinator’s personal style and emphasis on networking and inter-agency cooperation.

Box 3: IOM-UNHCR collaboration in northern Ethiopia refugee settings

In northern Ethiopia, two refugee camps are located in Mai-Aini and Hitsase, a few kilometers from the border with Eritrea and around 60 km from the town of Shire. Many of the Ethiopian refugees at these camps have spent years in these locations given restrictions on leaving the camp. While UNHCR and many international organizations are providing basic services to this population under the coordination of the Ethiopian authorities, IOM is implementing two programs. One activity, not funded under the program being evaluated here, is aimed at developing various income-generating activities among young men and women that will help them to gain skills and find an Ethiopian “sponsor” to employ them outside of the camp. Another program consists of “Community Conversations” in which facilitators are selected from among the refugee population and are trained to carry out initiatives that can help other refugees to better comprehend the risks of migration (particularly northward via Sudan and towards Europe). These two activities support the work that UNHCR and others are doing within the Eritrean refugee camps and demonstrate a level of complementarity that goes beyond the normal, day-to-day coordination.

In terms of strengthening coordination, two main issues emerge. The first concerns data and the perceived need for IOM not only to make general data available on migrants – as is currently being done – but also to engage in better vulnerability profiling so that other actors can better understand the profiles of migrants and join in advocating for greater protection efforts. At present, other agencies told the ET that IOM’s very limited data collection about migrants hinders coordination and joint planning. Secondly, interviewees raised concerns that even though the mechanics of referrals were done well – with UNHCR, for instance, bringing migrants to IOM’s attention – they were frequently disappointed with IOM’s ability to support vulnerable migrants. For instance, IOM was reportedly unable to assist significant numbers of child migrants transferred from other UN agencies to IOM in Yemen given that IOM had so few resources under this program and could only respond to cases.
deemed to be the most critical. These sorts of issues do not necessarily reduce coordination, though they do make other agencies less eager to collaborate with IOM on migration issues in more comprehensive ways.

4.5. Emergency migration management

The emergency migration management (EMM) pillar was introduced by PRM in FY2016, which began on October 1, 2016. However, at the time of the evaluation fieldwork, in January and early February 2017, EMM activities had not yet begun. IOM staff indicated that they are beginning to plan for an April 2017, region-wide EMM workshop focusing on IOM’s Migration in Crises Operational Framework (MCOF) and the Migration in Countries in Crisis (MCIC) initiative. The location of this workshop had not been finalized at the time of the evaluation, though IOM indicated it was considering including personnel not only from the Horn and Yemen but also from southern Africa and parts of Asia.

While this evaluation cannot reach any conclusion about IOM's delivering of the EMM pillar, the ET feels that adding additional pillars to an already over-extended program may not be particularly beneficial. IOM is at a stage where, according to the ET’s analysis, it should consolidate its current activities and prepare to transition many of them to government partners and others; adding new activities will detract from such efforts. Furthermore, IOM staff report that, in conversations with government counterparts, officials in the region were not particularly eager to participate in the MCOF and MCIC workshop. Some reportedly felt that their participation in the event was an implicit criticism of their current level of readiness to deal with migration challenges. Other government officials felt that the EMM component implied that their country was in the midst of a crisis or emergency, which these officials found disparaging or accusatory.

That said, while the ET did not find the EMM pillar to be a particularly vital one, it is evident that IOM’s emergency migration services (i.e., its ad hoc responses to migration emergencies, discussed in Section 4.2.3) are particularly vital and deserve to be continued and scaled up. As IOM does so with PRM support, it may be able to identify “on-the-job” opportunities to strengthen local capacities for EMM among public entities and civil society organizations.

4.6. Related program management and accountability issues

This program has faced a series of program management issues that, while not directly related to the various evaluation questions, significantly influence IOM’s ability to deliver. Most notably, the program continues to forego even basic elements of monitoring and evaluation (M&E). Counting of beneficiaries and activities is something that IOM has yet to do in a consistent manner. The introduction of the smartphone-based tool for registering MRC beneficiaries is an important development in terms of counting/registering beneficiaries but does not include M&E components (i.e., data collection from beneficiaries after they have been assisted by IOM). This new app has allowed IOM to gather MRC registration data more quickly and turn it into monthly updates which are shared with approximately 100 partners across the region and which have recently been posted to ReliefWeb.

Any actual results measurement has yet to occur despite the fact that a small-scale program such as this could prove useful for piloting new approaches, studying them, and determining which to scale up or phase out. IOM has proposed collecting baseline data against which to measure program outcomes for the past three years, but these have failed to materialize.
IOM’s management is aware of these gaps, which were highlighted in a Project Monitoring Visit (PMV) from IOM headquarters in late 2016. That internal report noted that “[t]he project has struggled with developing a sound monitoring and evaluation system to cover all five countries and faced challenges in data collection and monitoring” and noted that many data-collection tools either did not exist or were not known to program staff. This evaluation found that other issues – beyond the mere absence or limited awareness of M&E tools – also existed. These include a lack of institutional commitment to and follow-through on M&E. Furthermore, this is an area where field staff involved in this program will require several days of in-person training in order to help them understand what is M&E, how to do sampling, how to use data collection instruments, how to capture data, and how to share this data with others. At present field staff often expressed a lack of understanding of basic M&E concepts, and several felt that M&E only required counting outputs and beneficiary numbers.

A small number of specific gaps in data collection are noted below:

- Beneficiary satisfaction surveys at the IOM Transit Center have only been conducted starting in recent months – using a written form and “comment box” – and IOM was only able to provide data from satisfaction surveys for 20 migrants from a single MRC. MRC survey forms for other countries had reportedly been completed, though the data from these forms was not being maintained in any form to keep track of trends; only a very small number of the raw, handwritten forms were available to the ET.
- IOM noted that in some cases pre- and post-training surveys/tests had been conducted in order to gauge their immediate impact. However, these were not available to the ET, suggesting they had not been taken particularly seriously and that data had not been inserted into even a basic spreadsheet. Follow-up monitoring to determine the impact of trainings after three or six months has never been conducted.
- As noted earlier in this report (see Section 1.3) IOM personnel noted that monitoring data and beneficiary figures are somewhat loosely derived and may not necessarily reflect IOM’s actual achievements under this program.

As these sorts of gaps suggest, it is not clear that IOM has, across the region, necessarily prioritized this program at all times given its relatively small-scale nature at the country level (e.g., with resources ranging from $165,000 to $332,000 per country per year). This has meant that some country missions have not expended project resources in a timely manner and have only begrudgingly reported activity-related data and information to the IOM Regional Office in Nairobi after constant prodding. Furthermore, staff members, even where they are primarily funded under this program, are, according to IOM staff, often tasked with dedicating much of their time and attention to other initiatives. This challenge in part stems from the IOM Regional Office’s decision to spread the program’s resources across the various locations rather than developing a funding formula that would allow more resources to go to locations with more project activities or program sites.

As a result, gaps in day-to-day management are apparent. The problems at the MRC in Metema, Ethiopia noted in Box 1 were allowed given the lack of attention to monitoring over a period of at least 18 months. Nor did IOM Ethiopia object to the Federal Police’s hiring of staff members with no or nearly no prior professional experience to staff MRCs intended to provide vital services to vulnerable migrants. Once hired, IOM provided these young and inexperienced staff members with only one to two days of training in an office
setting in Addis Ababa. IOM Ethiopia has characterized this degree of training as adequate and noted that it was, in Semera, later supplemented by trainings for local officials (in which the MRC staff participated). Despite this fact – and the strong performance of MRC staff in certain locations – this evaluation still finds that the level of IOM training for MRC staff was inconsistent and negligently inadequate in Ethiopia. Where the MRC staff performed well, this was often more a matter of luck and personal temperament or commitment rather than preparation.

In the case of the MRC in Mile, Ethiopia (which was moved to Semera in recent months), the facility was completely closed for a three-month period during FY2015 at the order of the Federal Police – for financial reasons – according to the MRC staff. This closure was confirmed by records shown to the ET at the MRC facility. IOM Ethiopia indicates it was unaware of this closure and offered shifting and inconsistent explanations of the closure – first claiming that it did not happen and then suggesting that there were administrative reasons that impelled the closure – when it was brought to IOM’s attention. Nor did IOM appear to be aware that a full-time MRC staff member funded under this program only showed up to work to help screen newly-arrived migrants for medical issues and was otherwise not present at the MRC. The ET did not anticipate identifying such issues but feels that they should be noted in this report in order to emphasize the need for far closer IOM supervision of its activities.

There were also more minor oversights in management. Seven unaccompanied child returnees consulted by the ET at the IOM-operated Transit Center for returnees in Addis Ababa noted that government Social Workers working at the Center (with UNICEF funding) rarely left their offices, provided no counseling services, and had only given the returnees art supplies – which they greatly enjoyed – in the hour before the Evaluation Team’s arrival. During the preceding week that those unaccompanied returnee children – who had just emerged from one to three years of incarceration in Zambia – had been at the Transit Center, they had been given no access to such materials and reported having no counselling sessions (in direct contradiction to what the Social Workers told the Evaluation Team). While such an issue may appear minor, it again speaks to deficits in oversight and supervision and a general lack of attentiveness by IOM personnel, particularly in Ethiopia.

This evaluation cannot confirm whether such oversights also exist in other program locations, and it is important to note that fewer issues were identified in Djibouti. That said, the IOM Djibouti focal point for this project was terminated one month before this evaluation’s field work – due to unsatisfactory performance – and only consented to a single, relatively shortly interview with the ET. Hence, it is reasonable to conclude that substantial management challenges had existed under this project in FY 2015-16 and the initial months of FY 2016-17 in Djibouti. Management issues should be explored by PRM and IOM elsewhere in the region as well.

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12 The Social Workers in question are provided by the regional Bureau of Labor and Social Affairs and are funded by UNICEF. However, they are supervised by the IOM-funded Transit Center manager.
5. Recommendations

Overall the ET found the Regional Migration Program to be crucial, reflecting several effective and important elements. Direct assistance provides a vital lifeline for a significant number of vulnerable migrants, particularly in countries like Yemen and Djibouti. AVR activities, while rudimentary, are particularly useful in supporting some of the most at-risk migrants to escape from extreme hardship. Furthermore, regional cooperation mechanisms keep the issue of migration alive in the minds of government officials in the region and appear to have at times contributed to more humane approaches to managing irregular migration. The consistency and predictability of PRM/DoS support to this program has been crucial in enabling these sorts of achievements and successes, according to IOM interviewees. That said, there are a wide range of gaps, noted earlier in this report, which will require urgent and sustained attention from IOM and close follow up from PRM/DoS.

5.1. Overarching, strategic recommendations

In any program, there are opportunities to build upon successes and to correct challenges and weaknesses. This recommendations section thus begins with a small number of overarching, strategic recommendations before turning to a series of recommendations that correspond to each pillar of the program.

**Strengthen program monitoring and evaluation.** The absence of monitoring and evaluation elements from this program prevents both accountability and learning. IOM has neglected this vital element despite past evaluations calling for this element. PRM should work with IOM to ensure that a robust system for monitoring and evaluating activities is established for FY 2016 and 2017 program activities including MRC performance, the outcomes achieved by AVR beneficiaries, the impact of various awareness-raising models, and the efficacy of past capacity building efforts. To enable this overarching recommendation, IOM should allocate resources to provide a multi-day, in-person training on M&E for IOM staff and partners involved with this program; and IOM should develop tailored M&E tools and a strictly enforced monitoring plan/timeline.

**Prioritize capacity building within the program.** The original intent of the program to build lasting capacities among officials across the region has been largely subsumed to more pressing humanitarian needs among migrants. As such, IOM should develop and implement a focused capacity building strategy within this program and ensure, through discussions with national governments, that officials across the region benefiting from this strategy do not experience frequent turnover. Such a strategy should involve a series of graduated trainings targeted at key officials as well as direct on-the-job training (e.g., pulling officials into MRCs or responses to migration emergencies). As part of this strategy, IOM should also consider asking governments in the region to put career civil servants into the MRCs rather than...
allowing them to be staffed in places like Ethiopia, Somaliland, and Puntland by individual contractors hired by government institutions on short-term contracts; doing so will ensure that capacities gained through operating MRCs will remain within governments for an extended period.

**Develop and gradually implement a transition/handover plan.** In line with the expanded focus on capacity building, IOM should develop, during FY 2016-17, a detailed transition plan that is in line with the intended governmental capacity building objectives of the program. This would need to be carefully negotiated with governments in the region and will come with the risk that particular program components will ultimately not be financed or taken up by public institutions or civil society organizations. Such a risk is worth taking in the interest of sustainability. From this evaluation’s perspective, the transition plan should include a three-year period over which time government institutions take on increasing financial and technical responsibility for (a) awareness-raising and behavioral change communication activities, (b) MRCs and the IOM Transit Center in Addis Ababa, and (c) capacity building of government personnel. Over this time IOM should provide in-depth technical support for these areas, including the development of easy-to-use manuals and handbooks. Such a timeline would force IOM to think further about how it can build lasting capacity and reflects the basic reality that a program such as this is not necessarily intended to be open-ended in nature.

**Develop a new funding allocation formula.** At present, to keep the peace among IOM missions in the region, resources are being allocated roughly evenly across the various locations. This approach does not make sense in a situation where certain countries have far greater migration challenges and populations than others. Regardless of how many locations the program continues to focus on, an objective formula for allocating resources among locations will be needed. This formula, which PRM should be involved in developing, should consider factors such as the numbers of migrants and returnees, past numbers of project beneficiaries, and evidence of strong government support for the project. For instance, government support could be assessed by considering the level of turnover among key officials involved in migration management, the consistency of governmental representation at the RCMM, the past willingness of governments to implement recommendations from the RCMM, and other factors.

**Change the management arrangements.** At present the management of the project from Nairobi, home to almost no project activities, does not make sense and reduces opportunities for the regional program coordinator to directly oversee and monitor activities. Likewise, it is evident that having a focal point familiar with Ethiopia, fluent in Amharic (and perhaps other major Ethiopian languages), and based in Addis Ababa would be most logical given that the vast majority of migrants assisted under this program are Ethiopian. This person would have a greater ability to engage with awareness-raising activities in Ethiopia, which appear to have some yet-untested benefits, and to speak directly with project beneficiaries as well as with Ethiopian government counterparts. Furthermore, a regional program coordinator based in Ethiopia could provide greater oversight of the project, could liaise more easily with PRM’s more migration-focused Refugee Coordinator in Addis Ababa, and could engage with the African Union and IGAD more easily. It should be noted, however, that the major gaps identified in IOM Ethiopia’s management of project activities means that any Addis-based program manager should not necessarily be hired from among the existing IOM Ethiopia staff.
**Ensure dedicated staffing for this program.** Staff involved this program, even where the majority of their budget is financed under this program, are often pulled into numerous other activities and reportedly spend a less-than-expected portion of their time overseeing and monitoring this PRM-funded program. This had led to oversights such as the severe challenges at the MRC in Metema and broader gaps even in simply counting outputs, activities, and beneficiaries. IOM will need to devise a solution to this challenge, though it may include: (a) financing a smaller number of fully-dedicated staff at 100% under this program and/or (b) closely monitoring assignments that PRM-funded staff take on outside of this program.

**Box 4: Strongly consider shutting down the MRC in Metema, Ethiopia**

For a wide range of reasons, the ET feels the MRC in Metema should be shut down and likely replaced with a referral service (see Annex C). IOM has, in discussions with the ET, resisted this recommendation and feels that it can assist a larger number of migrants passing through the area with more effective communications and networking activities and that it can promote accountability and monitoring by stationing an IOM staff member in the facility, which they aim to improve with external (non-PRM) donor support. The ET does not agree with such a way forward for a relatively basic reason: migrants are either not moving through the area around the MRC or are so fearful of detection by the border authorities that they would not enter an MRC. More than a dozen stakeholders agreed that the migration routes to Sudan and northward are changing – moving from 15 to 150 km away from the MRC. Hence, the evaluation team finds that investing heavily in such a location – rather than dedicating increased resources to successful activities such as Community Conversations, the return of detainees, or the Semera MRC – does not necessarily make sense. Instead, IOM could work with NGO service providers in the area to offer a referral service to the most vulnerable migrants in this remote area.

**5.2. Pillar-by-pillar recommendations**

The following recommendations are roughly divided according to the program’s five pillars. However, some may certainly apply to one or several pillars given linkages between various activities (e.g., regional dialogue and capacity building).

**Capacity building**

1. Ground all capacity building activities in capacity needs assessments, and measure the effectiveness of capacity building activities using standard tests/surveys and follow-up to determine impact of trainings. At present, capacity building initiatives are not tailored on the basis of the specific needs of the specific institutions’ missions.

2. Integrate issues surrounding irregular migration and vulnerable migrants into civil service and police academies – and into onboarding/orientation for new government hires in relevant institutions. Such integration appears to be essential particularly when considering the very frequent turn-over of the governmental officials and the fact that officials can be involved in migration management during various stages of their careers.

3. Whether independently or in partnership with other relevant actors, provide a graduated approach to capacity building—with phases rolled out over time—that allows participants to receive basic and advanced lessons (e.g., dealing with particularly vulnerable migrants).

4. Generate – in partnership with specialized agencies – additional manuals and practical implementation materials, translated into major local languages, where feasible; these
should be adapted by national and local stakeholders to conditions on the ground. Such documents will comprise a crucial form of sustained capacity. The availability of such materials can also help in implementing a training-of-trainers approach whenever possible, thus widening the scope of stakeholders adequately informed and trained.

5. Build the capacity of subnational government institutions to expand coverage of Community Conversations in major migrant source regions in Ethiopia. IOM should also assess the feasibility of adapting the Community Conversation model to other countries throughout the region.

**Direct assistance**

6. Keep a significant share of the program budget – perhaps 25% or so – for responses to urgent emergencies/crises and migrant or returnee flows. Returnee and migrant flows can increase suddenly both from Yemen and from Ethiopia; and unforeseeable crises could lead to other migration challenges. The considerable quantity of vulnerable migrants (particularly children, unaccompanied minors, women, pregnant women) to be rescued from sea or from desert, would require an easily accessible supply of flexible resources.

7. Ensure MRCs, the IOM Transit Center, and other project facilities include child-friendly spaces, recreation opportunities, and specific facilities and services for vulnerable groups (e.g., psychosocial support, child protection, and SGBV response). IOM should work with UNICEF, UN WOMEN, UNHCR, and local NGOs in designing these improvements.

8. Provide common core standards for MRCs across the region in terms of facilities/physical environment, services, materials, and staff qualifications and training. At present the lack of such standards can lead to lower-quality services in one location. Furthermore, the development of such standards could facilitate the sharing of good practices between MRC personnel in a written format (building upon the cross-MRC lessons learning meeting held in 2016 in Hargeisa).

9. Expand advertising of MRC services – in the predominant migrant languages – to attract beneficiaries and dispel misconceptions about MRCs. At present, many irregular migrants do not visit MRCs in places like Obock for a wide range of reasons, including pressure and misinformation from smugglers. Across many locations in the region, migrants also reportedly worry that they will be forced to return home if they seek assistance at an MRC. IOM needs a clear strategy to overcome this issue.

10. Identify partners and/or additional funding streams to ensure that reintegration support is available for vulnerable returnees (e.g., UAMCs, VoTs). IOM should develop alliances with other specialized agencies (both IGOs and NGOs) aimed at facilitating reintegration processes of those migrants who accept the AVR. Particularly, cooperation should be searched with UNICEF, UNIFEM, UNFPA, and major international NGOs particularly committed to childhood, women, family protection and promotion as well as to livelihood activities.

**Regional migration dialogues**

11. Engage in a systematic process of reporting on country-by-country progress in implementing past RCMM recommendations to increase accountability. Since participants
in the various RCMM meetings change considerably, the practical implementation - or the non-implementation and respective reasons - of the various recommendations is not always shared among the members. A systematic process to track the progress (or the failures, delays, etc.) and to share them among the RCMM members can help to better identify the best practices and the difficulties.

12. Help overcome confusion surrounding regional migration processes and programs by developing a quarterly newsletter or knowledge management platform that captures recent events related to migration, the RCMM, IGAD, the African Union, government initiatives, etc.

**IOM-UNHCR coordination**

13. Moving beyond UNHCR, prioritize coordination and, most importantly, the joint development of proposals and activities with UNICEF and UN-WOMEN (e.g., in MRCs or in the scope of Community Conversations).

14. Invite UNHCR, UNICEF, UN-WOMEN, and potentially other actors to assess IOM’s past support to vulnerable migrants and returnees and to recommend means of building IOM’s capacity in this area. These agencies expressed serious misgivings about IOM’s approach to protection so should be involved not only in coordination but also in helping IOM to develop technical standards in this area. As noted above, joint proposals should be developed to enable this sort of collaboration and mutual capacity building.

**Emergency migration management**

15. This pillar is not necessarily clear at present and should be generally suspended for FY 2016-17 to enable further clarification. The end result would likely be the integration of EMM under capacity building and/or regional cooperation (e.g., the development of regional tools/frameworks or manuals on related issues that are tailored to this region).

16. IOM should, however, continue its own work to respond to migration emergencies, which is one of the most successful elements of this program thanks to the flexibility of PRM support. In doing so, it should seek out every available to involve and mentor local authorities and CSOs in the process.
Bibliography

The following documents were reviewed in the course of this evaluation. They do not necessarily include each of the documents that was shown to the evaluators during the course of the field work. The sheer volume of these documents means that some may be difficult for the team to list here.

13. IOM and the Government of Ethiopia. 2016. NFF on PRM Project: Horn/ Gulf of Aden/Yemen: Improving Protection of Migrants, Phase VI, joint meeting among government agencies to review and endorse the two regional SOPs and review the progress towards the implementation of 5th RMMC meeting recommendations, Aphrodite Hotel, Addis Ababa 8 July 2016.
17. IOM Ethiopia. 2016. “Migrant satisfaction form analyzed [sic]”.


29. IOM. 2015. Regional Program to Strengthen Capacities to Protect and Assist Vulnerable Migrants in Mesoamerica (Mesoamerica Program), Phase VI.


33. IOM. 2016. Assessing the Evidence: Migration, Environment, and Climate Change in Kenya. IOM.

34. IOM. 2016. Assessment of Border Crossing Points in the Volta and Western Regions and Training Capacity of Ghana Immigration Service. IOM.


38. IOM. 2016. IOM Definition of “Migrant”. IOM.

39. IOM. 2016. Migration Governance Framework: The Essential Elements for Facilitating Orderly, Safely, Regular and Responsible Migration and Mobility of People through Planned and Well Managed Migration Policies. IOM.


42. IOM. 2016. Project Proposal: Regional Program to Strengthen Capacities to Protect and Assist Vulnerable Migrants in Mesoamerica (Mesoamerica Program), Phase VII.


50. IOM. 2016. *Results Matrix for the Mesoamerica Regional Migration Program*.

51. IOM. 2016. *Revised Budget: Phase VII, Regional Program to Strengthen Capacities to Protect and Assist Vulnerable Migrants in Mesoamerica, May 27*.


54. IOM. n.d. *MRC Data Registration Form*, undated.

55. IOM. n.d. *MRC Screening Form*, undated.


60. OECD. 2010 *Glossary of Key Terms in Evaluation and Results Based Management*.


63. PRM/IOM. n.d. “Results Matrix” for the Regional Migration Programs.

64. RCMM. 2015. *Recommendations from the 5th Meeting of the Regional Committee on Mixed Migration*. Djibouti: Regional Committee on Mixed Migration.


73. USAID. 2013. *Counter-Trafficking Field Guide*. USAID.


The evaluation questions will be addressed through an evaluation design that applies both qualitative and quantitative data collection methods including: document/desk review, key informant interviews (KIs), focus group discussions (FGDs), and mini-surveys. The use of multiple methods to answer elements of the same questions will increase the internal validity of the findings and conclusions.

**Sampling approach**

The ET will apply a purposive sampling technique to determine which sites and partners to visit and the groups and individuals with whom to conduct KIIs, FGDs, and mini-surveys. Locations for site visits will be chosen based on the number of stakeholders available in each location, the timing of program activities which the team could observe, and, most importantly, the potential ability to access migrants/direct beneficiaries in various field locations. The initial data collection will inform the sampling strategy by providing the ET with greater insight into the scope of Regional Migration Program services, programs, partners, stakeholders, and beneficiaries, and thus the criteria upon which to draw a sample.

The data collection tools will be standard, but flexible enough to reflect the unique operating environment and its' respective approach to supporting vulnerable migrants and building the capacity of government officials. All KII and FGD protocols will be semi-structured to provide the ET with flexibility to explore certain topics in greater depth as necessary and appropriate. That said, they will apply adequate structure to enable comparisons across countries and, where appropriate, between regions.

**KIIs:** The ET will conduct KIIs to investigate the experiences, behaviors, and perspectives of implementers, beneficiaries, and partners of the Regional Migration Programs as well as to provide insight into how the programs operate beyond what is described in the documents. Interviews with PRM staff will help the ET understand implementation from a management perspective, which will be critical for the development of useful tools and guidance. KIIs with IOM, government officials, members of the Regional Committee on Mixed Migration, NGOs, and multilateral organizations will help the team identify the programs' alignment with good practices and outputs and outcomes in terms of capacity building and enhanced regional migration management. Interviewees with high-level individuals (e.g., from ministries or UNHCR or the RCMM) will be selected through consultation with IOM. However, in the case of direct beneficiaries such as training recipients, the evaluation team will seek to select these independently from available lists of beneficiaries.

**FGDs:** The team will conduct FGDs with different groups of refugees and migrants as well as with training participants and others, as appropriate. FGDs will inform the team about how individuals' needs and preferences have been met, satisfaction with past and current services/assistance, and the extent to which IOM has been responsive to their feedback. FGD participants will be grouped according to sex, age cohorts, ethnicity, and vulnerability status – as appropriate – to capture differences in experiences and perspectives. If feasible, the ET will conduct FGDs with designated vulnerable individuals or groups such as survivors of trafficking, kidnapping, or sexual violence, unaccompanied children, members of the LGBT
community, and the physically disabled.\textsuperscript{13} Of course, such beneficiaries may not always be readily available for FGDs. FGD participants will be selected by the ET in consultation with IOM field staff.

\textbf{Site Visits:} The ET will conduct site observations of a selection of sites in both regions. In the Horn of Africa, site visits may include Migration Response Centers and Immigration and Border Patrol Offices. In Mesoamerica, site visits may include community and youth centers, shelters, schools, and/or Customs Authority offices. The team will utilize checklists of best practices when appropriate to support with the evaluation of effectiveness and appropriateness of services provided.\textsuperscript{14}

\textbf{Mini-surveys:} The ET will conduct quantitative mini-surveys with a selection of key informants, particularly those that the ET may not be able to consult in person. Specifically, we will sample government officials who have participated in capacity building activities, stakeholders in the regional migration dialogues or consultative processes (RCPs), Migration Response Center staff members, and members of the Working Group on Migrant Children. Invitations to complete the mini-surveys will be sent to all relevant individuals rather than selecting a sub-set of, for instance, training participants. Mini-surveys will allow the ET to collect evidence from a wider population of informants than would otherwise be possible given time and resource limitations. Focused on a narrowly defined issue or sub-set of questions, the mini-surveys will consist of approximately 10-15 closed-ended questions that can be answered in less than 10 minutes. Surveys will be administered either via mobile phones or email, depending on the final selection of participants. Responses will be recorded using an application such as Survey Monkey, Magpi, or Open Data Kit (ODK) to ensure that data are immediately aggregated and available for review by the team. The responses to any such surveys will be reviewed only by the ET and not by IOM or PRM staff.

The methods noted above will be applied in six countries across two regional evaluations, including three countries in the Horn of Africa and a further three in Mesoamerica. The ET will jointly conduct the first country evaluations in each region, including Kenya and Costa Rica – which serve as the management hubs for the regional programs – and then split up for the second and third evaluations. The subsequent field evaluations will include one core team member working with a local researcher in each country.

\textbf{Country visit selection}

Upon reviewing program documents, the ET took up the question of country visit selection to determine where to conduct field work. Below the proposed country visit locations and selection criteria are summarized; the ET is open to alternative suggestions.

\textbf{Horn of Africa – Kenya, Ethiopia, and Djibouti.} Kenya, where the ET intends to spend one week, was selected given that it serves as the management hub for the regional program and given that several regional institutions are headquartered there. The ET will

\textsuperscript{13} Where the ET will engage with members of particularly vulnerable groups, the ET will seek approval through Social Impact’s Internal Review Board (IRB), which ensures that data collection, management, and use safeguards respondents’ inputs and that all such encounters are based on informed consent.

\textsuperscript{14} The ET has not included checklists for the site visits in the annexes to this report given that the specific checklists to be utilized will depend heavily on the types of facilities and/or trainings which the evaluators will observe.
then proceed to Ethiopia and Djibouti for two to three weeks each; these two countries which were selected given the level of programmatic activity in each (according to the FY 2016 proposal/appeal). Ethiopia is home to two MRCs supported through the program and has the largest awareness-raising component of any country in the regional program and the second highest level of humanitarian assistance (after Yemen) provided through the regional program. Djibouti also has a high level of programmatic activities and from 2013-15 had the third-highest number of program beneficiaries after Yemen and Somaliland, both of which would be more difficult to access for political and security reasons.

**Mesoamerica – Costa Rica, Guatemala, and Mexico.** Costa Rica has been selected given that it is both the management hub for the program and has a sizable level of activities; the ET will spend two weeks before splitting and traveling to Guatemala and Mexico. Guatemala is home to a full range of regional program activities and faces a diverse array of migration issues. Mexico was selected with input from DoS/PRM given that it is also home to a normal range of program activities and serves as a major transit point for migrants from the Americas.

*Note:* The ET will conduct an out-briefing at the conclusion of field work in each region – in Kenya and Costa Rica – though not necessarily at the country level.

### Analysis

The ET leader will oversee and manage systematic analysis of qualitative and quantitative data. Mini-survey data will be exported and analyzed. Team members will transcribe KII and FGD notes in real-time, cleaning and sharing electronic summaries on a rolling basis. The ET will use content, trend, and pattern analysis to identify response categories and to elucidate emergent themes and contextual factors. The ET will also employ data triangulation: an analysis strategy in which qualitative and quantitative data are first analyzed independently. Findings from each data set are then used to inform and explain findings across data types. Triangulation of data ensures that more than one set of findings bears on the ET’s assessment of the Regional Programs’ contribution to the achievement of expected results and most importantly, why.

The ET will capture preliminary findings and conclusions in an evaluation findings matrix that categorizes analysis and recommendations by evaluation question. The matrix will (a) ensure that the team prepares a systematic and thorough response to each evaluation question, (b) verify that preliminary analysis accounts for gender and social dimensions, (c) identify any gaps where additional clarification or analysis may be necessary, and (d) serve as the basis for developing the draft evaluation reports at the regional and global levels.

### Approach to Gender and Vulnerability

The evaluation methodology will be closely attuned to gender and will seek to capture perspectives from women and men, girls and boys, and from particularly vulnerable groups, including members of the LGBT communities. To enable this process, the ET includes one man and one woman, and local members of the team will be selected in a manner that reflects gender concerns and which will also reflect any identity issues (e.g., attempting to include members of indigenous populations where appropriate).
Vulnerability is a key part of the program and, hence, will be a key part of the evaluation as the team not only looks at whether migration management capacity has improved but also at whether government institutions, civil society, IOM, and others across the regions in question are better able to recognize and respond to the unique needs of vulnerable migrants.

In terms of the actual conduct of the evaluation and the analysis process, the ET will systematically compare responses from male and female respondents (e.g., government officials, civil society organizations, and migrants). In addition, the team will address the extent to which different forms of vulnerability – several of which have gendered dimensions – have been addressed to differing extents in the programs (e.g., labor migrants versus victims of trafficking or SGBV). This will be done by reviewing interview and FGD records, which will include questions related to vulnerability, as well as by considering training materials and other physical records available from IOM.
Annex B: Summary data from the IOM staff survey

A survey developed by the evaluation team was disseminated to 36 IOM staff members involved in this program. A total of 13 responses were received thanks to follow-up reminder e-mails. The following tables capture key statistics from the survey; responses are not disaggregated by the respondents’ countries since the small number of IOM staff members in particular countries would make it feasible to infer who responded in what manner (thus violating the anonymity guaranteed to respondents).

<table>
<thead>
<tr>
<th>Overall, how effective do you think this program has been in building capacity among the following types of stakeholders?</th>
<th>Not effective</th>
<th>Minimally effective</th>
<th>Somewhat effective</th>
<th>Effective</th>
<th>Very effective</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>National government personnel</td>
<td>1</td>
<td>0</td>
<td>4</td>
<td>6</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Subnational government personnel</td>
<td>0</td>
<td>0</td>
<td>3</td>
<td>6</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Local government personnel</td>
<td>0</td>
<td>0</td>
<td>3</td>
<td>5</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Civil society representative</td>
<td>0</td>
<td>1</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Please rate the following forms of direct assistance and other project components.</th>
<th>Not effective</th>
<th>Minimally effective</th>
<th>Somewhat effective</th>
<th>Effective</th>
<th>Very effective</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>MRC support</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>6</td>
<td>7</td>
<td>0</td>
</tr>
<tr>
<td>Assistance with documentation</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>7</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>Assisted voluntary return</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>6</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>Health care</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>8</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Transportation</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>6</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Emergency Migration Management</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>7</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Unaccompanied children assistance and family reunification</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>6</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>IOM–UNHCR coordination</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>6</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Referral to partners</td>
<td>0</td>
<td>0</td>
<td>3</td>
<td>7</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>NFIs</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>6</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Awareness raising</td>
<td>0</td>
<td>1</td>
<td>4</td>
<td>5</td>
<td>3</td>
<td>0</td>
</tr>
</tbody>
</table>
### Regional cooperation on migration

<table>
<thead>
<tr>
<th></th>
<th>No change</th>
<th>A little better protected</th>
<th>Moderately better protected</th>
<th>Much better protected</th>
<th>Unsure/don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regional cooperation on migration</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>9</td>
<td>0</td>
</tr>
</tbody>
</table>

### Assistance to pregnant girls and new-born babies

<table>
<thead>
<tr>
<th></th>
<th>No change</th>
<th>A little better protected</th>
<th>Moderately better protected</th>
<th>Much better protected</th>
<th>Unsure/don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assistance to pregnant girls and new-born babies</td>
<td>0</td>
<td>1</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
</tbody>
</table>

### Psycho-social care

<table>
<thead>
<tr>
<th></th>
<th>No change</th>
<th>A little better protected</th>
<th>Moderately better protected</th>
<th>Much better protected</th>
<th>Unsure/don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psycho-social care</td>
<td>0</td>
<td>1</td>
<td>6</td>
<td>3</td>
<td>2</td>
</tr>
</tbody>
</table>

### To what extent are the following groups less vulnerable or better protected as a result of this program?

<table>
<thead>
<tr>
<th>Group</th>
<th>No change</th>
<th>A little better protected</th>
<th>Moderately better protected</th>
<th>Much better protected</th>
<th>Unsure/don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Potential migrants</td>
<td>0</td>
<td>2</td>
<td>7</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Female migrants</td>
<td>0</td>
<td>1</td>
<td>5</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>Child migrants</td>
<td>0</td>
<td>2</td>
<td>3</td>
<td>8</td>
<td>0</td>
</tr>
<tr>
<td>Labor migrants</td>
<td>1</td>
<td>1</td>
<td>6</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Pregnant girls/women and new-born babies</td>
<td>0</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>Members of the LGBT community</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>0</td>
<td>5</td>
</tr>
</tbody>
</table>
Annex C: A flexible alternative to the MRC concept

As noted in the text, the MRC model is somewhat challenging given that MRCs are geographically fixed, whereas migration routes are prone to changing in countries like Ethiopia (though to a lesser extent in a place like Djibouti). To address this dilemma, the Evaluation Team wanted to offer an alternative model – not as a recommendation but rather as a jumping off point for discussion within PRM and IOM.

The concept includes the following elements:

1. Signs along migration routes, with new ones installed as routes change, as well as cards that are distributed to migrants at key locations. The signs and cards would provide a number for a central call center that migrant could call if they were in need of assistance.

2. A call center in a central location staffed by one person (or several) fluent in major languages of Ethiopia, for instance. Migrants could use their cell phones – or a borrowed phone – to call the center and request assistance for a particular issue.

3. The call center would then, based on the caller’s location, contact a network of pre-vetted local service providers, including NGOs, women’s shelters, subnational government offices, and health service providers.

4. The local service provider would then be responsible for arranging transport for the migrant (or compensating them for any transport to the service provider) and for providing services, which IOM would then reimburse on a pre-agreed basis. Compensation may ultimately include a fixed portion and a variable portion that can be adjusted based on the beneficiary’s feedback.

5. A verification mechanism would be introduced. More technical approaches could include some sort of biometric data collection, including photographs, to verify services – along with phone calls with the beneficiary. However, it may also be useful to have an in-person verification mechanism in which a local NGO or government official receives a stipend in order to meet with migrant beneficiaries, review the assistance they have received, and perform a basic satisfaction survey.