



FINAL REPORT

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FINAL EVALUATION

MIGRANTS RESCUE AND ASSISTANCE IN AGADEZ REGION (MIRAA) – PHASE III



for



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EXECUTIVE SUMMARY

One of main migratory routes originating from Niger goes to Algeria, a phenomenon that the Governments of Algeria and Niger tried to address through an agreement in December 2014 to repatriate Nigerien migrants from Algeria to Niger. This repatriation is organised by the Algerian authorities, with migrants being taken through Tamanrasset (Algeria) and into Niger through Assamaka, Arlit and finally Agadez.

From Agadez, the Government of Niger repatriates these migrants to their areas of origin. On a humanitarian basis, IOM assists these migrants upon arrival in Niger on humanitarian basis when they arrive in Niger. IOM also observed that non-Nigerien migrants are expelled from Algeria into Niger, a phenomenon that has intensified since September 2017.

In addition, migrants still seek to travel to and from Libya and often find themselves in distress in Nigerien soil. Hence, the persistence of this migratory phenomenon and the increased returns of migrants pose the problem of the material, financial and human resources for the Nigerien institutions in charge of managing migration.

IOM has implemented MIRA III project, funded by the Dutch Government, aiming at

1. ensuring protection and direct assistance to migrants in need along the migratory road to/from Niger;
2. reinforcing sensitization and awareness raising activities on migration and monitoring the evolution of migratory trends in Niger
3. Ensuring sustainable return and reintegration of migrants to their community of origin.

KEY FINDINGS & CONCLUSIONS

As an overall conclusion, MIRAA-III succeeded (and in some cases even surpassed) what it set out to do. By providing assistance across the whole spectrum of migration management - awareness-raising, search and rescue, protection (including providing accommodation, food, NFIs etc), return assistance and reintegration has been relevant, effective and has created an impact on the lives of individuals. Overall, the staff is competent and perhaps even more importantly, extremely motivated and dedicated to the work they do and to 'their' beneficiaries.

It also needs to be underlined that MIRAA-III was resilient enough to continue to provide quality services and to adapt to new realities during COVID-19 and was able to adapt its procedures and operations in spite of additional hurdles to the return process (or rather the timeline for returns) and new requirements such as changes to the mode of transport and the additional cost this entailed.

The conclusions hereunder provide a brief overview of the main observations of the evaluator.

1 - COMMUNICATION (INFORMATION AS AID)

Communication with beneficiaries in bigger centres, especially on the services and protection IOM offers, is either not always relayed when working with 'national delegates' and some crucial information, such as on the possibilities to seek psychological consultations, are not always fully transmitted to all beneficiaries in the transit centres.

Part of the problem could also be the fact that not all beneficiaries are well-versed in French or English - and that even the delegates do not always master the national languages of their compatriots.

Improving would avoid to issues that have been observed during the evaluation: (1) beneficiaries are unaware of some of the services they can access when in IOM's care and (2) a lack of comprehension of the next steps (and their duration) which in turn leads to frustration, and as in the case of Assamaka and Arlit TCs, violence towards centre staff.

2 - RELEVANCE

Given the migration patterns that remain unaltered for more than a decade, the project was relevant since its inception and remains so until this day. Migration flows do not seem to have stopped and people continue to leave their countries of origin at the same pace as before the pandemic. Consequently, returns - forced or voluntarily - from Libya and Algeria are likely to continue.

And given regional and global developments that are emerging - such as political instability and a war in Ukraine - with resulting food shortages and price hikes likely to cause unrest in (North) Africa, migrants will be affected and the likelihood of accelerated expulsions from countries like Algeria, Libya (and possibly Tunisia) will increase - putting an even greater burden on IOM and the Government of Niger.

3 - COHERENCE

In light of the relevancy of the project to this day, the partnership of IOM with the Government of Niger and the coherence with national policies is positive. IOM's role in the overall humanitarian response in Niger, and its preeminent role in migration management through the Migration Resource and Response Mechanism (MRRM) is a benefit to the entire process; the coherence of IOM's work with national policies can only continue to benefit the migrants and the Government of Niger.

4 - SUSTAINABILITY

In spite of the high degree of relevance of the MIRAA-III project, and after years of coherent support of IOM to the national policies and institutions, including capacity-building initiatives for all national actors involved in migration management, sustainability and full local ownership of the process is still far off.

All national and regional/local stakeholders - beginning with the DG for Migration - have repeatedly underlined that the Government of Niger is not in a position to manage the current migration flows with the same degree of assistance, protection and sustained support to the beneficiaries as it currently does with the assistance and financing of IOM and its partners.

5 - REINTEGRATION

The majority of the beneficiaries of reintegration assistance - as was also underlined in the internal evaluation in Sierra Leone and Liberia - were difficult to reach once the assistance was completed, making meaningful follow-up difficult. Those beneficiaries that were contacted however all indicated that the return process - starting from their arrival in their home country through the training and the reception of income generation kits, was good, but lengthy.

Both project staff and beneficiaries have underlined the need to increase the reintegration assistance, including professional training and income generation activities, to ensure that the return has more likelihood of being successful. At the same time, literature and some of the feedback from project reports and staff have indicated that such reintegration support should benefit not only the individual beneficiary but should overall aim at also supporting the community.

6 - GENDER & INCLUSIVENESS

On gender and inclusiveness, gender is reported - and mentioned in the project staff's responses - and was expressed mainly as either the fact that women were taken into account or as numbers of women participating in the project but gender responsiveness should go beyond percentages.

Nevertheless, not all the data on migrants (in the transit centres) should as a matter of routine be presented gender-disaggregated (or, for that matter, other categories of vulnerability) - a good example would be for example on the use of 'services' to ensure that gender-appropriateness/vulnerability-appropriateness is at the core of all activities.

The amount of data in the profiling database is a treasure trove that should be better exploited to analyse gender indicators and this analysis can be based on:

- Quantitative, sex-disaggregated statistical data - facts and figures
- Qualitative changes – for example, judgements and feelings, or perception

It needs to be noted that this approach to data collection and presentation is also missing for vulnerable groups such as the elderly, people with disabilities, the ill or infirm, or unaccompanied minors.

From a protection and gender-equality point of view, blanket labelling women, just based on their gender is not only a form of gender discrimination and stereotyping, but also risks unnecessary extending the stay of women in the transit centres.

7 - STAFF SUPPORT

Not surprising in hindsight, the staff - no matter the degree of direct exposure they have to migrants and their stories - all indicated that they are (adversely) affected by being daily exposed to what in most cases can only be seen as the hard, ugly reality of life as a migrant: abuse of all forms, suffering, exploitation, and often return to the same difficult conditions that the migrants tried to flee from.

The psychological impact on the staff is affecting their wellbeing, their performance and even their resilience to continuously cope with the enormous caseloads they are dealing with and all have expressed the need for psychological counselling for them as well.

A second issue that was highlighted is the need for professionalisation and capacity building of the staff that work with young children and minors in the transit centres and to develop both structured, age-appropriate activities (within the scope and goals of the programme, and without prolonging the stay of the minor migrants in the TCs) and to help the staff in identifying possible psychological issues in children and adolescents so that an early referral to the psychosocial team can be made.

8 - DATA COLLECTION AND MONITORING

Data collection is happening, but the process seems at times haphazard, and the data are not sufficiently correlated and linked across the different databases. Furthermore, it seems that only a very minor portion of the data is actually used to monitor the project during its lifetime and that there is no in-depth analysis, even though the data collected would easily allow such analysis.

At a time when some of the data collection tools (i.e. MARS) are being reviewed and updated, the moment is right to critically rethink the questions asked and the 'exploitability' of the data.

KEY RECOMMENDATIONS

The overall recommendation (to donors) of the evaluator is to continue the work that was started under MIRAA-III given the successful implementation of the project and the continuing need, paired with the self-assessed lack of capacity and resources of the Government of Niger to provide these services without the assistance and funding of IOM.

Nevertheless, there are a few recommendations that could improve the project and MRRM as a whole:

A - COMMUNICATION

1. Communication with beneficiaries should be reinforced to ensure that all beneficiaries have a clear and unambiguous understanding of (a) their rights and obligations and (b) the process of return and the anticipated duration. This will reduce tensions and will help manage expectations. This can be improved through:
 - a. The development of audiovisual communication tools - video clips with infographics - about the steps in the return process, the services that beneficiaries can access while in the transit centres and the rules that are applied.
 - b. Such videos could be run in loops on a screen in a central location so that the information is available at all times.
 - c. The videos should be translated with voice-over (and subtitles) in at least French, English, Arabic and Hausa - more national languages could be added if the need is identified.
 - d. Reinforce the training for the security staff on what services - and where these are provided - in the transit centres. These guards are very often more in contact with the beneficiaries than IOM staff is.

B - REINTEGRATION SUPPORT IN COUNTRY OF ORIGIN

1. Explore the possibilities to ensure reintegration support in each of the countries of origin - which will include an appeal to donors to fund both the support (training, income generation kits ...) as well as dedicated IOM staff in these countries and the means to support the reintegration assistance.
2. Tie in the reintegration assistance - wherever possible - with community stabilisation projects in the countries of origin.

B - STAFF SUPPORT

3. Regular psychological counselling for staff, provided by outside experts that are not linked to the project (and ideally not part of the international community in Niger) would be highly recommended, given the degree of daily exposure to what can only be described as 'human misery'.
4. Develop structured and age-appropriate (educational) activities for young children (0-12) and minors (12-18)
5. Provide training for 'teaching staff' on how to recognise potential psychological troubles in children and minors and develop protocols for referral to the psychosocial staff.

C - GENDER AND INCLUSION

6. Do not longer use gender as a 'blanket-justification' for protection, i.e. being a woman does not automatically imply specific vulnerabilities.
7. Use the data that are collected - and which include gender, age and disability data - to disaggregate information in all reporting.
8. Ensure that when making comparisons across groups (ie. men/women) the correct analysis methods are used to ensure that conclusions are valid.

D - DATA COLLECTION, ANALYSIS & PROJECT MONITORING

9. Disaggregate monthly beneficiary data into different 'vulnerability categories' - age, disability, unaccompanied minors - and present these data by gender.

10. Re-evaluate the data that is collected in light of the analysis that is needed by IOM to carry out its mandate; and either remove items (questions) from questionnaires if they are not used later on or - which would be the preferred option - reinforce the data analysis capacity of the staff to glean valuable insights into the overall migration process.
11. Ensure that data collected with one data collection tool is compatible with the data collected through another tool.
12. Use the profiling data to pre-populate subsequent data collection tools to ensure that data collected at different points in time can be matched and to reduce the possibility of errors.
13. Perform regular data-quality checks on the data collected and train and ensure that staff take responsibility for correct data entry.
14. Work with a social scientist - with a good understanding of data and research methodology - to improve existing data collection tools, including the questionnaires.
15. Work with a social scientist - with a good understanding of data and research methodology - to develop objective, comparable indicators that go beyond mere quantities and percentages.
16. Work with a social scientist - with a good understanding of data and research methodology - to improve, analyse and exploit existing data to provide further insights into the complexity of migration.
17. Develop dashboards that, drawing on the various databases, can provide an immediate appreciation of the indicators to enhance the reactivity of the project (management).

E - COOPERATION WITH PARTNERS

18. Given the clearly identified need for assistance to migrants with long-term psychological needs (trauma, troubles ...) it would be recommended to seek funding for continued assistance to this vulnerable segment of the migrant population, both in-country and for continued assistance upon return.

BACKGROUND TO THE EVALUATION

The *MIGRANTS RESCUE AND ASSISTANCE IN AGADEZ REGION – PHASE III (MIRAA III)* project, funded by the Dutch Government and Implemented by IOM Niger since November 2018, is coming to its end in November 30th, 2021.

IOM's MRRM Programme requested an evaluation to assess the outcomes of the project activities that are carried out mainly in Agadez region, Niamey and South of Niger, as well as highlight best practices, lessons learned and recommendations to improve future migration programming.

The evaluation took place from 01 to 31 March 2022 and included field visits to the Migration Transit Centres in Niamey and Agadez.

CONTEXT ANALYSIS

Niger, main migratory hub in West and Central Africa, is a country of origin, transit and destination for migration. Poverty, coupled with instability in the region, periodic drought and flooding, as well as the establishment of the Economic Community of West African States (ECOWAS) push many Nigeriens, and more broadly West and Central Africans, to seek better living conditions and better job opportunities through migration. Nigerien migrants or migrants transiting through Niger mainly attempt to reach Algeria or Libya.

Niger's geographical location makes it an ideal transit country from West Africa to the Mediterranean - the Algerian and Libyan coasts. In the desert expanses of the country. Traditionally, Niger is characterised by mixed migration, e.g. transit migration, internal migration, flight movements and seasonal labour migration, as well as return movements from Algeria and Libya. The reasons are often economic, with many Nigeriens migrating to economic and urban centres.

Migration flows in West Africa have traditionally been intraregional. With the adoption of the Free Movement Protocol between the Economic Community of West African States (ECOWAS), migration across the region has intensified. Several key events have affected the migration routes and flows in Niger between 2010 and 2019.

While Niger cannot be considered a major country of destination for international migrants, it is a very important country of transit for sub-Saharan migrants, mainly from ECOWAS member states. According to the United Nations Department of Economic and Social Affairs, there were 294,200 international migrants in Niger as of 2019. In addition to this recent trend, persisting needs have been observed in relation to the Libyan context as migrants still seek to travel to and from Libya and often find themselves in distress in Nigerien soil. IOM data collected at its flow monitoring points show that flows and humanitarian needs have shown volatility over the past years, with the possibility of sudden massive influxes requiring for large assistance operations in the Kavar and other areas of Niger.

Hence, the persistence of this migratory phenomenon and the increased returns of migrants pose the problem of the material, financial and human resources for the Nigerien institutions in charge of managing migration. In addition, since 2017, IOM has observed an increasing trend of non-Nigerien migrants arriving from Algeria in Niger and dropped 15 km away from the nearest town. From September 2017 to October 2021, IOM has recorded 43,089 migrants, of which 6,552 in 2021 alone, with migrants walking kilometres to access water and shelter and in dire need of life-saving assistance¹.

OBJECTIVES OF THE EVALUATION

¹ IOM Niger Crisis Response Plan 2022 (<https://crisisresponse.iom.int/response/niger-crisis-response-plan-2022/year/2022>)

This evaluation aims to assess the outcomes of the project activities that are carried out mainly in Agadez region, Niamey and South of Niger, as well as highlight best practices, lessons learned and recommendations to improve future migration programming.

The evaluation will measure the project's level of achievement in relation to its overall objective: *"Contribute to assist Nigerien and non-Nigerien migrants in need of protection and assistance."* MIRAA III activities will be assessed based on all OECD/DAC evaluation criteria, as follows: Relevance, Coherence, Effectiveness, Efficiency, Impact and Sustainability, as most relevant for each thematic area: Protection and Return, Reintegration, Awareness Raising, and Search and Rescue.

On the one hand, the evaluation shall inform an internal audience, specially IOM country office teams, and specialised units of regional and global IOM offices - so that the lessons learned and recognized good practices are adopted to benefit implementation of future interventions. On the other hand, the evaluation will offer the donor an overall analysis of the outcomes of the project at the end of its implementation. Specifically, the evaluation shall:

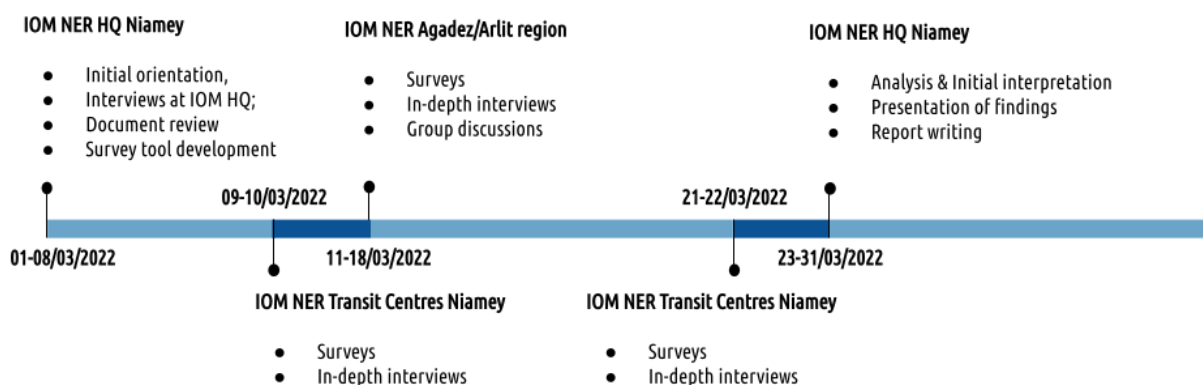
1. Review the project's activities carried out mainly in IOM transit centres, the results obtained, and the progress made;
2. Analyse the progress of the project to achieve the objectives, results and outcomes, as indicated in the logical framework;
3. Highlight the added value of the activities delivered during the project;
4. Highlight lessons learned and recommendations for further activities;
5. Identify gaps and related recommendations.

The final evaluation will cover the following thematic areas: Protection and Return, Reintegration, Awareness Raising, and Search and Rescue. The evaluation will cover the period from the November 2018 to November 2021 in Niamey region and Agadez villages.

The following cross-cutting themes must be part of the evaluation on each thematic area:

1. Rights-based approach (RBA)
2. Disability inclusion
3. Gender mainstreaming
4. Covid-19

EVALUATION CALENDAR



METHODOLOGY

EVALUATION QUESTIONS

The Terms of Reference proposed a number of evaluation questions as listed hereunder, but as can be seen from the final data-collection tools, these questions were fine-tuned, reordered and additional questions were added to better evaluate the impact; The questions hereunder were re-developed mainly with the IOM project/programme staff in mind as they pertain to OECD/DAC criteria that can not be used as such for beneficiaries.

The following questions should be addressed based on evaluation criteria and thematic area:

1. Protection and Return
 - a. Relevance:
 - i. How appropriately did IOM adapt voluntary return interventions and transit Center management to respond to the needs for protection and return assistance?
 - ii. To what extent did the Programme adapt to women and vulnerable beneficiaries' needs?
 - b. Coherence:
 - i. How have IOM interventions in transit centres been complemented by other partners and projects? What are the gaps and lessons learned?
 - ii. To what extent were the Programme objectives aligned to and responded to national policies?
 - c. Effectiveness:
 - i. Under Mira III, were migrants able to make a dignified and safe return to their country of origin? Was the project able to learn and adapt? What could be improved in the transit, return and reception stages?
 - d. Efficiency (Return):
 - i. Did assisted voluntary return journeys take place in a timely manner? What were the challenges in the return process and how were they overcome?
 - e. Efficiency (Transit/Protection):
 - i. Were direct assistance and protection services to vulnerable migrants in transit implemented in an efficient way?
2. Reintegration
 - a. Relevance:
 - i. Were the project's activities appropriately tailored to the reintegration needs of returnees (including social/cultural/community context, vulnerabilities, gender, age and geographical scope)?
 - b. Impact:
 - i. To what extent did reintegration assistance/activities enhance migrants' sustainable reintegration in their communities of return?
3. Awareness Raising
 - a. Relevance:
 - i. To what extent were awareness raising activities design and implementation adapted to the context to respond to migrants' needs including these of women and vulnerable migrants?
 - b. Effectiveness:
 - i. To what extent were awareness raising activities able to increase migrants' knowledge on irregular migration and its alternatives?
4. Search and Rescue
 - a. Relevance:

- i. To what extent were search and rescue activities design and implementation adapted to the context to respond to migrants' needs?
- b. Effectiveness:
 - i. To what extent have stranded migrants been effectively assisted with IOM search and rescue activities?

SCOPE, SAMPLING & DEMOGRAPHICS

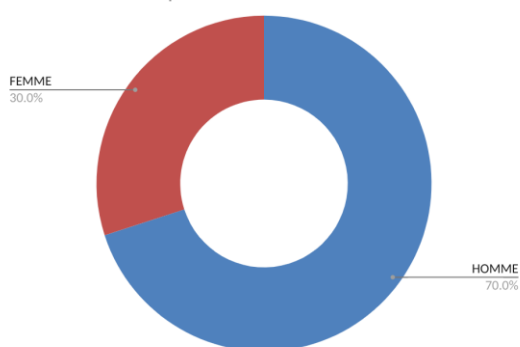
During field visits, beneficiaries in 4 transit centres² - 3 in Niamey and 1 in Agadez - were interviewed over 4 days. The selection procedure was based on the lists of residents (each n-th beneficiary on the list), with some corrections as to the country of origin of the beneficiary and the questions were based on both quantifiable appreciations such as satisfaction and open-ended ones.

The evaluators collected data until they reached the saturation point, the moment when no new information was gleaned from additional interviews. This applied for both the qualitative as quantitative data collection. Secondary quantitative data from existing IOM databases has been used to illustrate the scope of the programme and to provide a longer-term perspective.

In total, 41 beneficiaries were interviewed: 10 women and 31 men. Some of these respondents would also be representative of 'vulnerable' categories: as the manager of one of the TCs stated, all women are 'automatically' classified as vulnerable, as are all persons above 50. The lead evaluator also interviewed (in the presence of a protection officer) two unaccompanied minors in Niamey and three more in Agadez. All data has been anonymised.

DEMOGRAPHICS OF THE TRANSIT CENTRE POPULATIONS

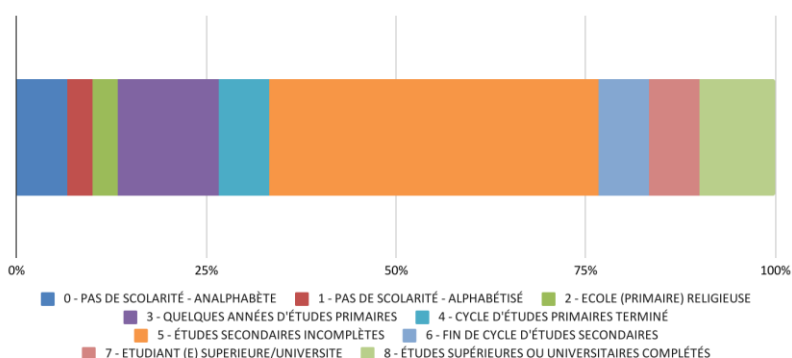
Gender of the respondents



Although slightly over a fifth (21.95%) of the beneficiaries can be qualified as having a low level of education (no schooling, religious - coranic - school or some primary), 46.34% have a mid-level (completed primary or some secondary schooling) or higher (completed secondary school up to completed higher studies) education. One third (31.71%) have either started or completed higher studies.

In March 2022, there were a total of 3557 migrants from 27 different countries in the 12 transit centres (TC) operated by IOM; more than one in three (38.18%) are from neighbouring Mali and a more than a quarter (25.92%) of the migrants are from Guinee Conakry. The Agadez Transit Centre which has a capacity of 1000 residents is currently overbooked by 20% as is the Assamaka TC on the border with Algeria. This 'overbooking' - a bottleneck for some - is due to significant changes in the time it takes between intake and repatriation because of (a) COVID-19 restrictions and (b) political changes in the receiving countries (*see also hereafter*).

EDUCATION LEVEL OF RESPONDENTS



² Niamey: Aigle, Francophonie and Sonuci; Agadez: Agadez Centre.

EDUCATION & GENDER	LOW	MEDIUM	HIGHER	TOTAL
MEN	7	13	11	31
WOMEN	2	6	2	10
TOTAL	9 (21.95%)	19 (46.34%)	13 (31.71%)	41 (100%)

The difference³ in education level between men and women (when the data are grouped into 3 categories to avoid zero values) is not significant (The chi-square statistic is 1.1271; the p-value is .569191) meaning that there is **no noticeable difference in education levels** between the genders of the migrants.

The interviewed migrants came from 16 different countries - the proportions of these nationalities during the interviews however were only partially explained by their relative numbers; other criteria, such as gender, vulnerability status or family composition were taken into account as well. Also, some groups had travelled and were no longer represented in the transit centres.

And although the 'migration history' of the respondents in itself should not have an influence on the beneficiaries' appreciation of IOM's work, we did ask some questions about it; the vast majority (85.37%) had actually left directly from their home country to either Algeria or Libya; with a few that stayed for a while in the transit countries (such as Nigeria).

Three quarters of the men (65.52%) vs 40.00% of women made their decision to embark on the migration routes alone and despite the apparent gender difference in the proportions between those who left on their own accord and those who were 'encouraged' by others, there is no significant difference between men and women (the chi-square statistic is 1.8724. The p-value is .171205)⁴. In only two cases (a man and a woman), a third person - already in Libya - paid for the travel costs; 75.61% of the respondents paid for their own expenses and in 19.51% the family 'invested'. Again, there doesn't seem to be a significant difference in this regard between men and women (the chi-square statistic is 1.8831 and the p-value is .390027).

As to the data gleaned from the 245 *Transit Camp Satisfaction Survey* developed by the ROWCA that IOM has administered between the end of October 2021 and early February 2022, 3.67% of the respondents are women; 96.33% are men. There are no further 'socio-economic' or other differentiating data making disaggregation beyond gender difficult.

Where those questions (and hence the answers) permit merging them with the evaluation data we have done so; otherwise, we have indicated the specific dataset with E for the Evaluation data and an I for the IOM internal data.

An important third source of data are the *Profiling* and *Assisted Voluntary Return databases* - combined (anonymised data allow to paint a picture of the migrant's stay in the centres, the means of transport for the return. These data have been used in the first part of the Findings and Analysis section hereafter.

DATA COLLECTION TOOLS

³ Chi-square test for proportions calculated online at <https://www.socscistatistics.com/tests/chisquare2/default2.aspx>

⁴ It needs however be underlined that the sample size is <50 which could have an influence on the chi-square test. A Fisher Exact Test which is an alternative for small sample sizes confirmed the findings.

To streamline the process at the onset of the evaluation exercise, project managers and heads of sub-offices - as well as current and former IOM staff that were/are involved in MIRAA III were asked to fill out **an (online) questionnaire for programme staff** with open-ended questions. Most of these pertained to how project management took the OECD/DAC criteria into account as well as a number of questions on inclusiveness and on the impact of COVID-19 on the project.

Aside from adding the view of the project management staff of IOM to the evaluation, the answers helped in better defining interview guides and questionnaires to be used in the field.

The evaluator developed **semi-structured interview** guides that were used during field visits to gain a broader and deeper perspective through **in-depth interviews with key informants**. These interviews were guided by the research questions and by the answers gathered in step 1 - and they allowed us to triangulate answers with what we find 'on the ground'.

Although the list of key evaluation questions (KEQs) is limited, they will be further unpacked during the conversations by asking more detailed questions. Since IOM has developed **beneficiary surveys** - on both the beneficiaries experiences in the transit centres and with the reintegration aspects of the project - we will use these data to assess **satisfaction**; paired with the beneficiary profile database, these data should allow gaining sufficient insights.

What is more, using the data collected already by IOM will allow for a perspective over a longer period of time than what a single visit to the transit centres would give.

Focus Group Discussions (FGD) contributed to a better understanding and will be used as additional tools for in-depth interviews. We used FGD as a tool to bring together different opinions or different types of interlocutors (such as beneficiaries and centre managers) to solicit either communalities, complementarities or opposing views. The evaluation team had initially planned to hold at least one (1) FGD per centre, among migrants and one per centre with staff (perhaps combining the staff in Niamey in one discussion group) but as the evaluation progressed - some of the informal discussion with migrant (groups) were used rather than formal focus group discussions to validate and verify data collected among individuals. A more formal discussion took place with Transit Centre staff (3 directors and a member of the psychosocial team in Niamey; 4 staff and the director in Agadez) as well as a discussion with all Niamey IOM project staff. Not formal FGD but rather validation meetings that the evaluator used to contextualise, clarify and enhance the findings of the field visits and individual interviews.

It is our experience that by bringing these varied interlocutors together, we can better assess **connectedness & appropriateness** of projects and interventions, as well as assess the **unintended outcomes** that in the key-informant interviews remain often elusive.

We also saw an interest for IOM to assess the **acceptability of services** including assessing to what extent Community Engagement & Accountability (CEA) has been taken into account in the implementation of the intervention. This included a series of questions on 'Awareness of the intervention', and 'Information as aid' in the surveys.

EVALUATION MATRIX

	Key questions	Sources of information
Relevance	<ul style="list-style-type: none"> Are the intended outcomes and outputs still valid and useful as originally intended, or as subsequently modified? Is the project consistent with and contributing to national and regional strategies? Is the project in line with donor priorities? 	Project documents Project staff (National) Partners

Effectiveness	<ul style="list-style-type: none"> • What are the main factors that influenced the achievement of the intended outcomes? • To what extent has the project adapted to changing external circumstances to ensure achievement of outcomes? • Have the expected results had unforeseen positive or negative effects? • To what extent have these effects contributed to the results obtained? 	Project documents Project staff (National) Partners Beneficiaries
Efficiency	<ul style="list-style-type: none"> • Were project activities implemented and outputs obtained in a timely manner? • Have all parties associated with the project provided or made available the required means in a timely manner to implement the activities? 	Project documents Project staff (National) Partners
Impact	<ul style="list-style-type: none"> • What are the positive/negative and intended/unintended effects of the project? • Does the impact come from project activities, external factors, or both? • Were measures taken in due time by the project to mitigate any unforeseen negative effects? 	Project documents Project staff (National) Partners Beneficiaries
Sustainability	<ul style="list-style-type: none"> • Will benefits from the project continue after external assistance ends? • Do the project partners have sufficient capacity (technical, financial and managerial) to continue to deliver project benefits/services? 	Project documents Project staff (National) Partners
Gender	<ul style="list-style-type: none"> • Has the project incorporated a gender dimension (results matrix, implementation)? • Has the project enabled the IOM mission in Niger to improve its gender analysis and interventions? 	Project documents Project staff (National) Partners Beneficiaries
Vulnerability	<ul style="list-style-type: none"> • If the target groups (women, minors, minorities, people in vulnerable situations) have suffered unforeseen negative effects, have those responsible for the project taken the appropriate measures? 	Project documents Project staff (National) Partners Beneficiaries

CHALLENGES AND LIMITATIONS

Somewhat unexpectedly, the weather turned out to be one of the main limiting factors of the evaluation. UNHAS flight operations were cancelled across the country because of poor visibility at the Agadez and Zinder airports.

Furthermore, limited access to stakeholders and beneficiaries of the reintegration in the regions of Tahoua (and to a lesser extent in Zinder) due to the security restrictions. Access to beneficiaries in remote villages would have been costly and difficult, as military escorts are now mandatory. However, as IOM has its internal satisfaction survey, these data will be exploited to assess the beneficiaries' point of view.

As to evaluating the **impact of reintegration** it needs to be noted that (a) the reintegration process started at the end of the project and as such the timeframe to evaluate whether there was a real impact was too short; (b) there are limits to even reach beneficiaries once they are no longer in the care of IOM. This is especially true for IOM offices outside Niger that do not have the capacity (e.g. no dedicated reintegration officers) nor the resources allocated to systematically monitor beneficiaries - something that should be improved. IOM (Niger) has recognised that there is a

need to enhance the capacity and resources in receiving countries and the issue has been taken up at the Regional Office for West and Central Africa.

Within the country, the security situation in the regions of Tahoua and Zinder make field visits to the outlying villages where most of or all returnees are, impossible; the use of 'intermediary locations' in Niger - where verification staff and beneficiaries meet half-way - are too dependent on the goodwill of beneficiaries to actually meet monitoring staff and this approach (dictated by security concerns) does not allow for 'in-situ' verification of the results.

To meet some of these challenges (in Niger) IOM is adapting and has started hiring project assistants who are actually based in villages to which migrants return; IOM is also working with the local authorities that have been part of the return process who relay information about progress and changes in their communities.

An additional issue identified is the fact that (a) there is a myriad of databases (MARS, MIMOSA, various kobo-based tools) that are used to collect data and (b) the data (-base) are not linked and (c) the consistency of the data is not ensured/verified.

In practical terms, this meant that when the evaluator tried to combine the MARS data with the migrant profile with the AVRR data on assistance and returns, several thousands of entries did not match or yielded conflicting results, making the analysis less accurate. Because of the size of the dataset in MARS (Almost 65,000 entries), the remaining almost 33,000 entries retained after cleaning and matching, provided a sufficient amount of data to discern trends.

Furthermore, the MARS profiling database contains an enormous amount of data that have never been analysed yet that could yield valuable insights into migration - eg. the economics of migration by analysing income data - if an analyst were asked.

Furthermore, in some of the IOM-created questionnaires used to monitor beneficiary satisfaction, the questions were 'suggestive' at times: e.g. when asking someone who receives something directly 'how satisfied' they are more likely to provide a positive (or in the eyes of the respondent 'a desirable answer'). A better approach is to define what 'satisfaction' would mean to IOM and to ask 'compound' yes/no questions that taken together become an indicator of satisfaction.

FINDINGS & ANALYSIS

LOGFRAME ANALYSIS & OUTCOME MAPPING

The results matrix hereunder is taken from the logical framework that underpinned the proposal made to the donor with some modifications made during the implementation phase, such as eg. needed to account for COVID-19.

Objective: Contribute to assist Nigerien and non-Nigerien migrants in need of protection and assistance		
<i>Indicators</i>	<i>Target</i>	<i>Achievements</i>
# of migrants in need of protection and assistance from Algeria and Libya assisted upon arrival in Niger and upon return into their communities of origin (disaggregated by sex, nationalities and vulnerabilities)	At least 40,000 migrants assisted upon arrival in Niger and 800 migrants assisted upon return into their community of origin	<p>40,113 migrants benefitted from direct assistance</p> <p><u>Sex:</u> 38,064 men – 95%; 2049 women 5%</p> <p><u>Vulnerabilities:</u> 1460 boys (< 18 years); 669 girls (< 18 years); 235 men (>= 50 years); 57 women (>= 50 years);</p> <p><u>Nationalities (5 main nationalities):</u> 10,147 Malians (25%) 8,244 Guineans – Conakry (21%) 3,802 Senegal (9%) 3,091 Sierra Leoneans (8%) 2,394 Nigerians (6%) 12,435 Others (31%)</p> <p>805 migrants benefitted from reintegration assistance</p>
% of migrants expressing satisfaction with the support provided in terms of immediate assistance and reintegration	80% of assisted migrants express their satisfaction with the support provided in terms of immediate assistance and reintegration	72% of assisted migrants express their satisfaction with the support provided in terms of immediate assistance.
<p>Comments/Observations</p> <p>Due to the Covid-19 context, migrants stay longer in transit centres and this affects their satisfaction as they want to return to their country of origin as soon as possible.</p> <p>Nevertheless, the project was able to provide direct assistance to 100% of the migrants originally targeted. The degree of satisfaction is discussed in more detail below and the evaluator believes that the 72% of satisfied migrants is underestimated somewhat.</p>		

Outcome 1: Ensure the good reception and return conditions of migrants in need of protection and assistance		
<i>Indicators</i>	<i>Target</i>	<i>Achievements</i>

# migrants in need of protection and assistance benefiting from good reception conditions upon their arrival in Niger	At least 40,000 migrants benefiting from good reception conditions upon their arrival in Niger	40,113 migrants benefitted from direct assistance
# of sensitised persons	At least 36,000 persons sensitised	40,113 38,064 men – 95%; 2049 women 5%
# of flow monitoring reports or maps published on a quarterly basis	12 flow monitoring reports or maps published (1 per quarter)	12 FMP reports published
Comments/Observations The MIRAA-III project attained all of the indicators -and surpassed some - on the reception and return of migrants throughout the project implementation.		

Output 1.1: Maintain the immediate assistance for stranded migrants		
Indicators	Target	Achievements
# of migrants in need provided with immediate assistance (disaggregated by sex, nationalities and vulnerabilities)	40,000 migrants provided with immediate assistance	40,113 38,064 men – 95%; 2049 women 5%
# of SAR operations conducted (from 01/11/2020 onwards)	35 missions	31 mission SAR conducted
# of migrants in distress rescued (from 01/11/2020 onwards)	1.400	420 migrants rescued Sex: 373 men / 47 women Vulnerabilities: 11 boys (< 18 years); 5 girls (< 18 years); 2 men (>= 50 years); Nationalities: 342 Nigeriens (81.4%) 50 Nigerians (11.9%) 19 Ghanaians (4.5%) 3 Senegalese (0.7%) 3 Burkinabes (0.7%) 3 Others (0.7%)
Comments/Observations Due to the nature of the SAR activity, the target is an estimation based on earlier operations. This has been highlighted in the reviewed proposal that had been sent to the donor.		

Output 1.2: Improve the reception assistance of migrants in need of protection and assistance

<i>Indicators</i>	<i>Target</i>	<i>Achievements</i>
# local health facilities supported and # of referral mechanism developed	1 local facility supported, and 1 referral mechanism developed	4 local facilities supported (Arlit public health centre; the mental health ward of the Agadez hospital; the psychiatric ward of the Niamey General Hospital, and the laboratory of the Agadez Hospital)
# of mental health practitioners and auxiliaries trained	20 persons trained	8 practitioners trained. All participants were indicated by the Programme National de Santé Mentale, that's why we didn't reach the target. 199 staff (community mobilizers, security officers at transit centers and "garde malades") trained on Mental Health and Psychosocial basic assistance in Arlit, Agadez and Niamey.
# of migrants referred to local health facilities supported	At least 300 migrants referred to local facilities	2,706 migrants referred to local health facilities
# of consultations in the transit centres	10,000 consultations in the transit centres	27,259 consultations
# of awareness activities implemented by community mobilizers per month	5 awareness activities implemented by community mobilizers per month	15 AWR activities per month
Comments/Observations One migrant can have more than one consultation; the number of referrals was of course also influenced by the COVID-19 cases; however, it needs to be underlined that the need for both medical and psychosocial support is much higher than could be anticipated at the time of writing the proposal and defining the initial indicators.		

Output 1.3: Ensuring the voluntary return of non-Nigerien migrants to their community in a safe and dignified manner		
<i>Indicators</i>	<i>Target</i>	<i>Achievements</i>
% of migrants requesting assistance with voluntary return being assisted to return to their country of origin	80% of migrants requesting assistance to return to their country of origin assisted with voluntary return	100% migrants that requested AVR assistance has returned to their country of origin under IOM assistance.
	5,000 people assisted with AVR	3598 migrants returned under this project.
Comments/Observations Due to Covid-19 context, migrants stay longer in the Transit centres. In a normal context (no Covid-19 pandemic) a migrant is expected to stay a maximum of one month in the transit centre. In the current context, migrants stay two to three months depending on their nationality. Before Covid-19 pandemic returns were done mainly by road which cost at least 5 times less than an air movement. Movements during Covid-19 are done mainly by air which directly affected the capacity of the Programme to reach the target.		

Outcome 2: Ensure the well-being of migrants upon return into their community of origin
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<i>Indicators</i>	<i>Target</i>	<i>Achievements</i>
# migrants who have benefitted from reintegration projects	800 migrants benefitted from reintegration projects	805 migrants benefitted from reintegration projects
Comments/Observations		
No particular comments or observations. The target was attained.		

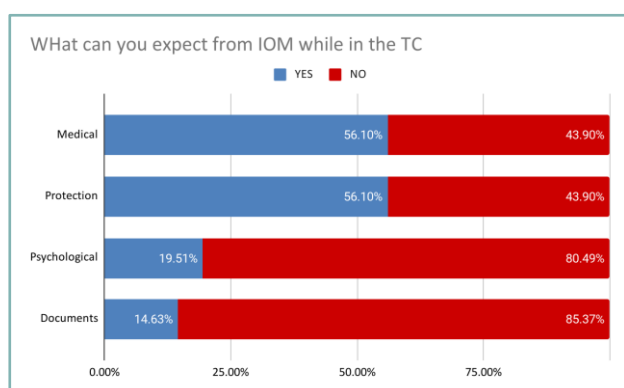
Output 2.1: Support the sustainable reintegration of Nigerien migrants into their community of origin in Niger		
<i>Indicators</i>	<i>Target</i>	<i>Achievements</i>
# of beneficiaries of reintegration projects (disaggregated by # of migrants, sex and type of projects)	600 beneficiaries of reintegration projects	605 Nigeriens benefitted from reintegration assistance <u>Sex:</u> 536 men / 69 women <u>Type of project:</u> Individual: 362 beneficiaries Collective: 49 beneficiaries Community: 194 beneficiaries
# of communities benefiting from reintegration projects	At least 25 communities benefiting from reintegration projects	25 communities benefited from reintegration projects.
Comments/Observations		
No particular comments or observations. The target was attained.		

Output 2.2: Support the sustainable reintegration of non- Nigerien migrants into their country of origin		
<i>Indicators</i>	<i>Target</i>	<i>Achievements</i>
# of beneficiaries of reintegration projects (disaggregated by # of migrants, sex and type of projects)	200 beneficiaries of reintegration projects	200 non-Nigerien migrants benefitted from reintegration assistance in their country of origin: Togo, Tchad, Sierra Leone, Central Africa Republic, Liberia, Burundi, Benin, Bangladesh, Angola <u>Sex:</u> 150 men /50 women <u>Type of projects:</u> Individual: 154 /Collective: 46
# of communities benefiting from reintegration projects	At least 15 communities benefiting from reintegration projects	10 communities
Comments/Observations		
No particular comments or observations. The target was attained. Communities benefiting from projects depend on migrants' decision about their reintegration assistance as this is a bottom-up approach.		

Output 2.3: Maintain medical assistance for migrant with specific medical needs once returned into their community of origin		
<i>Indicators</i>	<i>Target</i>	<i>Achievements</i>
# of migrants benefiting from continued medical assistance upon their return into their community of origin (disaggregated by sex)	90 migrants benefiting from continued medical assistance upon their return into their community of origin	129 migrants benefited from medical assistance once returned. Medical assistance is provided if the need is identified or requested by the migrant. <u>Sex:</u> 118 men / 11 women
Comments/Observations		
No particular comments or observations.		

AWARENESS & INFORMATION AS AID

Beneficiaries were asked if they received information by IOM staff when they came to the centres about the services IOM offers, their rights and feedback mechanisms. It was noticeable that in the ‘smaller’ centres in Niamey, the migrants seemed more aware of what IOM does and what services and assistance they can expect than in the TC in Agadez.



Overall, three quarters (75.61%) of the beneficiaries in all TCs combined found that they had enough information to access IOM's services, but when assessing if (mathematically) the difference between the centres in the capital and Agadez was significant (the Fisher exact test statistic value is 0.0001), since only 6.67% of the respondents in Niamey vs 72.73% in Agadez said they had not received enough information. The Fisher-test clearly indicates that, depending on the TC, the level of informedness is different.

When asked what services people knew they could access or request from IOM, about half of the respondents knew they had the right to protection (although when asked in more detail, they did only have a vague notion of what protection entails) and medical care.

The psychological service - in spite of the huge need - is not known enough and should be more visible and at the same time better promoted by the TC staff.

And whereas migrants are profiled by the IOM reception teams who identify any mental health condition of the migrant once they enter the TC and provide tailored psychological assistance when the need is identified, from the conversations the evaluator had with residents in the TCs, and who might not have exhibited a clearly identifiable need for psychological assistance - it is clear that promoting the existence of this service would be welcome.

IOM's assistance in providing travel documents is the least known, but fact that the migrant does not know that IOM facilitates the issuance of travel documents this does not affect the result of the return assistance apart from, maybe, the stress that migrant might feel for having to wait (longer) before his departure as having a valid travel document is necessary to travel.

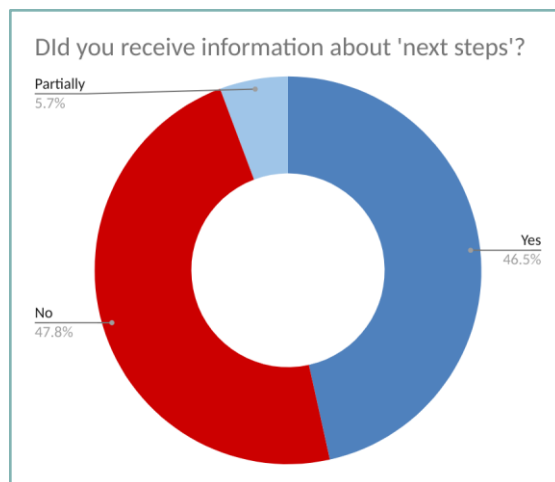
According to the IOM Satisfaction Survey, of the 40 people that found their way to the transit centres via community mobilisation staff, 39 (97.50%) said that referral positively influenced their decision. A further 167 people (63.67%) of those polled were referred by the IOM Orientation Bureaus.

This difference can be attributed to the size of the TC and the method used to communicate: given the large number (1000+ at any given time) in each of the centres in Agadez, Arlit and Assamaka, the managers rely partially on 'delegates' - community leaders for each national group - to relay information. These people - beneficiaries themselves - are not always fully invested in the role of information relays and do not always have sufficient knowledge themselves to effectively inform their peers. It needs to be noted that these delegates are chosen by the migrants themselves and IOM can not/does not intervene in this choice as the process is part of the empowerment of the migrants.

According to the IOM Satisfaction Survey, less than half of the respondents confirmed that they received information about the 'next steps' in their return process; and although the evaluator initially had the same impression when visiting the transit centres, that assessment changed somewhat when engaging in more in-depth conversations with the beneficiaries.

What emerges is that the expectations of the migrants do not always match the realities of the process, ie. that they either are unaware of the complexities and duration of preparing the return in the home country, the hurdles imposed by authorities or the sheer volume of returns, especially in (post-) COVID-19 times when almost all transport is by air.

It is the difference between expectations and reality that is also the biggest source of dissatisfaction among the residents of the different transit centres, not in the least because of the degree of uncertainty caused by COVID-19 and changed/changing political circumstances in some countries (notably Mali and Burkina Faso post-coup), or the long time it takes for the governments in the countries of origin that want to interview their migrants to set up the meetings.



RELEVANCE

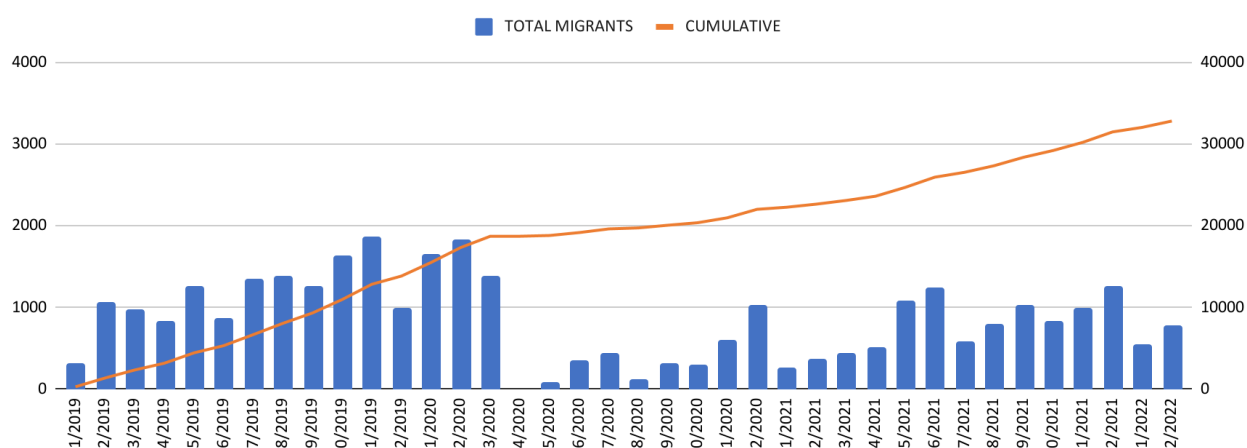


One of main migratory routes originating from Niger goes to Algeria, a phenomenon that the Governments of Algeria and Niger tried to address by an agreement from 2014 to repatriate Nigerien migrants from Algeria to Niger. At the same time, non-Nigerien migrants are also expelled from Algeria and driven into Niger, a phenomenon that has intensified since September 2017.

A similar phenomenon can be observed with migrants stranded in Libya - and migrants still seek to travel to and from the shores of the Mediterranean often find themselves in distress in Niger.

As the chart hereunder (please note the different scales between left and right axes) clearly shows the enduring need and relevance of a migration assistance project. The hiatus of April 2020 and relatively low numbers of departures pick up quickly and (although this graph is based on *departures from* rather than *arrivals at* the TCs, the cumulative departure line indicates that the trend does not abate, in spite of an average departure rate in post-COVID 19 times of 700 persons per month.

TOTAL MIGRANTS and CUMULATIVE



Hence, the persistence of this migratory phenomenon and the increased returns of migrants pose the problem of the material, financial and human resources for the Nigerien institutions in charge of managing migration.

PROTECTION

More than 90% of the IOM respondents say that the protection needs of the migrants in the transit centres are taken into account. A protection team is present in all transit centres (with the exception of Dirkou⁵) to identify and accompany people with protection needs.

The two people who disagree with this assertion, the lack of specific provisions for (the youngest) of the unaccompanied minors are inadequate - and the centres are not adapted to the needs of people with disabilities.

⁵ In Dirkou there is only one nurse, as the transit center is very small and migrants - mainly those saved by SAR missions - don't stay long. This is changing since Libya started expelling migrants last November 2021.

Another element that was raised is the complexity of (single) mothers with teenage male children. According to some of the women in the family centres, these boys are actually too old to stay with them in the same family centre but, as minors, they are too young for the men's centre.

It is interesting to see that almost all respondents put 'physical needs' - food and shelter - before stating the other elements of protection: medical, psychosocial or assistance with documents, yet *"... each migrant - without distinction - seems to enjoy his right to protection throughout the period of his assistance in the transit centre, until his or her return...."* - IOM Protection Assistant, Niamey.

"IOM in its protection work ensures that the rights of the people it assists are fully respected as well as the principles of protection through the creation of a protective environment: provision of 3 meals a day, security assured, listening by protection assistants, setting up recreational activities, coordination with other UN agencies for the referral of cases (asylum seekers)." - IOM Senior Protection Assistant, Niamey.

The physical protection of women and vulnerable categories (minors, elderly and persons with disabilities) is ensured through a separation into three different centres (in Niamey) or sections (in the other TCs): one for men, one for families and one for women and minors.

The manager of the centre in Dirkou sums up the different measures to meet the specific needs of women and girls put in place best: *"(i) separate accommodation dedicated to women, children and young girls; (ii) hygiene/toilet facilities separate from men's; (iii) hygiene and dignity kits distributed to women, girls and children, including appropriate clothing; iv) access to water and food rations for suitable hot meals; v) active and regular listening activities allowing women to express their unmet needs; vi) access to medical care and referral."*

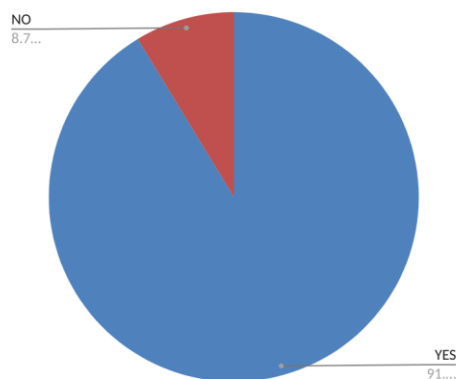
There are some initiatives to cater to the daily needs of minors such as visits to the swimming pool, cinema, sport and other activities, but reinforcement of the capacity of the staff and their material support could be reinforced: *"... there are specific programs for minors, however, I still find that educational activities (from kindergarten, kindergarten, primary, secondary, etc.) could be developed and implemented on a daily basis...."* - IOM Protection Officer, Niamey. The fact that an adapted approach - with meaningful and structured activities for minors is absolutely pertinent, in as long as these do not keep the minors longer in the transit centers than needed.

Activities for minors are at the moment more collective activities such as sports or cultural - but it is the evaluators opinion that an adapted, individual (and age-appropriate) approach could benefit the minors while in IOM's care and that such activities would also offer better opportunities for discerning potential psychosocial impacts of the migration on these minors.

It needs to be underlined that minors enjoy the protection under the auspices of the Juvenile Courts of Niger - and that their guardianship is entrusted to a juvenile judge.

The 'elderly' - defined under the IOM rules as persons over 50 years old - are automatically awarded protection status and as such benefit from adapted care, including medical and psychosocial assistance. However, there are no other specific provisions in place; the protection measures are case-based. *"...there aren't really any specially adapted procedures...but it is a good thing that there is, in the migrants' cultures in general, a respect for the elderly..."* - IOM Protection Officer, Niamey.

HAS IOM RESPONDED TO PROTECTION NEEDS IN THE MANAGEMENT OF TRANSIT CENTRES?



SEARCH AND RESCUE

In the vast - but forbidding - border zone between Niger and Algeria and Libya, search and rescue missions are more than relevant. As the head of the Niger Civil Protection in charge of search and rescue missions points out, *"...we have the capacity to conduct search and rescue missions, with the assistance of local scouts and the military, but the material and financial support of IOM is an indispensable part of what we (can) do..."*.

With two scheduled search-and-rescue missions for migrants stranded in the desert - and some ad-hoc ones as per the article below - the activity is not only about saving lives of people in peril, but *"... After the rescue, our colleagues from the mobile communication unit educate them on the dangers of the route across the desert, and about the possibilities for voluntary return assistance..."* - IOM Operations Officer, Niamey.

Indeed, IOM (Dirkou) has rescued *"...hundreds or even thousands of migrants in distress or stranded in the desert, by criss-crossing water points and migration corridors. The rescued migrants are satisfied with the direct assistance - water, food rations, transport and transfer to the nearest transit centre - and with the assistance they receive on arrival in the centres."* - IOM SAR Officer, Dirkou.

FROM THE MEDIA - 25 MIGRANTS, ABANDONED IN THE NIGER DESERT BY SMUGGLER, RESCUED⁶

Twenty-five Niger migrants, including women and children, abandoned by their driver, were rescued last week in the middle of the desert in northern Niger, the International Organisation for Migration (IOM) announced Tuesday.

The migrants were rescued "last weekend in the Sahara desert by (teams of) IOM and the Directorate of Civil Protection of Niger," said the UN agency in a Facebook post.

The survivors, whose destination was not specified, "remained without food and water for three days" before being found, said the IOM. Rescue operations for migrants are frequent in the hostile Nigerian desert, mainly in areas close to Libya. Many West African migrants try to cross through Libya to reach the Mediterranean coast and thus reach Europe.

Perilous route

They usually gather in Agadez, the large city in northern Niger, where there are networks of smugglers and "ghettos" (backyards) in which they are housed before crossing the desert. According to authorities in Agadez, vehicles carrying migrants often break down in the desert or smugglers get lost, abandoning their passengers for fear of checkpoints or military patrols. Some migrants die of dehydration.

In April 2020, in the midst of the Covid-19 pandemic, more than 250 stranded West African migrants were found near Madama, on Niger's border with Libya, abandoned by their smugglers, according to the IOM.

REINTEGRATION

The relevance of the reintegration process was not questioned by IOM staff - all interlocutors were clear that reintegration was relevant to a successful return project; yet the staff was also aware of the cost and the complexities of providing such interventions to all returnees.

On acceptance / taking the context of the host communities into account, that IOM staff readily point out the collaboration with IOM country Offices that reintegrate beneficiaries upon their return - yet some remarked that more

⁶ <https://www.africanews.com/2022/04/05/25-migrants-abandoned-in-the-niger-desert-by-smuggler-rescued/>

can be done and that in certain cases, the capacity of the IOM offices would benefit from additional means (human and financial resources) to ensure that reintegration projects can be accompanied in full - and perhaps longer.

Some IOM staff even pointed out that there are cases where - when the means are available - the beneficiaries (returning to countries outside Niger) are in some regards better off than the rest of the community in which they reintegrate as they have better access to health and other services.

Using data from the Economic reintegration survey of people that returned to Sierra Leone, all respondents felt that it was easy to “*contact IOM in the country*” and the “*reintegration assistance matched what was promised before returning*”. Almost all - 91% - received ‘in kind assistance; the other beneficiary participated only in vocational training. And although it took on average 20 weeks for beneficiaries to actually receive their assistance, only a fraction (9%) complained about that duration.

One of the consequences of the COVID-19 pandemic however was that (in Sierra Leone) lockdowns and other restrictions made doing business very difficult and that many of the assisted beneficiaries used all their earnings just to cover their own and their family’ needs. This situation had a negative impact on their business as they had to spend without really having a sustainable way to continue earning.

For reintegration of Nigerian citizens, a community-based approach, “... *The community context is taken into account through the involvement of vulnerable members of the host community in the community projects that are developed.*” - IOM Staff.

Particular attention is given to the reintegration plans developed with the beneficiaries so that the planned activities fit in with the social and cultural context of the beneficiary’s return community and an IOM Reintegration staff furthermore underlined that “... *a study is carried out before [IOM supports] any business activity in a municipality and all social strata have been associated and consulted...*” to avoid creating (economic) disparity and inequality but there are some suggestions - if not criticism: “...*IOM should review its reintegration strategy to make it more sustainable and contribute by prioritising community reintegration that benefits the whole community rather than an individual or family.*” - IOM Staff.

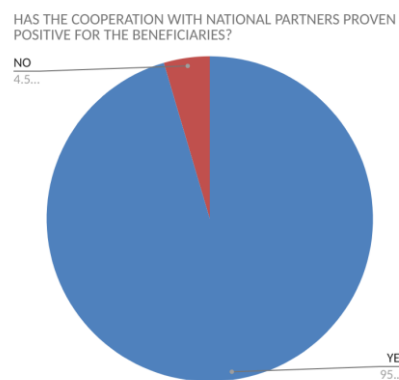
Two national NGOs - CADEL and AGIR PLUS - that implemented the training aspects of reintegration in Niger (Tahoua region) both agree that more people can and should be reached by reintegration projects that include both training and income-generation kits. Both NGOs worked with (a small number) of returnees and with the host community.

It is interesting to note that AGIR Plus noted the need to increase psychosocial follow-up and support for the returnees and CADEL noted that it would be beneficial to target women more for inclusion in the reintegration projects.

COHERENCE

Niger, a main migratory hub in West and Central Africa, is a country of origin, transit and destination for migration. Poverty, coupled with instability in the region, periodic drought and flooding, as well as the establishment of the Economic Community of West African States (ECOWAS) push many Nigeriens, and more broadly West and Central Africans, to seek better living conditions and better job opportunities through migration.

Niger recognizes the urgency and the challenges of being at the centre of major migration flows and over the past decade the country made significant efforts to counter the consequences of irregular migration through measures such as the Strategy to Combat Trafficking in Persons (2010), and the National



Plan to Combat Trafficking in Persons and Illicit Trafficking (2015). Nevertheless, Niger was not prepared to become the main transit country for irregular migration in the Sahel.

In addition, measures have been taken to strengthen Niger's institutional response strategy to the challenges and consequences of irregular migration and to strengthen the Government of Niger's capacity to manage migration, notably through the establishment of an Interministerial Consultation Framework on migration (CCM). The Interministerial Committee has also developed the Strategy to Combat Irregular Migration and its Action Plan. Led by the Ministry of the Interior, the main ministries involved in migration management issues have found a framework for exchange and implementation of the policies. This committee is financially and technically supported by IOM Niger.

Furthermore, The Government of Niger is supported by international partners in the management of migration and especially through OIM's Migration Resource and Response Mechanism (MRRM) established in 2015, of which the MIRAA-III project is part.

IOM Niger is also an active member of the Protection; Health and Water, Sanitation and Hygiene (WASH) clusters, which enable efficient coordination between the different stakeholders, identify possibilities for coordination and cooperation, and identify humanitarian needs in their respective sectors of intervention.

In collaboration with the MHA, IOM implements its Displacement Tracking Matrix (DTM) to track mobility trends of IDPs, locations, and assess basic humanitarian needs and vulnerabilities. The data collected informs evidence-based decisions for a targeted and effective response. Through its network of Flow Monitoring Points (FMPs) and Information Points (IPs), IOM is also collecting data on migratory patterns and monitors movement trends of IDPs and returnees in Niger, which inform the Government of Niger and partners on recent developments. IOM is also a member of the Information Management Working Group in which data is regularly shared to allow for evidence-based programming.

As such, the project is coherent with the national policies towards migration assistance and fits within the broader MRRM approach to migration IOM implements in Niger with funding from different partners and ultimately, through a coherent approach with its national partners, IOM should be able to hand over migration management to the national authorities (*see also 'Sustainability' hereafter*).

More than 95 percent of the IOM Staff judged the collaboration with the national structures beneficial for the migrants - a collaboration that manifested itself through joint initiatives and coordination with *"...the Ministry of Justice, the Ministry for the Protection of Children and the Advancement of Women, the Ministry of the Interior and Public Security, etc...."*

COORDINATION WITH OTHER ORGANISATIONS

IOM provides basic psychosocial and medical assistance in its transit centres as part of its work on Migrant Health and Psychosocial Support (MHPSS). IOM Niger's team of psychologists assess and treat each case individually in the centres. In case a migrant requires long-term assistance, or psychiatric assistance that cannot be provided by IOM's psychologists, the migrants can be referred to local partners.

The two main referral partners are COOPI (Italian Cooperation) and the National Mental Health Programme (PNSM, French acronym). Moreover, IOM is an active member of the MHPSS Working Group which is co-chaired by the PNSM and COOPI. Meetings are held at the national level (monthly meetings in Niamey) and at the regional level (needs-based in Arlit, Agadez due to limited availability) to update the members of the Working Group on the latest developments.

Through its engagement in the Working Groups and the direct psychosocial assistance provided to the migrants, IOM Niger has been able to identify the gaps and needs in terms of mental health and psychosocial support. The activities implemented under the present project aim to strengthen IOM's assistance, as well as increase its support to local

institutions along the main migration routes, namely in Assamaka, Arlit and Agadez. - Result: 657 migrants referred to local facilities (Target: At least 300 migrants referred to local facilities)

It is as such unfortunate that, because of lack of funding, this cooperation has ended and it is the evaluator's recommendation, given the clearly identified need for assistance to migrants with long-term psychological needs (trauma, troubles ...) to seek funding for continued assistance to this vulnerable segment of the migrant population. It also became apparent, through discussions with protection staff and the country representative of COOPI, that more means for continued assistance upon return would be highly recommendable.

IMPACT & EFFICIENCY

The IOM assistance cannot be seen as having an impact on migration flows - those are dependent on the conditions of individuals, the conditions in the countries of origin and the (often skewed) visions that migrants have of the opportunities abroad. There has also been discussion on whether it is possible to speak of 'impact' in the framework of this evaluation - or broader, this project - and although the classic definition⁷ of 'impact' fully, the word 'effect' is perhaps what has been intended in this chapter.

As the MIRAA-3 project is mainly driven by the 'intent' of the beneficiary to end their migration, the intervention is reactive more than proactive. Migrants approach (or are referred to) IOM for assistance; assistance that, once these migrants are in the care of IOM, has a (positive) effect on them. Not all that much 'impact' in the classic sense of the term and as such we believe the two go together well.

To interpret the clarification⁸ that the OECD gives on its website, we believe that the second part captures well what the evaluator tries to highlight in this section: "Impact addresses the ultimate significance and potentially transformative effects of the intervention. It seeks to identify social, environmental and economic effects of the intervention that are longer term or broader in scope than those already captured under the effectiveness criterion. Beyond the immediate results, this criterion seeks to capture the indirect, secondary and potential consequences of the intervention. It does so by examining the holistic and enduring changes in systems or norms, and potential effects on people's well-being, human rights, gender equality, and the environment.

It is in this light that the evaluator would like to cite one beneficiary from Sierra Leone: *"... I have never lived better than in the care of IOM. I eat three meals a day, I sleep in a safe place and people are helping me. Please do not send me back to my country. The situation I left has not changed since... I will only return to the same misery I knew before my adventure..."*

That is what qualifies, in the eyes of the evaluator, as 'significant effect on the well-being of the beneficiary'. And as such, it is possible to analyse some of the factors that had an effect on the stay of migrants in the centres.

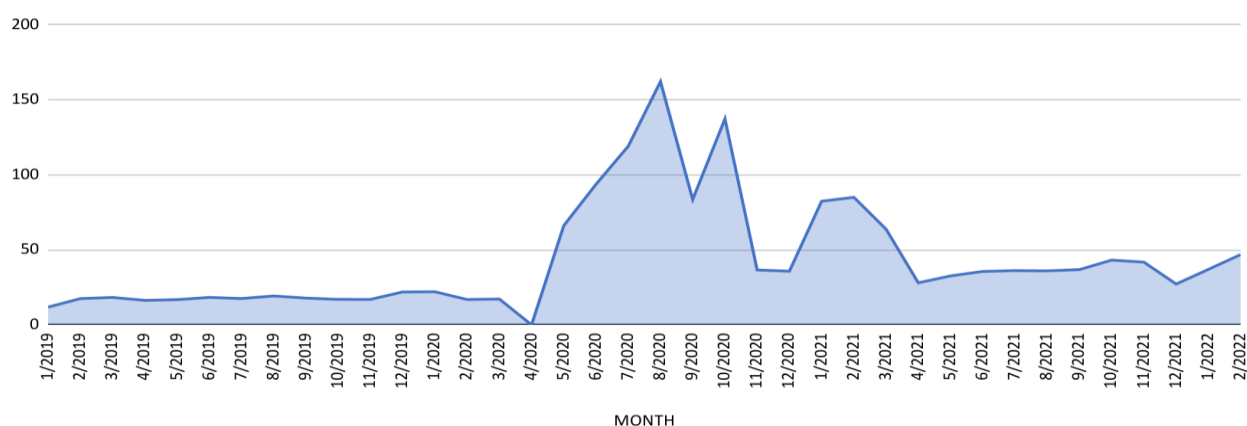
LENGTH OF STAY

Based on (anonymised) data from the profiling and assisted voluntary return databases, the evaluators analysed the average length of stay of the beneficiaries in the transit centres. The data are (unfortunately) not perfect and the pairing of data, based on the unique ID of the beneficiaries yielded only a match-rate of some 75 % (improved quality control of the data would be highly recommended) but with a dataset of almost 33,000 cases to work with the analysis hereafter will provide valuable insights.

⁷ The extent to which the intervention has generated or is expected to generate significant positive or negative, intended or unintended, higher-level effects.

⁸ <https://www.oecd.org/dac/evaluation/daccriteriaforevaluatingdevelopmentassistance.htm>

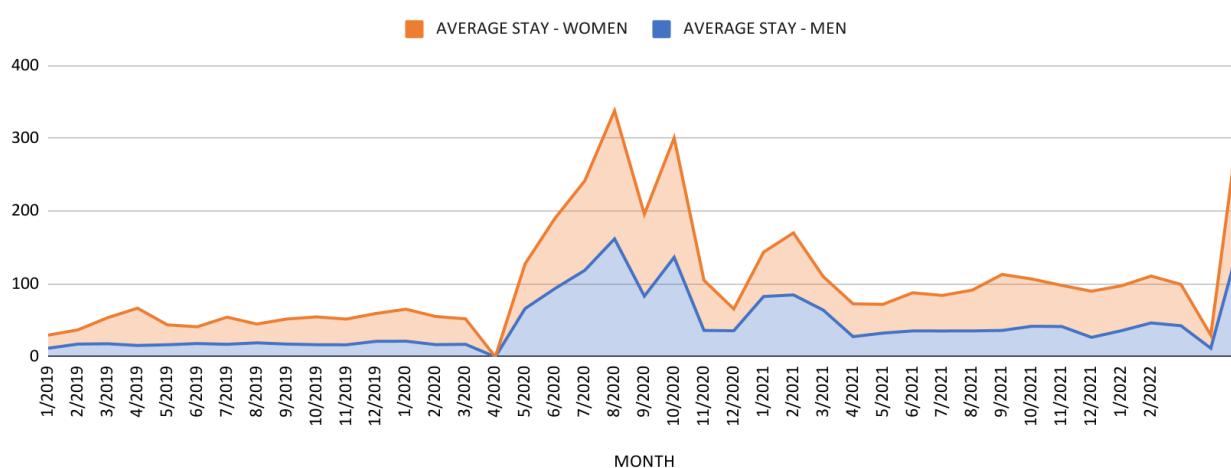
Average duration of stay in TCs



In 2019, the average stay of a beneficiary in the transit centres was 32 days - in 2020, that figure had climbed to a yearly average of 79 days, but as evidenced from the graph above, there was no movement at all in April 2020 when COVID-19 measures kicked in ... and as of May 2021, the average length of stay will climb into the triple digits for the next four months and a new (constant) peak is noticeable in the first three months of 2021. After that, the figures stabilise somewhat but remain double (on average 67 days) of what they were before April 2020.

Another factor - not COVID-19 related - that keeps people longer in the TCs is when **beneficiaries who are followed by the medical team** take more time for stabilisation, or when, if longer-term follow-up is needed, the coordination with the country of origin or with transport companies take time. Some patients whose follow-up is not possible in the country of origin, and if the patient does not have family members at the place of arrival (capital, normally), also stay longer as it takes time for the family and the patient to decide on the modalities of return, and to overcome any challenges related to continuity of care.

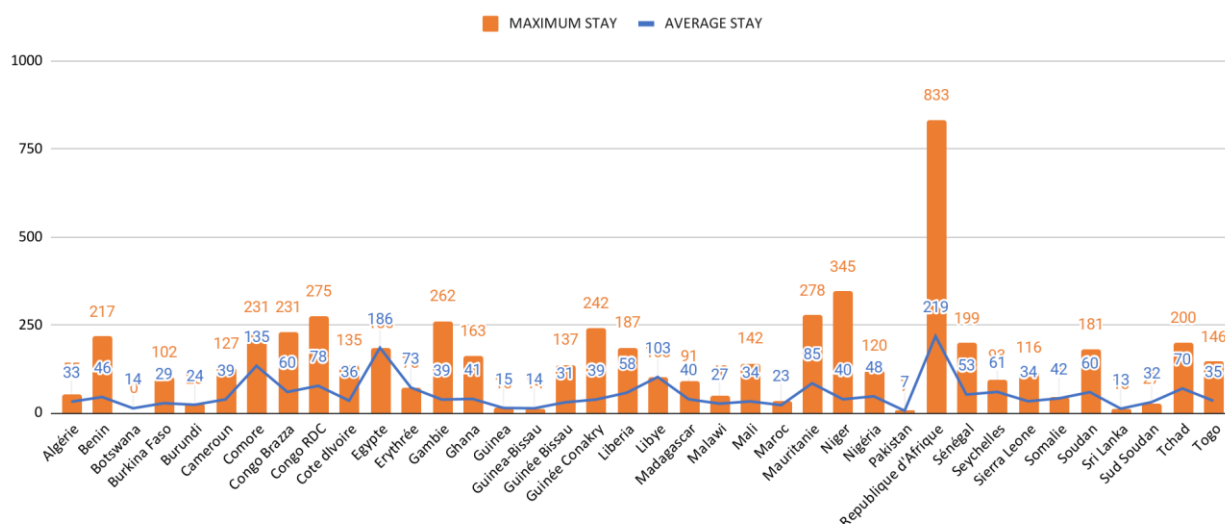
Average duration of stay in TCs by Gender



It is interesting to note the **gender difference in length of stay**: women stay on average longer than men do in the centres: over the entire period 01/2019 to 02/2022, men stayed on average 43 days vs 57 days for women. A further trend analysis however can only discern a (very) weak correlation between duration of stay and gender. One factor that does slow down the return of women is IOM's to designate *every* woman by definition as a (*vulnerable*) *protection case*, irrespective of the personal history of the woman.

The minimum average stay for men was 12 days vs 18 for women and the maximum average stay for men was 162 days vs 176 days for women. The top ten of 'long stay residents' of the TCs however is 90% male, with the longest stays including seven (7) men from the Central African Republic, and one (1) man from Mali and one (1) from Liberia; the longest staying woman (546 days) hails from Senegal; the longest-staying man has been in IOM's care for 833 days.

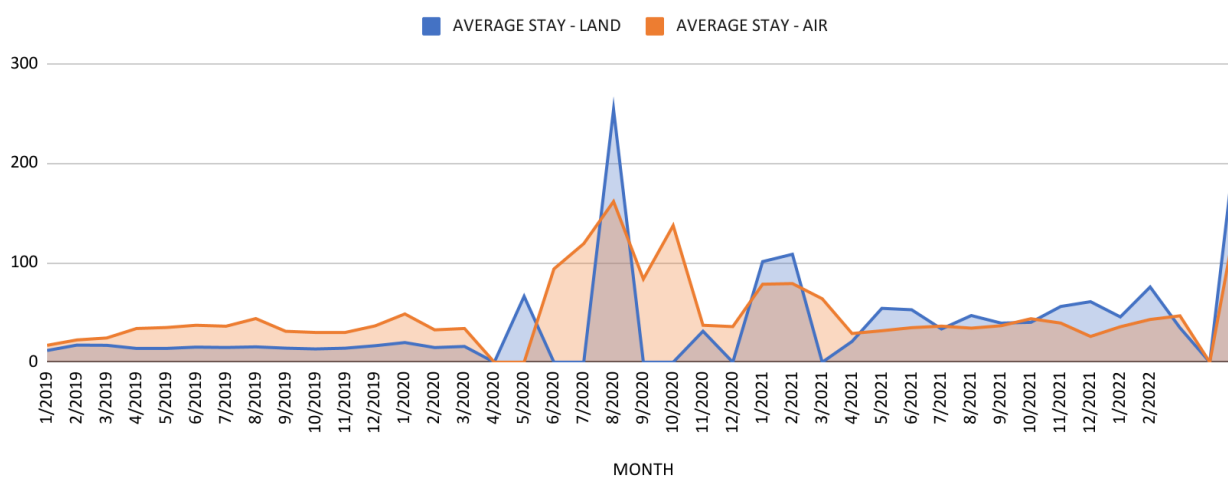
Average and maximum length of stay by country of origin



TRANSPORT

The **means of transport** also has an influence on the length of stay in the transit centres - overall, movement by land keeps people for 35 days in a transit centre vs 47 days for movement by air. On average, when people are slotted to travel by air, they stay 20% longer in the transit centres.

Average duration of stay in TCs by mode of transport

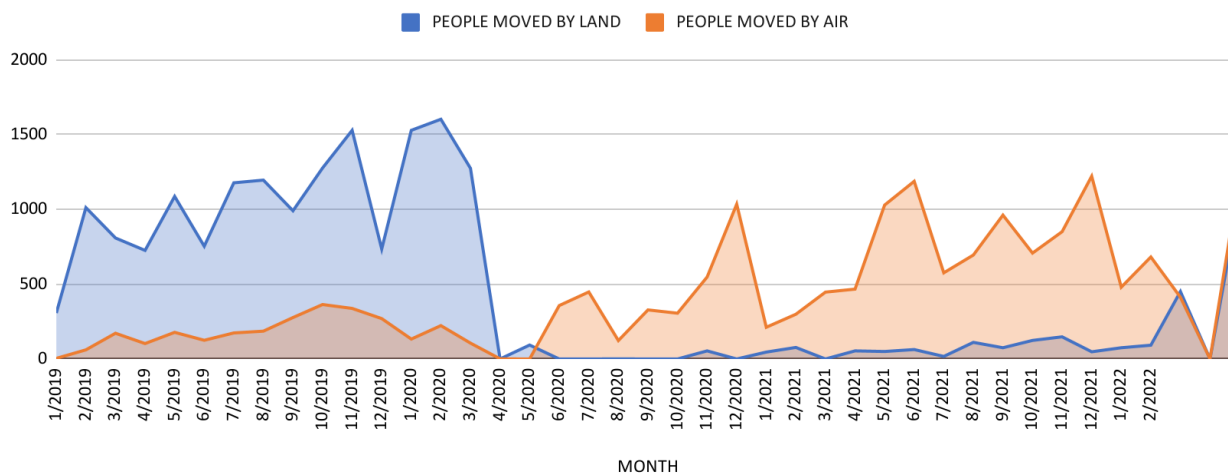


COVID-19 however (as of April 2020) has shown a complete reversal of the numbers of people returned by mode of transport.

Until April 2020, IOM moved on average slightly over 1000 people per month over land vs 180 by air; an average of 96.10% of beneficiaries were moved over land. After April 2020, the average of overland transport dropped to less than

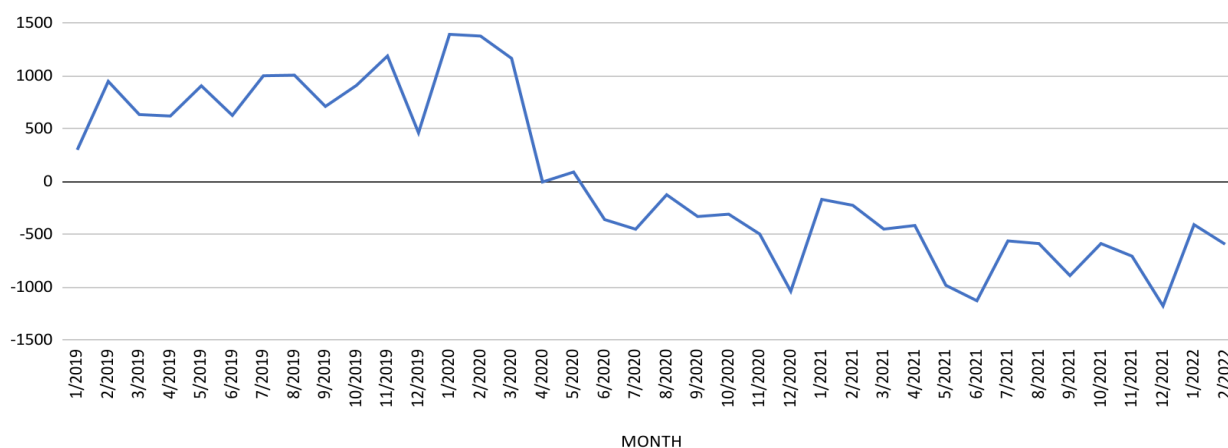
5% of the pre-pandemic level to 49 people per month whereas returns via air boomed to an average of 654 persons per month (or 89.10%), with peaks of more than 1200 beneficiaries returned by air in December 2020.

Average number of people returned by mode of transport



The graph hereunder shows the relative difference per month between people moved over land vs people moved by air. April 2020 was clearly a turning point in the operations and had a huge impact on the cost of the project.

Difference in number of people moved by land vs by air

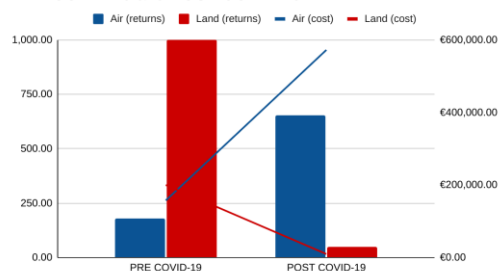


COST OF ACCOMMODATION AND RETURN

The estimated cost per migrant in the transit centres is around 15.00 euro per day, when only counting the direct assistance, housing, medical assistance. In some cases, this cost is higher. With covid, the average cost has increased by a factor of three or more: 12 days pre COVID-19 vs 43 days delays post COVID-19 on average for men (180 euro vs 675 euro) and 18 days vs 57 days on average for women (270 euro vs 855 euro).

The cost to return a migrant by road - bus - is on average 200.00 euro per migrant, but as the graph above shows clearly, since April 2020 movements by road have, with the notable

PRE COVID-19 and POST COVID-19



exceptions of Benin and Nigeria, come to a full stop and have been replaced with returns by air, at an average cost of 875.00 euro per migrant.

COVID-19 AS A FACTOR

The change that COVID-19 brought about in both length of stay and the mode of transport has of course a huge impact on the means needed to sustain the IOM operations. The measures put in place by both the Government of Niger (GoN) and the countries of return had (especially in the first months) a serious impact on operations: lock-downs and the prohibition of public gatherings, limits on movement, border closures and thus restrictions on international travel all impacted on the project's ability to continue working as before - as already indicated above.

"These measures have greatly slowed down our activities in the transit centre and have slowed down the entire process of returning migrants to their country ..." IOM Protection Assistant in Agadez

A psycho-social assistant in Niamey also underscored that *"... stress increased and the (possibilities) for stress-reducing activities were no longer available..."*

IOM had changed some of its everyday procedures - such as working with smaller groups and insisting on safe distancing, mask wearing etc - and reinforced sensibilisation and training on personal hygiene measures such as handwashing in the TCs which might have contributed to a limited spread of the virus.

At the same time, the Government of Niger's decree that COVID-19 patients should self-isolate required finding adequate accommodation for migrants that tested positive; for those that needed hospitalisations, a solution was needed too. Additional Transit Centres in Niamey and Agadez were identified, but the GoN insisted that the rent, rehabilitation and operation of these facilities be financed by IOM. And that IOM should provide hospitalisation or care facilities for those COVID-19 patients, adding an additional (unforeseeable) cost to the project. And although eventually the Niger Health Authorities provided the hospitalisation component, the additional isolation facilities remain operational until this day - sometimes empty.

The CERMES⁹ was however grateful for the investment that IOM made in purchasing the laboratory equipment for PCR testing in Agadez, as this not only benefited IOM in light of the requirements to test before returning people to their country of origin, but also increased the local capacity. Prior to IOM's assistance, (limited) testing capacity existed only in the capital Niamey.

BENEFICIARY SATISFACTION

In both the evaluator's survey as in the internal survey, beneficiaries state clearly that they are satisfied with the way in which they have been treated while under IOM's care. As already stated above, the main point of dissatisfaction seems to be the 'length of stay' in the transit centres ... and the food: *"...only nigerien food..."* or *"...never a dish from our country..."* were 'complaints' that were made often. Never a complaint however about the quantity: *"...in my country I NEVER had three meals a day. I lived on a 0-1-0 or a 0-0-1 regime (one meal at noon or in the evening) in Sierra Leone..."* or the quality: *"...the food is good; meat, rice, vegetables..."*.

The NFI kits that beneficiaries receive are also 'complaint-free' and equally important, the women all state that the items they receive are appropriate and correspond to their needs as women. Only a few beneficiaries would like to see additional items in the kit they receive - pocket money being mentioned by three persons - and personal hygiene items (lip balm, clothes, slippers) by others. The remaining wishes were for more of the items that are already in the kit: soap, razors or body lotion.

⁹ CERMES: Centre de Recherche Médicale et Scientifique, member of the Pasteur Network

The evaluator noticed however one minor issue (mainly in the dormitories for minors) in the Agadez transit centre: the mattresses were used up and the protective tissue was torn; they looked dirty and unhealthy and should be replaced. It is the evaluator's opinion that the mattresses used in Niamey - covered with plastified canvas - would be a better solution as they are easier to clean and disinfect.

Some of the beneficiaries (in Agadez) also complained of lice and bedbugs - difficult to avoid at the best of times, in spite of measures taken to disinfect the dormitories and the personal hygiene items distributed - but once more providing mattresses that are easy to maintain, as well as insisting more on the migrant's involvement in cleaning the dormitories (there is a big difference between rooms) would be beneficial to all.

IOM STAFF ON IMPACT & EFFICIENCY

IOM staff in general is proud of the work they accomplished and 100% of the respondents are convinced that the organisation and the project helped the migrants to return in a dignified way. As described above, the COVID-19 pandemic and the different measures taken in Niger and the countries of origin, about a quarter of the staff believe that the process was not always completed '*...in good time...*' but the question remains what, given the circumstances, could have been changed by the project.

One of the main issues that affect the efficiency of the return process, according to the staff, is "*...obtaining travel documents for certain nationalities...*" while others point out the "*... limited reception capacity in the countries of origin, insecurity on the roads with neighbouring countries ...*".

IMPACT ON IOM STAFF

One form of impact that is sometimes overlooked is the *impact of a project on its implementing staff* - especially the psychological impact of dealing with large numbers of vulnerable people, people with psychological and other traumas.

In all four Transit Centres that the team evaluated, the managers as well as the protection staff underlined - emphasised even - how being confronted with the life stories of the migrants is taking a toll on them and that - especially over time - the weight of caring for others is beginning to leave its marks on their personal lives.

A psychologist in one TC, as well as three of the four directors, have all indicated that they would like/need regular psychological counselling as over time their own resilience is eroding. Even though none of the respondents could point to any particular effects beyond '*...being constantly confronted with misery...*' or '*...thinking of individual stories, even during private time ...*' all were adamant that their capacity to care and perform was diminishing or becoming more difficult.

SUSTAINABILITY

The sustainability of a project like MIRAA III can only be defined as '*the capacity of the Government of Niger to provide similar levels of assistance and care to migrants*' irrespective of the sources of funding. Whereas the majority (80%) of the IOM interlocutors said that an exit-strategy had been developed (and the 20% remaining would not necessarily have been implicated at the strategic level, some of the interlocutors warned that, in spite of involving local actors throughout the project, the Government of Niger would not (yet) be ready to take on the project in its current form.

Although the institutions of the government are valuable partners, the institutional (human) capacity for migration management remains weak and state-initiated or state-driven are nearly non-existent. In addition, as underscored in an evaluation of the DANIDA-funded support to migration management capacity building in Niger points out: "*...the*

"institutional" difficulties are also linked to a lack of clarification of the roles and missions of certain institutions and the difficulties of functioning."¹⁰

The sheer number and warren of institutions¹¹ involved in migration management in Niger, as well as the overall cost to organise, finance and coordinate the intake, registration, care and protection and ultimately repatriation of migrants are (still) beyond the capacity of the Government of Niger. This was also pointed out by the Director General for Migration of the MECMP, when asked (hypothetically) whether the GoN would be in a position to manage migration, including the search and rescue missions and transit centre management, the answer was an unequivocal 'no' for reasons of capacities, finances and priorities. Among the reasons cited were the ongoing security situation in the country and the financial means.

If, hypothetically, there were substantial financial support to the budget, *"... the state could manage, but not with the same quality or volume of migrants assisted. Niger has gained, also by working with IOM in capacity but the number of staff that could manage migration remains low, and the material means lack."*

This view is very much in line with what other state actors - such as health authorities - have mentioned, each within their own specific domain. But once more the national partners point out the benefits that working alongside has brought their institutions and Niger. A good example is how the collaboration on COVID-19 detection in the transit centres has led to substantial investments by IOM in the creation of a testing facility in the state hospital in Agadez (the second such lab in the country!), which not only benefited IOM in testing migrants that needed to travel but that has also increased Niger's overall capacity.

What is an even more worrying possibility that emerged at the time of the evaluation, are the potential consequences of the conflict in Ukraine and the ensuing global increases in the cost of petroleum (derivatives), fertilisers and the expected severe disturbances in basic commodities like wheat and sunflower oil - the latter two staples in much of North and Sub-Saharan Africa. In a short period of time, the war in Ukraine has caused food shortages and a rise in food prices on international markets: wheat prices soared 50% in the past month to the highest level in 14 years. In Niger too, prices of cooking oil are on the rise.

If shortages and these price hikes cause unrest in (North) Africa, migrants will be affected and the likelihood of accelerated expulsions from countries like Algeria, Libya (and possibly Tunisia) will increase - putting an even greater burden on IOM and the Government of Niger.

GENDER, INCLUSIVITY AND DO NO HARM

Direct observations in the transit centres - which are (in Niamey) differentiated into 3 categories: men, families & (unaccompanied) minors and women with children - confirm that gender-specific needs are taken into account. The women that the evaluators spoke to all confirmed as well that *"...the accommodation takes your specific needs as a woman into account"* and that the basic necessities kit - that includes specific items for women's hygiene - is tailored to their needs.

¹⁰ Mid-term Internal Evaluation of the project: "Appui au renforcement de la gestion de la Migration au Niger" (Strengthening Migration Management in Niger), IOM Regional Office for West and Central Africa, March 2019.

¹¹ the Ministry of Interior (Migration Directorate), The Framework for Consultation on Migration (CCM), the National Agency for Combating Trafficking in Persons and Migrant Trafficking (ANLTP / TIM), the Ministry of Justice (Juvenile judge), the National Institute of Statistics (INS), the Directorate of Territorial Surveillance (DST) and the Ombudsman (Mediator of the Republic).

For pregnant women, prenatal care is provided and women that are due are provided with both medical care in a local hospital as well as with a specific kit with the first necessities (diapers, hygiene products and other items).

As to the needs of minors - and small babies - adapted toys, activities (including educational activities) are provided in the centres for women and the family centres.

GENDER RESPONSIVENESS INDICATORS & REPORTING

“Gender responsiveness refers to outcomes that reflect an understanding of gender roles and inequalities and encourage equal participation, including equal and fair distribution of benefits”¹²

In the (summary) data on the number of migrants in the transit centres made available to the evaluator, there was no gender-disaggregated (or, for that matter, other categories) data - even though that data is routinely available in the MARS database. And the importance of such basic data for project management is clear. It also needs to be underlined that gender-responsive reporting should go beyond percentages and a solid gender-analysis, based on specific indicators for gender should be included in the operational data.

Gender indicators can be based on:

- Quantitative, sex-disaggregated statistical data - facts and figures
- Qualitative changes – for example, judgements and feelings, or perception

The **quantitative data** that the evaluator felt were not readily available in ‘mainstream reports’ - although these data are available in the different databases - were sex-disaggregated data, by country of origin, age group etc - which would help, paired with other quantifiable indicators such as marital status, number of children, education level etc ... would further the SDG as emphasized by SDG 17.18 – which aims to *“increase significantly the availability of high-quality, timely and reliable data disaggregated by income, gender, age, race, ethnicity, migratory status, disability, geographic location and other characteristics relevant in national contexts”¹³*

The **qualitative data** that would better illustrate how the project responds to the specific needs of women would require polling beneficiaries as to their perception, feeling or satisfaction with services from a gender-centred point of view. This would include (open-ended) questions on the appropriateness of a service (eg. accommodation in a transit centre) or a benefit (eg. the NFI kits) from a woman’s point of view: do these items or services correspond to their specific needs as a woman.

It needs to be noted that this approach to **data collection and presentation is also missing for vulnerable groups** such as the elderly, people with disabilities, the ill or infirm, or unaccompanied minors.

As to the specific **needs of women in the transit centres**, in Niamey there is a specific centre for women and their children, whereas in the other centers a separate space is foreseen; in addition, and within the limits of the mandate *“... IOM has created a dedicated team to meet the needs of women, specialised in among other issues in dealing with victims of trafficking and survivors of GBV... to listen to the women and to respond to their specific needs.”* - IOM Protection assistant in Niamey.

During the sensibilisation activities, the gender approach seems to be limited mostly to engaging women as communicators for women; awareness-raising activities with minors are carried out through recreational activities and shows. However, from the answers we received from IOM staff, there doesn’t seem to be specific content or messages for vulnerable categories, only slightly adapted communication methods.

¹² UNDP, & Murray, U. (2019). Gender responsive indicators -. UNDP.

¹³ Hennebry, J., H. KC and K. Williams, 2021. Gender and Migration Data: A Guide for Evidence-based, Gender-responsive Migration Governance. International Organization for Migration (IOM). Geneva.

As mentioned above, the NFI kits that all beneficiaries receive are specific to women and there is an overall satisfaction with the specific items that cater to the needs of women; what is more, there is a **specific package for pregnant women** that are due. A suitcase with items for the mother and the newborn is made ready in advance and is part of the standard package.

In addition, there are also “...*various recreational activities and learning workshops that will allow women to have an income-generating activity once they return to their country of origin...*” - IOM Psychosocial Assistant in Niamey. When asked however how **reintegration assistance** was specifically tailored to the needs of women, IOM staff mentioned the free choice of women in the professional training and the income generation activities they prefer - but there was no specific indication of a gender-specific approach being incorporated in the reintegration approach.

Overall however, women and vulnerable persons benefit from the services of the IOM protection unit and receive specific consideration in all steps of the process. Catering to specific needs - and the possible needs are endless - is done on an adhoc basis with the best interest of the beneficiaries at heart.

VISIBILITY

Although not specifically mentioned in the project proposal, the Transit Centres all have a plaque identifying the Ministry of Foreign Affairs of the Kingdom of the Netherlands.



CONCLUSIONS & RECOMMENDATIONS

CONCLUSIONS

As an overall conclusion, MIRAA-III succeeded (and in some cases even surpassed) what it set out to do. By providing assistance across the whole spectrum of migration management - awareness-raising, search and rescue, protection (including providing accommodation, food, NFIs etc), return assistance and reintegration has been relevant, effective and has created an impact on the lives of individuals. Overall, the staff is competent and perhaps even more importantly, extremely motivated and dedicated to the work they do and to 'their' beneficiaries.

It also needs to be underlined that MIRAA-III was resilient enough to continue to provide quality services and to adapt to new realities during COVID-19 and was able to adapt its procedures and operations in spite of additional hurdles to the return process (or rather the timeline for returns) and new requirements such as changes to the mode of transport and the additional cost this entailed.

The conclusions hereunder provide a brief overview of the main observations of the evaluator, rephrasing and grouping some of the issues that have been raised in the Findings section above.

1 - COMMUNICATION (INFORMATION AS AID)

Communication with beneficiaries in bigger centres, especially on the services and protection IOM offers, is either not always relayed when working with 'national delegates' and some crucial information, such as on the possibilities to seek psychological consultations, are not always fully transmitted to all beneficiaries in the transit centres.

Part of the problem could also be the fact that not all beneficiaries are well-versed in French or English - and that even the delegates do not always master the national languages of their compatriots.

Improving the communication (channels/means) would address two issues that have been observed during the evaluation: (1) beneficiaries are unaware of some of the services they can access when in IOM's care and (2) a lack of comprehension of the next steps (and their duration) which in turn leads to frustration, and as in the case of Assamaka and Arlit TCs, violence towards centre staff.

2 - RELEVANCE

Given the migration patterns that remain unaltered for more than a decade, the project was relevant since its inception and remains so until this day. Migration flows do not seem to have stopped and people continue to leave their countries of origin at the same pace as before the pandemic. Consequently, returns - forced or voluntarily - from Libya and Algeria are likely to continue.

And given regional and global developments that are emerging - such as political instability and a war in UKraine - with resulting food shortages and price hikes likely to cause unrest in (North) Africa, migrants will be affected and the likelihood of accelerated expulsions from countries like Algeria, Libya (and possibly Tunisia) will increase - putting an even greater burden on IOM and the Government of Niger.

3 - COHERENCE

In light of the relevancy of the project to this day, the partnership of IOM with the Government of Niger and the coherence with national policies is positive. IOM's role in the overall humanitarian response in Niger, and its preeminent role in migration management through the Migration Resource and Response Mechanism (MRRM) is a benefit to the entire process; the coherence of IOM's work with national policies can only continue to benefit the migrants and the Government of Niger.

4 - SUSTAINABILITY

In spite of the high degree of relevance of the MIRAA-III project, and after years of coherent support of IOM to the national policies and institutions, including capacity-building initiatives for all national actors involved in migration management, sustainability and full local ownership of the process is still far off.

All national and regional/local stakeholders - beginning with the DG for Migration - have repeatedly underlined that the Government of Niger is not in a position to manage the current migration flows with the same degree of assistance, protection and sustained support to the beneficiaries as it currently does with the assistance and financing of IOM and its partners.

5 - REINTEGRATION

The majority of the beneficiaries of reintegration assistance contacted by the evaluation team by telephone - as was also underlined in the internal evaluation in Sierra Leone and Liberia - were difficult to reach once the assistance was completed, making meaningful follow-up difficult. Those beneficiaries that were contacted however all indicated that the return process - starting from their arrival in their home country through the training and the reception of income generation kits, was good, but lengthy.

Both project staff and beneficiaries have underlined the need to increase the reintegration assistance, including professional training and income generation activities, to ensure that the return has more likelihood of being successful. At the same time, literature and some of the feedback from project reports and staff have indicated that such reintegration support should benefit not only the individual beneficiary but should overall aim at also supporting the community.

At the same time, project staff interviewed for the evaluation indicated that such reintegration support should benefit not only the individual beneficiary but should overall aim at also supporting the community. This observation is also supported by the analysis of secondary data such as project reports and literature.

From the M&E reports from Liberia and Sierra Leone transpires that the beneficiaries are in general satisfied with the assistance provided - from the moment of arrival until the reception of their reintegration assistance - but it is also clear that more resources allotted under the project to the IOM in the reception countries - including training on case management would be beneficial.

Idem for the possibility to monitor and to evaluate the impact, effectiveness, and transformative effects of reintegration assistance. And whereas the evaluation was too early after the start of the reintegration assistance to discern an impact, the evaluator believes that with the current systems in place (or rather the lack thereof) there is no reliable way to measure or to evaluate the outcomes of the reintegration process, let alone the possibility to assess whether such assistance would be a deterrent for future migrations. The fact that IOM has started setting up a network of project assistants might be a tool to start monitoring impacts and effects in the mid- to long term.

6 - GENDER & INCLUSIVENESS

On **gender and inclusiveness**, gender is reported - and mentioned in the project staff's responses - and was expressed mainly as either the fact that women were taken into account or as numbers of women participating in the project but gender responsiveness should go beyond percentages. A solid gender analysis is required to make the assistance (and where necessary, the protection) more gender-responsive and thus more specific indicators should be included.

All data on migrants (in the transit centres) should as a matter of routine be presented gender-disaggregated (or, for that matter, other categories of vulnerability). The amount of data in the profiling database is a treasure trove that should be better exploited to analyse gender indicators and this analysis can be based on:

- Quantitative, sex-disaggregated statistical data - facts and figures
- Qualitative changes – for example, judgements and feelings, or perception

It needs to be noted that this approach to data collection and presentation is also missing for vulnerable groups such as the elderly, people with disabilities, the ill or infirm, or unaccompanied minors.

From a **protection** and **gender-equality** point of view, blanket labelling women, just based on their gender is not only a form of gender discrimination and stereotyping, but also risks unnecessary extending the stay of women in the transit centres.

7 - STAFF SUPPORT

Not surprising in hindsight, the staff - no matter the degree of direct exposure they have to migrants and their stories - all indicated that they are (adversely) affected by being daily exposed to what in most cases can only be seen as the hard, ugly reality of life as a migrant: abuse of all forms, suffering, exploitation, and often return to the same difficult conditions that the migrants tried to flee from.

The psychological impact on the staff is affecting their wellbeing, their performance and even their resilience to continuously cope with the enormous caseloads they are dealing with and all have expressed the need for psychological counselling for them as well.

A second issue that was highlighted is the need for professionalisation and capacity building of the staff that work with young children and minors in the transit centres and to develop both structured, age-appropriate activities (within the scope and goals of the programme, and without prolonging the stay of the minor migrants in the TCs) and to help the staff in identifying possible psychological issues in children and adolescents so that an early referral to the psychosocial team can be made.

8 - DATA COLLECTION AND MONITORING

Data collection is happening but the process seems at times haphazard and the data are not sufficiently correlated and linked across the different databases. Furthermore, it seems that only a very minor portion of the data is actually used to monitor the project during its lifetime and that there is no in-depth analysis, even though the data collected would easily allow such analysis.

At a time when some of the data collection tools (i.e. MARS) are being reviewed and updated, the moment is right to critically rethink the questions asked and the 'exploitability' of the data.

RECOMMENDATIONS

The overall recommendation (to donors) of the evaluator is to continue the work that was started under MIRAA-III given the successful implementation of the project and the continuing need, paired with the self-assessed lack of capacity and resources of the Government of Niger to provide these services without the assistance and funding of IOM.

Nevertheless, there are a few recommendations that could improve the project and MRRM as a whole:

A - COMMUNICATION

1. Communication with beneficiaries should be reinforced to ensure that all beneficiaries have a clear and unambiguous understanding of (a) their rights and obligations and (b) the process of return and the anticipated duration. This will reduce tensions and will help manage expectations. This can be improved through:
 - a. The development of audiovisual communication tools - video clips with infographics - about the steps in the return process, the services that beneficiaries can access while in the transit centres and the rules that are applied.
 - b. Such videos could be run in loops on a screen in a central location so that the information is available at all times.
 - c. The videos should be translated with voice-over (and subtitles) in at least French, English, Arabic and Hausa - more national languages could be added if the need is identified.
 - d. Reinforce the training for the security staff on what services - and where these are provided - in the transit centres. These guards are very often more in contact with the beneficiaries than IOM staff is.

B - REINTEGRATION SUPPORT IN COUNTRY OF ORIGIN

2. Explore the possibilities to ensure reintegration support in each of the countries of origin - which will include an appeal to donors to fund both the support (training, income generation kits ...) as well as dedicated IOM staff in these countries and the means to support the reintegration assistance.
3. Tie in the reintegration assistance - wherever possible - with community stabilisation projects in the countries of origin.
4. Provide more psychosocial support to returnees and the host communities - including through partnerships with organisations like COOPI who are present in the majority of the reintegration countries.
5. Ensure that - in 3rd countries - IOM staff have the human and material/financial resources to ensure that regular monitoring and evaluation of the reintegration process can take place.
6. Ensure that databases of returnees - with contact details - are kept up-to-date so that contacting people for monitoring or evaluation purposes is possible.

C - STAFF SUPPORT

7. Regular psychological counselling for staff, provided by outside experts that are not linked to the project (and ideally not part of the international community in Niger) would be highly recommended, given the degree of daily exposure to what can only be described as 'human misery'.
8. Develop structured and age-appropriate (educational) activities for young children (0-12) and minors (12-18)
9. Provide training for 'teaching staff' on how to recognise potential psychological troubles in children and minors and develop protocols for referral to the psychosocial staff.

D - GENDER AND INCLUSION

10. Do not longer use gender as a 'blanket-justification' for protection, i.e. being a woman does not automatically imply specific vulnerabilities.
11. Use the data that are collected - and which include gender, age and disability data - to disaggregate information in all reporting.
12. Ensure that when making comparisons across groups (ie. men/women) the correct analysis methods are used to ensure that conclusions are valid.

E - DATA COLLECTION, ANALYSIS & PROJECT MONITORING

13. Disaggregate monthly beneficiary data into different 'vulnerability categories' - age, disability, unaccompanied minors - and present these data by gender.
14. Re-evaluate the data that is collected in light of the analysis that is needed by IOM to carry out its mandate; and either remove items (questions) from questionnaires if they are not used later on or - which would be the preferred option - reinforce the data analysis capacity of the staff to glean valuable insights into the overall migration process.
15. Ensure that data collected with one data collection tool is compatible with the data collected through another tool.
16. Use the profiling data to pre-populate subsequent data collection tools to ensure that data collected at different points in time can be matched and to reduce the possibility of errors.
17. Perform regular data-quality checks on the data collected and train and ensure that staff take responsibility for correct data entry.
18. Work with a social scientist - with a good understanding of data and research methodology - to improve existing data collection tools, including the questionnaires.
19. Work with a social scientist - with a good understanding of data and research methodology - to develop objective, comparable indicators that go beyond mere quantities and percentages.
20. Work with a social scientist - with a good understanding of data and research methodology - to improve analyse and exploit existing data to provide further insights into the complexity of migration.
21. Develop dashboards that, drawing on the various databases, can provide an immediate appreciation of the indicators to enhance the reactivity of the project (management).

F - COOPERATION WITH PARTNERS

22. Given the clearly identified need for assistance to migrants with long-term psychological needs (trauma, troubles ...) it would be recommended to seek funding for continued assistance to this vulnerable segment of the migrant population, both in-country and for continued assistance upon return.

ANNEXES TO THE FINAL EVALUATION REPORT

MIGRANTS RESCUE AND ASSISTANCE IN AGADEZ REGION (MIRAA) – PHASE III



for

ANNEX 1 - TERMS OF REFERENCES

1. Evaluation context

Niger, main migratory hub in West and Central Africa, is a country of origin, transit and destination for migration. Poverty, coupled with instability in the region, periodic drought and flooding, as well as the establishment of the Economic Community of West African States (ECOWAS) push many Nigeriens, and more broadly West and Central Africans, to seek better living conditions and better job opportunities through migration. Nigerien migrants or migrants transiting through Niger mainly attempt to reach Algeria or Libya.

One of main migratory routes originating from Niger goes to Algeria, a phenomenon that the Governments of Algeria and Niger tried to address by signing an agreement in December 2014 to repatriate Nigerien migrants from Algeria to Niger. This repatriation is organised by the Algerian authorities, with migrants being taken through Tamanrasset (Algeria) and into Niger through Assamaka, Arlit and finally Agadez. From Agadez, the Government of Niger repatriates these migrants to their areas of origin. As of September 2018, 35,598 Nigeriens have been repatriated to Niger under this framework. On a humanitarian basis, IOM assists these migrants upon arrival in Niger on humanitarian basis when they arrive in Niger. In parallel to this agreement, we can observe that non-Nigerien migrants are expelled from Algeria into Niger, phenomenon that has intensified since September 2017. Hence, from 2016 until September 2018, more than 10,400 non-Nigerien migrants have been expelled from Algeria into the Nigerien border.

In addition to this recent trend, persisting needs have been observed in relation to the Libyan context as migrants still seek to travel to and from Libya and often find themselves in distress in Nigerien soil. While IOM data collected at its flow monitoring points show a decrease in the use of this route, it is worth noting that flows and humanitarian needs have shown volatility over the past years, with the possibility of sudden massive influxes requiring for large assistance operations in the Kavar and other areas of Niger.

Hence, the persistence of this migratory phenomenon and the increased returns of migrants pose the problem of the material, financial and human resources for the Nigerien institutions in charge of managing migration. Therefore, in order to alleviate the pressure on the Government of Niger and to improve migrants' assistance, IOM has implemented MIRA III project, funded by the Dutch Government, aiming at i) ensuring protection and direct assistance to migrants in need along the migratory road to/from Niger; ii) reinforcing sensitization and awareness raising activities on migration and monitoring the evolution of migratory trends in Niger iii) Ensuring sustainable return and reintegration of migrants to their community of origin.

2. Evaluation purpose and objective

MIRAA III project, funded by the Dutch Government and Implemented by IOM Niger since November 2018, is coming to its end in November 30th, 2021. This evaluation aims to assess the outcomes of the project activities that are carried out mainly in Agadez region, Niamey and South of Niger, as well as highlight best practices, lessons learned and recommendations to improve future migration programming.

The evaluation will measure the project's level of achievement in relation to its overall objective: "Contribute to assist Nigerien and non-Nigerien migrants in need of protection and assistance."

On the one hand, the evaluation shall inform an internal audience, specially IOM country office teams, and specialised units of regional and global IOM offices - so that the lessons learned and recognized good practices are adopted to benefit implementation of future interventions. On the other hand, the evaluation will offer the donor an overall analysis of the outcomes of the project at the end of its implementation. Specifically, the evaluation shall:

1. Review the project's activities carried out mainly in IOM transit centres, the results obtained, and the progress made;

2. Analyse the progress of the project to achieve the objectives, results and outcomes, as indicated in the logical framework;
3. Highlight the added value of the activities delivered during the project;
4. Highlight lessons learned and recommendations for further activities;
5. Identify gaps and related recommendations.

3. Evaluation scope

The final evaluation will cover the following thematic areas: Protection and Return, Reintegration, Awareness Raising, and Search and Rescue. The evaluation will cover the period from the November 2018 to November 2021 in Niamey region¹⁴ and Agadez villages.

The following cross-cutting themes must be part of the evaluation on each thematic area:

- A. Rights-based approach (RBA)
- B. Disability inclusion
- C. Gender mainstreaming
- D. Covid-19

4. Evaluation criteria

MIRAA III activities will be assessed based on all OECD/DAC evaluation criteria, as follows: Relevance, Coherence, Effectiveness, Efficiency, Impact and Sustainability, as most relevant for each thematic area: Protection and Return, Reintegration, Awareness Raising, and Search and Rescue.

5. Evaluation questions

The following questions should be addressed based on evaluation criteria and thematic area:

Protection and Return

Relevance:

- How appropriately did IOM adapt voluntary return interventions and transit Centre management to respond to the needs for protection and return assistance?
- To what extent did the Programme adapt to women and vulnerable beneficiaries' needs?

Coherence:

- How have IOM interventions in transit centres been complemented by other partners and projects? What are the gaps and lessons learned?
- To what extent were the Programme objectives aligned to and responded to national policies?

Effectiveness:

- Under Mira III, were migrants able to make a dignified and safe return to their country of origin? Was the project able to learn and adapt? What could be improved in the transit, return and reception stages?

Efficiency (Return):

¹⁴ Niamey village, Tahoua and/or Zinder.

- Did assisted voluntary return journeys take place in a timely manner? What were the challenges in the return process and how were they overcome?

Efficiency (Transit/Protection):

- Were direct assistance and protection services to vulnerable migrants in transit implemented in an efficient way?

Reintegration

Relevance:

- Were the project's activities appropriately tailored to the reintegration needs of returnees (including social/cultural/community context, vulnerabilities, gender, age and geographical scope)?

Impact:

- To what extent did reintegration assistance/activities enhance migrants' sustainable reintegration in their communities of return?

Awareness Raising

Relevance:

- To what extent were awareness raising activities design and implementation adapted to the context to respond to migrants' needs including these of women and vulnerable migrants?

Effectiveness:

- To what extent were awareness raising activities able to increase migrants' knowledge on irregular migration and its alternatives?

Search and Rescue

Relevance:

- To what extent were search and rescue activities design and implementation adapted to the context to respond to migrants' needs?

Effectiveness:

- To what extent have stranded migrants been effectively assisted with IOM search and rescue activities?

6. Evaluation methodology

The consultant will use a methodology that combines qualitative and quantitative analysis. The data collection methods will include, but not be limited to:

1. A document review that will analyze project documents (narrative reports, logical framework, M&E reports, etc.) and strategy and policy documents, evaluations and lessons learned from previous projects.
2. The collection of qualitative information will be built around focus group discussions, individual interviews, life histories using appropriate participatory tools. Key informant interviews will also be conducted with IOM staff

and partners, for instance, Coopi, Division de Surveillance Territoriale, MSF, Croix Rouge, Juges des Mineurs, Direction de la Protection de l'Enfance, both in person and remotely. Evaluation field missions will be conducted in February 2022 by the consultant. Respect of COVID-19 measures and restrictions in Niger and observance of the Office of the Inspector General's (OIG) M&E Continuity in COVID policy will apply if necessary.

3. For quantitative data, the evaluation will build upon the field data collected during routine monitoring done by the MRRM Programme teams. A survey could be administered with a representative of the project's beneficiaries using an appropriate structured questionnaire.

The detailed methodology proposed by the consultant in the evaluation inception report will be reviewed and approved by IOM Niger and the Donor.

It should include, but not be limited to, the following:

- The instruments and tools to be used to collect relevant information and data, including the identification of the different key informants to be interviewed.
- A technical proposal including a detailed methodology with sample size, data collection techniques and tools and general work plan
- Methods for data analysis and interpretation (e.g. data analysis methods used, data collection instruments, level of precision, sampling methods)
- The measures that will be put in place to ensure that the research process complies with ethical standard such as data protection and gender policies of IOM
- The consultant will ensure the participation of all stakeholders including the project beneficiaries, IOM managers, Ministries, implementing partners, etc.
- The evaluation will demonstrate how gender aspects were mainstreamed throughout the project. The evaluative work will tackle gender equality issues, focusing for instance on ensuring equal access to services and opportunities for all persons including men, women, boys and girls of all ages, inclusive of those who might identify as minorities.

Data on vulnerable migrants, desegregated by age, sex and nationality should be collected and analyzed.

7. Ethics, norms and standards for evaluation

This evaluation must follow IOM Data Protection Principles, UNEG Norms and Standards for evaluations and relevant ethical guidelines: IOM abides by the [norms and standards](#) of UNEG and expects all evaluation stakeholders to be familiar with the [ethical conduct guidelines](#) of UNEG and the consultant(s) with the [UNEG codes of conduct](#) as well. UNEG codes of conduct are related to independence, impartiality, conflict of interest, Honesty and Integrity, Competence, Accountability, Obligations to participants, Confidentiality, Avoidance of Harm, Accuracy, Completeness and Reliability, Transparency, Omissions and wrongdoing.

This UNEG codes of conduct must be signed by the both parties before the beginning of the evaluation.

8. Evaluation deliverables

The evaluators (Individual consultant or a firm) will provide the following products (deliverables) to be generated at different stages of the evaluation process. This should include the following:

- An inception report – should include an evaluation matrix, the understanding of the TORs, the needed data collection tools, and the vision proposed for conducting the evaluation data collection and analysis. It should

be submitted to the evaluation manager, for review and comments, after the desk review and before the data collection.

- A presentation - to the project's management outlining the initial findings of the evaluation.
- A draft evaluation report to be shared with the evaluation manager for review and comments. The Evaluation Manager will solicit and consolidate feedback on the draft report from all relevant stakeholders and forward it to the Evaluator.
- A final evaluation report - the final report shall be written in English and meet good language standards, being grammatically correct, proofread and laid out well. It should follow IOM template for final evaluation reports to be shared with the evaluator.
- A 2-page Evaluation Brief - to summarise key findings, conclusions, and recommendations for the main intended evaluation users, according to the IOM template and guidance.
- The Evaluator will also prepare the first draft Management Follow up Response - MRF with the main Recommendations of the evaluation.

All documents must be submitted in hard copy and/or in an electronic version compatible with Microsoft Office. Annexes could also include images, photos illustrating activities related to MIRA III on the fields.

ANNEX 2 - DATA COLLECTION TOOLS

Please see annexed pdf files.