EU-IGAD
COVID-19
RESPONSE

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FED/2020/417-397

EU RESPONSE TO HEALTH AND SOCIO-ECONOMIC IMPACT OF COVID-19 IN THE IGAD REGION

PROGRESS REPORT

APRIL – DECEMBER 2020

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LIST OF ACRONYMS

CWG	Communication Working Group
COVID-19	Coronavirus Disease
GIZ	Deutsche Gesellschaft für Internationale Zusammenarbeit
ECU	Emergency Coordination Unit
EU	European Union
FDA	Food and Drug Administration
GBV	Gender Based Violence
GRM	Grievance Redress Mechanism
IEC	Information Education and Communication
ICCM	Integrated Community Case Management
IMCI	Integrated Management of Childhood Illness
IWG	Implementation Working Group
IP	Implementing Partner
IGAD	Intergovernmental Authority on Development
IDP	Internally Displaced People
IOM	International Organization for Migration
IPC	Infection Prevention and Control
MIS	Management Information System
MHPSS	Mental Health and Psychosocial Support
MNCH	Maternal, Newborn and Child Health
MoH	Ministry of Health
M&EWG	Monitoring and Evaluation Working Group
PHC	Primary Health Care
PPE	Personal Protective Equipment
PoE	Point of Entry/Exits
PSEA	Prevention of Sexual Exploitation and Abuse
PMU	Programme Management Unit
PSC	Project Steering Committee
RRRT	Rapid Regional Response Team
RCCE	Risk Communication and Community Engagement
SOP	Standard Operating Procedure
TMEA	TradeMark East Africa
UNICEF	United Nations Children's Fund
UNOPS	United Nations Office for Project Services
WASH	Water, Sanitation and Hygiene
WFP	World Food Programme

2 SUMMARY PAGE

TITLE OF THE ACTION	EU RESPONSE TO SOCIO-ECONOMIC-IMPACT OF COVID-19 IN THE IGAD REGION
Donor	European Commission
Reference number	FED/2020/417-397
Implementation Countries	Ethiopia, Djibouti, Kenya, Sudan, South Sudan, Somalia, Uganda
Contribution	€53,000,000[1]
Funds Received	€39,750,000
Funds Spent	€19,709,725
Type of Report	1st Progress Report (April – December 2020)
Duration	29 April 2020–11 June 2022
Reporting period	29 April 2020–31 December 2020
Contact Persons	Rossella Monti rossellam@unops.org, UNOPS PMU Jonathan Thalla jonathant@unops.org, UNOPS PMU

1. While the entire Programme is a EUR 60 million response, UNOPS is only managing EUR 53 million. EUR 7 million is contracted directly with, and implemented by, GIZ.

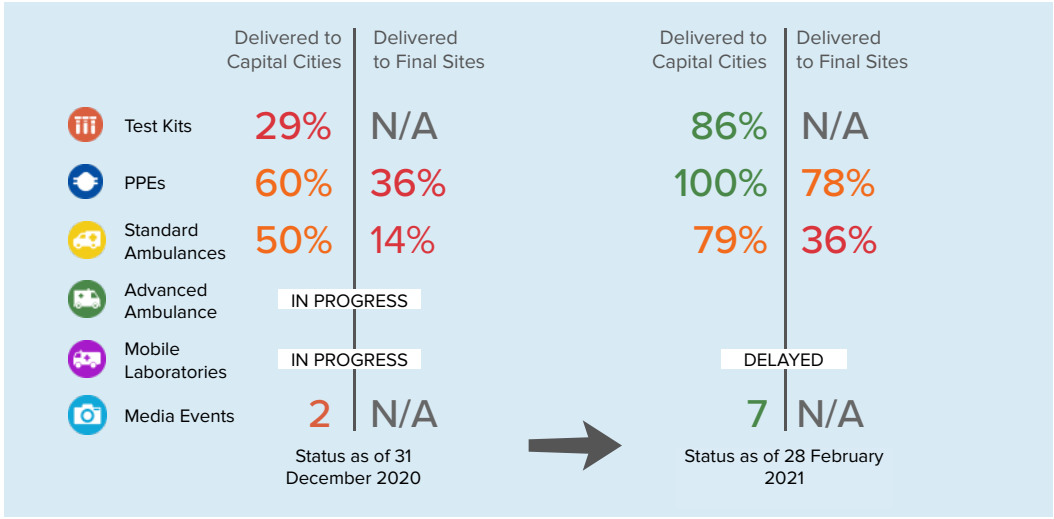
3 EXECUTIVE SUMMARY

In response to the requests for support made by the IGAD member states, this Action funded by the European Union (EU) supports the efforts to mitigate the health and socio-economic impacts of the COVID-19 pandemic on the IGAD sub-region. While the Action was conceptualized in May 2020, the contract with the EU was officially signed 09 July 2020, with agreements with the partners signed in November 2020. This first progress report highlights the headway made by the programme and the partners under this EU-IGAD COVID-19 Response programme in 2020. This project was conceptualized during an emergency when little was known about the depth of impact caused by the virus. In order to mobilize support and provide a rapid response to the growing needs, there was a broad consensus on the sectors to address, but detailed planning and assessment of specific interventions was not completed before the agreements were signed. Further, the situation and country contexts of the Member States affected by the pandemic was dynamic and quickly changing. To ensure that all interventions implemented were effective and critical to the needs on the ground, significant efforts were made after the contract was signed to establish a united vision among partners. Through this approach, UNOPS aligned proposed interventions to achieve measurable results, ensured activities remain effective and relevant, and avoided duplication by partners in the same location.

This Action addresses a very real and critical need in the IGAD sub-region, and promotes regional cooperation and a collaborative response to shared concerns caused by the pandemic, especially to the most vulnerable populations in cross-border areas. The programme implements a wide spectrum of interventions to safeguard human lives and to mitigate the economic impact caused by this pandemic. The response is broad and includes sectors such as Health, WASH, Gender, Infrastructure, Provision of critical supplies, and Safe Trade.

The complexity of this programme is reflected in its governance and management structure. Management of implementation activities is further complicated due to the programme's multi-objective, multi-sectoral, multi-partner, multi-country implementation during a global pandemic, all the while attempting to convert political addresses into feasible actions. Further challenges are the volatility of the political and security situations, humanitarian crises, lack of access and inadequate infrastructure during the rainy season, and the remote locations and wide geographical dispersion of 39 cross-border sites across 7 countries.

Procurement, Distribution and Media Events



Key results achieved in 2020:

1. PMU established
2. Agreements with the EU and partners signed
3. Needs assessments (political: sites; technical: needs)
4. Definition of the work plan and of the result framework
5. Harmonization of detailed interventions
6. Management and working groups established
7. Definition of a Monitoring and Evaluation plan
8. Definition of a Communication and Visibility plan
9. Procurement, and delivery (ongoing) of items
10. Project launch and handover of PPEs to IGAD
11. Handover of PPEs to Member States MoH *(ongoing)*
12. Coordination meetings established with relevant stakeholders, including government authorities

4 SUMMARY AND CONTEXT OF ACTION

4.1. Situational/contextual analysis

The IGAD Member[2] States are amongst the most vulnerable countries to the COVID-19 pandemic. With deficient healthcare systems, overstretched and often unprepared health workers, countries are unable to deal with the spread, and impact, of the virus effectively. Limited testing, monitoring and reporting capacities have also led to challenges in being able to effectively monitor, contain and mitigate the pandemic. As with several other countries, the IGAD member States also implemented a range of containment/mitigation measures including lockdowns, closure of borders, and the reduction or suspension of international flights. However, these measures have critical negative implications on various other areas including movement of vulnerable people and goods, food security, and cross-border informal and formal trade corridors in the sub-region. Combined with other crises in the region including security conflicts, floods, droughts, and locusts infestations, the impact of this pandemic significantly weakens the health and socio-economic structure, especially for vulnerable groups in cross-border areas.

Given individual States' limited capacities and the transnational nature of the challenge, IGAD has called for increasingly coordinated, coherent, comprehensive actions. This programme has been designed in response to the appeals made by IGAD Member States and is funded by the European Union (EU) as part of their Team Europe global response package.

1. Convoy of trucks at Elegu Point of Entry at the border of Uganda and South Sudan. © IGAD

The programme focuses on vulnerable groups, including migrants, refugees, internally displaced persons and cross-border communities through a variety of short and long-term interventions.

As of 01 June 2020, the total number of cases in the IGAD region[3] were 15,808 and has since grown to 290,448 with 5542 deaths as of 29 December 2020[4]. Aligned with the overall scope of the programme, and in collaboration with the respective Member States', IGAD has determined the cross border areas and intervention sites for this project.

2. Any reference to IGAD Member States in this document and under this Action is in reference only to the Member States receiving support under this Action.

3. Although this data includes figures from Eritrea, Eritrea does not receive support through this programme.

4. Epidemic brief #03: Corona Virus Disease (COVID-19) pandemic in the region of the Intergovernmental Authority on Development (IGAD), 30 December 2020.

4.2. Scope of the Project[5]

This programme is a response to the health and socio-economic impact of COVID-19 in the IGAD region with four specific objectives:

1. Increased capacity at IGAD to coordinate national responses

This objective is implemented by IGAD with a primary focus on improving the regional coordination of the COVID-19 response on behalf of the seven Member States participating in this Action (Djibouti, Ethiopia, Somalia, Kenya, South Sudan, and Sudan). The primary deliverables under this component include:

i. Establishment of an Emergency Coordination Unit
ii. Ensure coordination of the implementation with Member States and relevant cross-border committees
iii. Set-up a Rapid Regional Response Team (RRRT)

2. Increased access to health and socio-economic support for vulnerable groups

This objective was primarily foreseen to be implemented by UNICEF in the programme structure, and focused on health facilities in cross-border areas. However, activities implemented by IOM in quarantine and isolation facilities in cross border areas (recognized under Objective 3[6]) also contribute significantly to this objective (i.e. Increased access to health and socio-economic support for vulnerable groups). The primary deliverables under this component include:

i. Health response capacity and continuity of essential health services ensured
ii. WASH services provided in selected sites
iii. Gender-Based violence (GBV) and gender responsive actions integrated in the COVID-19 response
iv. Final beneficiaries are sensitised through awareness-raising activities and community engagement

2

2. Presentation of PPEs and hand washing supplies to the Customs Authority (Government of South Sudan) for use at the cross border point at Nimule. (Items procured and handover through TMEA's interventions under this programme) © TMEA

3. Borders and critical supply chains are safe for trade

This objective has multiple components that are implemented by multiple partners: UNOPS, TMEA, and IOM. While all programme activities are conducted in cross-border areas, this objective focuses specifically on support at Point of Entry/Exits (PoEs), Quarantine/Isolation facilities at border checkpoints, and operation and maintenance of Migrant

5. Note: this document is limited to the scope of work of UNOPS, and all references to the programme are in relation to UNOPS accountability and not that of GIZ.

6. It should be noted that the proposed amendment (not yet effective as of 31 December 2020) suggests to formally include "Provision of Health Response, WASH Services, GBV/Gender Actions and RCCE" as part of "Management of Facilities; Priority quarantine and isolation units are functioning"

Response Centers and Refugee Camps situated in border areas. In addition, relevant IOM activities currently implemented under Objective 3 which contribute to results under Objective 2 will be recognized as part of Objective 2[5]. The major deliverables under this third component include:

i. **Establishment of Facilities at Cross-Border Areas** — *implemented by UNOPS*
   a. Identify and repurpose quarantine and isolation facilities
   b. Establishment of screening and quarantine facilities
   c. Establish medical controls at border crossing points

ii. **Safe Trade** — *implemented by TMEA*
   a. Selected facilities in cross border areas are equipped with adequate equipment and supplies
   b. Safe Trade Zones at selected borders and ports put in place
   c. Critical supply chain (food and medicines) preserved (supporting logistic providers)
   d. Critical supply chain (food and medicines) preserved (improving lead time)

ii. **Management of Facilities** — *implemented by IOM*
   a. Gender sensitive, Standard Operating Procedure (SOPs) for detection, notification, isolation, management and referral of COVID cases at PoEs developed and implemented
   b. Priority quarantine/isolation units are functioning
   c. Frontline workers, migrants in quarantine/isolation facilities, and communities hosting quarantine and isolation facilities are COVID-19 aware and migrant sensitive

4. Digital solutions relevant for the COVID health response are promoted

This Objective is implemented and managed by GIZ and not part of this report.

Other relevant deliverables

In addition to the deliverables mentioned above, the below deliverables *(implemented by UNOPS)* contribute significantly to the achievement of the above Objectives and success of this programme:

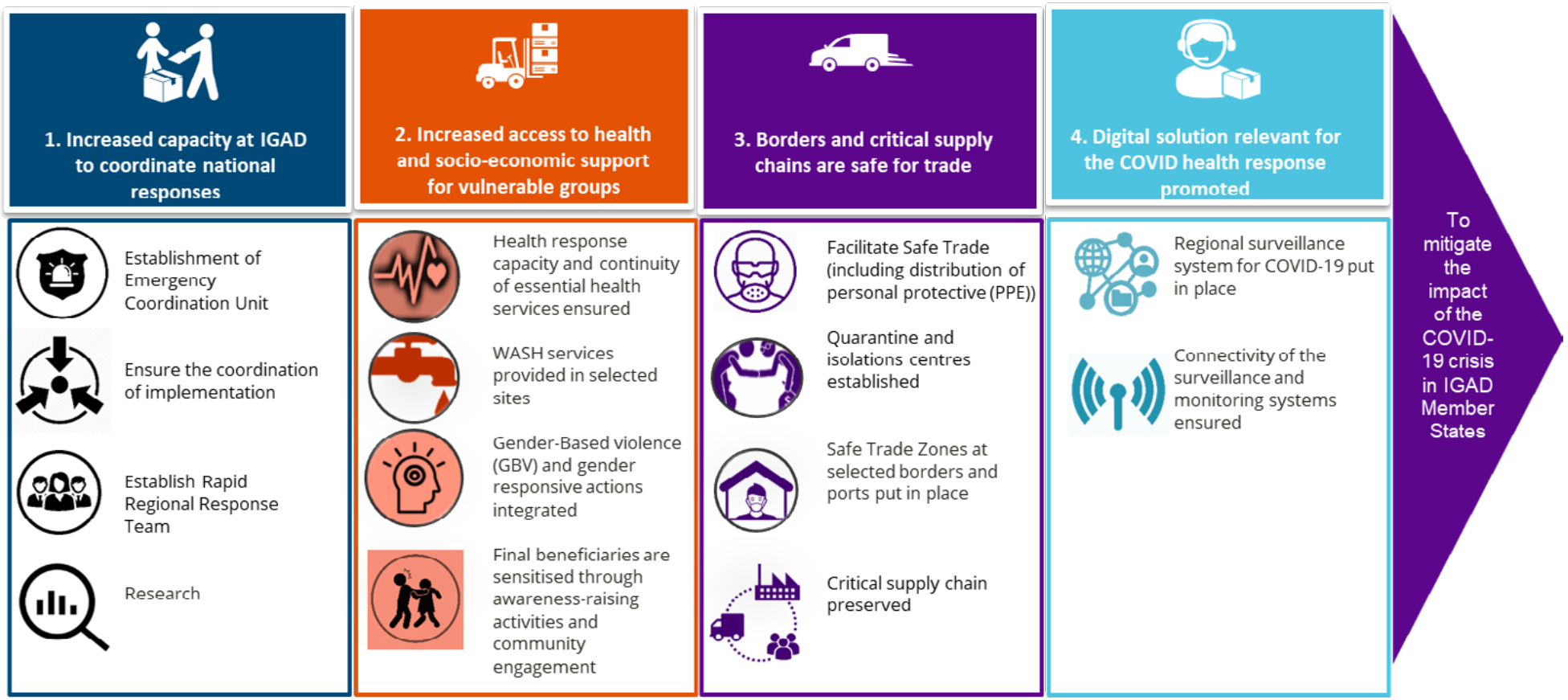
i. Establishment of a Programme Management Unit (PMU) responsible for programme and stakeholder management, fiduciary management, results management, and risk management.

ii. Procurement and distribution of majority of the PPEs and medical supplies, ambulances and mobile labs, field vehicles, and COVID-19 test kits under this programme to relevant sites (items and sites determined by IGAD in consultation with Member States)[7]

As part of its mandate for Programme Management, the PMU is responsible for the overall programme and fiduciary management, and oversees Implementing Partners (IPs) who will implement specific and specialized components of the project. In addition, UNOPS will also implement specific areas of the project. See **Section 5** for a map of project activities. See **Annex 1** for a detailed list of activities per partner, per location. See **Figure 1** for a high level summary of the project.

7. Items distributed to screening, quarantine, or other facilities located at PoEs are recognized under Objective 3 (Borders and critical supply chains are safe for trade). Distribution to all other areas including health facilities situated in broader cross-border areas are considered to contribute to Objective 2.

Figure 1. A high-level summary of the programme



5 RESULTS

5.1. Key Achievements

Although this programme was signed in an emergency context in order to provide support to the Member States, there were many evolving factors that delayed implementation. Further, an in depth assessment of activities and the needs at the sites was not conducted before agreements were signed. At the time of programme conceptualization and signing, the objectives and the work plan were established at a very high level. This led to several discussions and adjustments that were needed once the concept transitioned to implementation. For example, in the selected sites Renk and Nimule, site locations were not able to be accessed due active conflict. In some other cases, once activities started in 2020, partners were requested by some Member States to change the initially agreed sites due to changing needs or migrant patterns. For example, in Somalia, the Minister of Health requested IGAD (dated 30 December 2020) to move implementation from Diif to Belet Hawa because the number of people crossing the border daily was 733% higher in Belet Hawa[8]. Nevertheless, during this inception phase in 2020, the PMU, through rigorous coordination with the partners, was able to establish a clear roadmap for implementation.

8. According to the letter received from the Minister of Health, Belet-Hawa has a population of around 162,370 people with 450-400 people crossing the border daily, compared to Diif, which has a population of 20,000 people and only 50-60 people crossing the border daily.

The major achievements during this reporting period include:

- Establishment of the PMU and signing agreements with IPs
- Establishment of the IGAD Emergency Coordination Unit and the Regional Rapid Response Team
- Agreement on the programme implementation sites and activities
- Procurement and distribution of critical supplies (PPEs, COVID-19 test kits, and vehicles)
- Programme launch and handover of PPEs to IGAD Inception workshop and establishment of relevant working groups
- Coordination with IPs, Member States, and other relevant stakeholders/authorities
- Coordination with the EU and IGAD
- Launch of media events for IGAD handover to MoH of the Member States
- Responding to the refugee humanitarian crisis in East Sudan

5.1.1. Establishment of the PMU and signing agreements with IPs

Immediately following the signature of the agreement, UNOPS established a Programme Management Unit to manage this programme and began setting up an office and official presence in Djibouti in order to better liaise with IGAD and the EU. During the reporting period, the PMU hired a Senior Project Manager (in July 2020) to lead the unit as well as 2 other positions before the end of December. Additional ad-hoc support was provided by the UNOPS Ethiopia Multi-Country Office, to which UNOPS Djibouti belongs, or through internal UNOPS retainers. Recruitment processes for all other positions were ongoing as of December 2020, and it is anticipated that the PMU will be fully staffed in the first quarter of 2021.

Immediately following the establishment of the PMU, UNOPS began negotiations with other partners to implement this programme. Although partners were chosen at the programme concept stage due to their expertise in the relevant areas, the agreements signed between them and UNOPS unfortunately were initially delayed due to involvement of multiple parties (at HQ, Liaison, Regional Office, Country Office levels) and disagreements of the programme reporting structure from partners, especially UN partners. Nevertheless, programme planning activities at the Country Office levels for each partner had begun. The agreements with all partners were signed by November 2020 with programme related expenditure eligible from May 2020. Fund transfers requests were received in November and December from IPs, and were completed within two weeks of receipt of fund request.

Challenges/Constraints:

i. Although good candidates were identified, the selected candidates did not wish to travel to the duty station during the COVID-19 pandemic
ii. Achieving gender parity is critical to the mandate of

UNOPS. As a result, recruitment cycles were som times longer than typical practice to allow opportunity for a sufficient number of female candidates to participate in the process

iii. Negotiations with IPs took significantly longer than normal practice to ensure consensus on partner agreements to align with EU requirements on implementation and reporting

5.1.2. Establishment of the IGAD Emergency Coordination Unit and the Regional Rapid Response Team

Immediately following the announcement of this Action by the EU, IGAD mobilized and established a regional Emergency Coordination Unit based in Djibouti. This Emergency Coordination Unit is staffed with 4 subject matter experts (surveillance, health, trade and digital health) and a Project Coordinator. This Unit serves as the lead interculotor and coordinator on behalf of IGAD and the Member States when liaising with UNOPS PMU or other IPs. This Unit includes a National Coordinator responsible for coordinating with the relevant authorities. The National Coordinators work with a network of site-level focal points, and together with the ECU and UNOPS PMU in order to coordinate a coherent set of actions to address vulnerable communities in cross border areas and implementation sites. All positions within this structure are filled, except in Djibouti and Ethiopia. Currently, Djibouti coordination is managed by the ECU based in Djibouti, and Ethiopia coordination is managed by the National Coordinator for Ethiopia.

In addition, IGAD has also established a network of Rapid Response Teams in each Member State ready to respond on a 24 hour basis for any public health emergencies related to COVID-19. The Rapid Response Teams include a team of specialists:

i. Epidemiologist
ii. Case management specialist/clinician
iii. Social mobilization specialist
iv. Laboratory specialist
v. IPC specialist
vi. Social mobilization Specialist
vii. Risk communication specialist

Challenges/Constraints:

i. Establishment of the RRRTs, National Coordinator, and site focals requires coordination with the Member States and their endorsement and engagement. When a Member State is unresponsive for any reason (political instability, elections, etc.), the establishment of these teams are delayed.

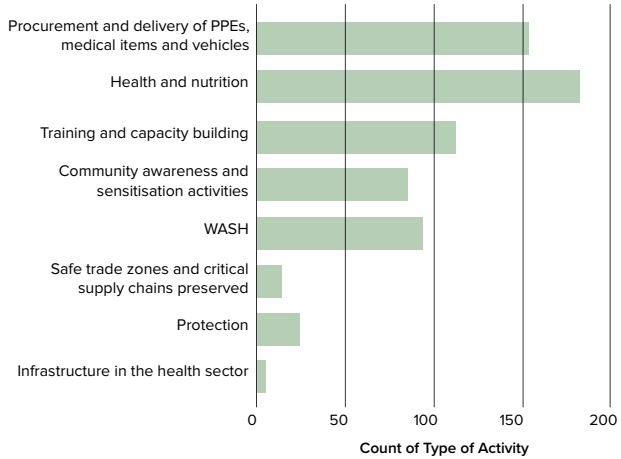
5.1.3. Agreement on the programme implementation sites and activities

With IGAD representing the interests of Member States, the initial programme sites for this programme were established. Since this agreement, programme sites were requested to be adjusted by either the IP[9] or the Member State due to changing needs. Nevertheless, this initial agreement on programme sites allowed implementation activities to begin, especially for IPs who needed to get further specific approvals from local governments in order to proceed with their activities.

Through immense coordination by the PMU, the agreed high-level objectives were transformed into specific activities for each implementing partner and detailed, refined, and adjusted as needed. This included definition of reporting indicators and a target setting exercise. In order to accommodate changing needs and security situations, some activities were requested to be changed by partners. Any requested changes were only accommodated in view of the overall programme and agreed with IGAD, activities by other partners, impact of the intervention and ensuring overall coherence of the programme.

See **Figure 2** for a map of implementation sites and activities.

Breakdown of types of activities implemented under Programme



9. Any change that occurred has been approved by IGAD after consultation with Member States.

Figure 2. A comprehensive map of the implementation sites and respective activities under this programme.

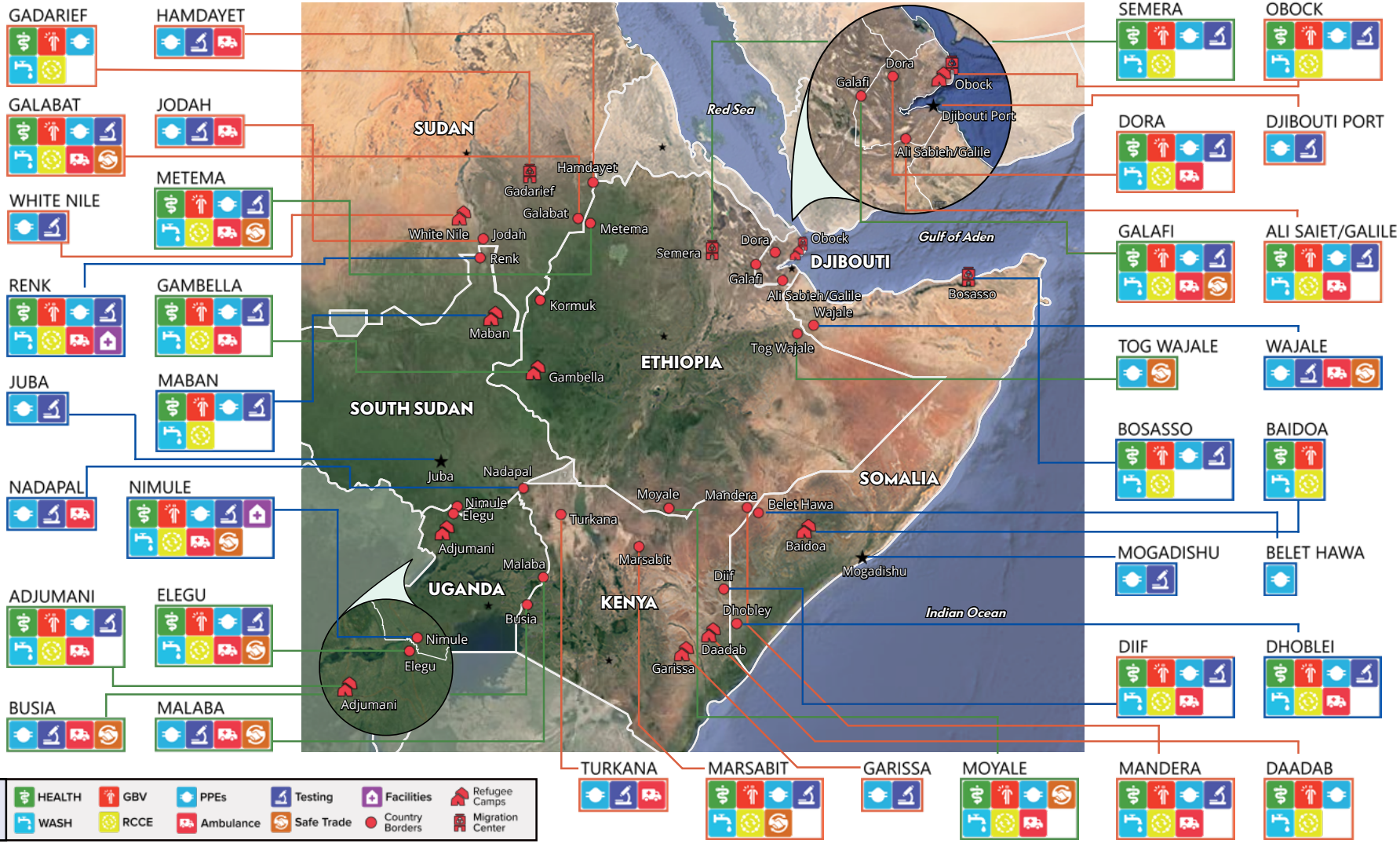


Table 1. Tabular summary of IP activities by implementation sites[10].

Sites - IGAD Priorities				IP Activities/Deliverables							
				Objective 2 Provision of Health Response, WASH Services, GBV/Gender Actions and RCCE **Objective 3** Management of Facilities (QF, IC)	**Objective 2 and 3** Procurement of Medical Equipment and Supplies					**Objective 3** Establishment of Facilities at Cross Border Areas	**Objective 3** Safe for Trade
MEMBER STATE	SITES		BORDERS	WORK PROGRAMME	PPEs	COVID-19 TEST KITS	MOBILE LAB	VEHICLES	AMBU-LANCES	QUARANTINE / ISOLATION FACILITIES CONSTRUCTION	SAFE TRADE
KENYA	Mandera	CB	KE/ET	IOM-Health/WASH/GBV/RCCE	UNOPS	UNOPS			UNOPS		
	Daadab (Garissa)	RC	KE/SO	UNICEF – GBV	UNOPS	UNOPS					
				IOM – Health/WASH/GBV/RCCE	UNOPS						
	Diif (Wajiir)	CB	KE/SO	UNICEF – WASH/RCCE	UNOPS	UNOPS					
				IOM – Health/WASH/GBV/RCCE	UNOPS				UNOPS		
	Turkana	CB	KE/UG		UNOPS	UNOPS			UNOPS		
	Moyale (Marsabit)	CB	KE/ET	IOM – Health/WASH/GBV/RCCE	UNOPS	UNOPS					TMEA
	IGAD Country Office						UNOPS	UNOPS			
ETHIOPIA	Hawli (Galafi)	CB	ET/DJ	IOM – Health/WASH/GBV/RCCE	UNOPS	UNOPS			UNOPS		TMEA
	Metema	CB	ET/SU	IOM – Health/WASH/GBV/RCCE	UNOPS	UNOPS			UNOPS		TMEA
	Gambella	RC	SS/ET	UNICEF – Health/WASH/GBV/RCCE	UNOPS	UNOPS					
				IOM – Health/WASH/GBV/RCCE							
	Tog Wajale	CB	ET/SO		UNOPS						TMEA
	Moyale	CB	ET/KE	IOM – Health/WASH/GBV/RCCE	UNOPS				UNOPS		TMEA
	Kormuk (Asosa)	CB	ET/SU		UNOPS						
	Semera and Afar reg	MRC	ET/DJ/ER	UNICEF – Health/WASH/GBV/RCCE		UNOPS					
	IGAD Country Office						UNOPS	UNOPS			

10. Implementation sites are the latest sites as of 28 February 2021; changes highlighted.

Sites - IGAD Priorities				IP Activities/Deliverables							
MEMBER STATE	SITES		BORDERS	WORK PROGRAMME	PPEs	COVID-19 TEST KITS	MOBILE LAB	VEHICLES	AMBU-LANCES	QUARANTINE / ISOLATION FACILITIES CONSTRUCTION	SAFE TRADE
SOMALIA	Diif	CB	SO/KE	UNICEF – Health/WASH/GBV/RCCE		UNOPS			UNOPS		
	Belet Hawa	CB			UNOPS						
	Mogadishu	RC			UNOPS	UNOPS					
	Dhoblei	CB	ET/SO	IOM – Health/WASH/GBV/RCCE	UNOPS	UNOPS			UNOPS		
	Baidoa	RC		IOM – Health/WASH/GBV/RCCE							
	Tog Wajale	CB	SO/ET		UNOPS	UNOPS			UNOPS		TMEA
	Bosasso	MRC		UNICEF – Health/WASH/GBV/RCCE	UNOPS	UNOPS					
				IOM – Health/WASH/RCCE							
	IGAD Country Office						UNOPS	UNOPS			
SOUTH SUDAN	Nimule	CB	UG/SSU	IOM – Health/WASH/GBV/RCCE	UNOPS	UNOPS			UNOPS		TMEA
	Juba				UNOPS	UNOPS					
	Renk	CB	SSU/SU	UNICEF – Health/WASH/GBV/RCCE	UNOPS	UNOPS			UNOPS	UNOPS	
	Nadapal (KE)	CB	KE/SSU		UNOPS	UNOPS			UNOPS		
	Yusuf Basil (Maban)	RC	SSU/SU	UNICEF – Health/WASH/GBV/RCCE	UNOPS	UNOPS					
	IGAD Country Office						UNOPS	UNOPS			
SUDAN	Galabat	CB	SU/ET	UNICEF – Health/WASH/GBV/RCCE	UNOPS	UNOPS			UNOPS		TMEA
				IOM – Health/RCCE							
	Gadarief	MRC	SU/ET/ER	IOM – Health/WASH/GBV/RCCE							
	Jodah	CB	SU/SSU		UNOPS	UNOPS			UNOPS		
	White Nile	RC	SU/SSU		UNOPS	UNOPS					
	Hamdayet	CB	SU/ET		UNOPS	UNOPS			UNOPS		
	IGAD Country Office						UNOPS	UNOPS			

Sites - IGAD Priorities				IP Activities/Deliverables							
MEMBER STATE	SITES		BORDERS	WORK PROGRAMME	PPEs	COVID-19 TEST KITS	MOBILE LAB	VEHICLES	AMBU-LANCES	QUARANTINE / ISOLATION FACILITIES CONSTRUCTION	SAFE TRADE
UGANDA	Elegu	CB	UG/SSU	IOM – Health/WASH/GBV/RCCE	UNOPS	UNOPS			UNOPS		TMEA
	Busia	CB	UG/KE		UNOPS	UNOPS			UNOPS		TMEA other funding
	Malaba (KE)	CB	KE/UG		UNOPS	UNOPS			UNOPS		TMEA other funding
	Adjumani	RC	UG/SSU	UNICEF – Health/WASH/GBV/RCCE	UNOPS	UNOPS					
				IOM – Health/WASH/GBV/RCCE							
	IGAD Country Office						UNOPS	UNOPS			
DJIBOUTI	Galafi (Hawli)	CB	ET/DJ	IOM – Health/WASH/GBV/RCCE	UNOPS	UNOPS			UNOPS		TMEA
	Ali Sabieh/Galile	CB	DJ/ET	IOM – Health/WASH/GBV/RCCE	UNOPS	UNOPS			UNOPS		
				UNICEF – WASH/RCCE							
	Obock (Merkazi)	RC		UNICEF – Health/WASH/GBV/RCCE							
	Dora	CB	ET/DJ	UNICEF – Health/WASH/GBV/RCCE	UNOPS	UNOPS			UNOPS		
	Djibouti Port		Port								TMEA
	Obock	MRC		UNICEF – Health/WASH/GBV/RCCE	UNOPS	UNOPS					
	IGAD Country Office						UNOPS	UNOPS			

3. Programme launch in Ethiopia with the EU, IGAD, and different implementing partners and stakeholders. 31 Aug 2020. © UNOPS

5.1.4. Programme launch and handover of PPEs to IGAD

Following the arrival of the consignment of PPEs and medical supplies in Ethiopia, the programme was officially launched with a Media day on August 31 2020. This event captured the formal handover of these supplies to IGAD (represented by the Executive Secretary, Dr. Workneh Gebeyehu), for further handover from IGAD to individual Member States in their respective countries. In addition to the IGAD Executive Secretary, the keynote address was given by H.E. Mr. Johan Borgstam (Head of the European Union Delegation to Ethiopia) with remarks from Mrs. Mrs. Worknesh Mekonnen (UNOPS Ethiopia Multi-Country Office Director and Representative), from the Ambassador of Sudan to Djibouti and Chair of the IGAD Committee of Ambassadors, and from other various Ministers from the Government of Ethiopia.

5.1.5. Inception workshop and establishment of relevant working groups

Immediately, following this launch, a two-day programme inception workshop was organized by UNOPS PMU with the EU, IGAD, Member States, and IPs to formally launch the implementation phase of the programme. This workshop served as a platform to brainstorm and build consensus on programme operations, specifically: Programme Interventions and Locations, Institutional Structure, Stakeholder Management, Programme Management, Results Management, and Risk Management. Based on these discussions, relevant working groups and management committees were established, and respective terms of reference and work plans were developed, including for:

I. Project Steering Committee:

Co-chaired by the EU and IGAD, and established to provide strategic guidance on policy and operational matters, including oversight on design, progress, and performance of the programme. The first Project Steering Committee was held on 11 June 2020.

II. Implementation Working Group:

Chaired by the PMU, and established to ensure that the respective components of the programme are implemented to scope, time, cost and quality as guided by the PMU; to increase coordination, collaboration, knowledge management and preparing collective responses to the Steering Committee. The first IWG was held on 23 June 2020 and the second on 26 and 30 November 2020. More frequent IWG meetings will be held in 2021 to ensure programme implementation timelines are met.

III. Communications Working Group:

Chaired by the PMU, and established to ensure all public messaging is coordinated, accurate and appropriately presented, as guided by the PMU, and in line with the relevant guidelines. A Communication and Visibility Plan, Branding and Visibility Guidelines, a programme logo, templates, and branding material were developed in collaboration with the EU, and shared with all partners. Press release templates were developed in partnership

with the EU communication focal for use at country media day events. The first Communications Working Group meeting was held on 03 December 2020. As programme implementation activities increase, the PMU will ensure a greater focus on the communications and visibility of this programme, through the CWG.

IV. Monitoring and Evaluation Working Group:

Chaired by the PMU, and established to ensure a systematic approach to data collection, monitoring, and results reporting is implemented in line with the Results Framework; develop and publish a MIS to display programme results and information. Although a formal M&E working group meeting was not yet held, regular meetings were held between the IP M&E focal points and the PMU to ensure relevant programme activities and results can be monitored. The development of a remote monitoring tool and a MIS has been started and will be rolled out in Q1 of 2021.

5.1.6. Coordination with IPs, Member States, and other relevant stakeholders/authorities

During this first reporting period, the majority of the focus of implementation activities by all partners (in addition to procurement) was to build relationships with relevant stakeholders including government counterparts to build the necessary support required for implementation.

PMU holds weekly meetings with implementing partners to address various issues related to programme implementation. These meetings are typically held with the regional office of the IP coordinating the programme but will include country specific teams as needed. This programme was signed with the regional office for each IP, however, as implementation progresses, it has become clear that each country office implementing the programme in their respective country operates almost independently and faces their own unique challenges. In effect, with each country office for each IP requiring individual attention, this means the PMU is essentially coordinating with 21+ IPs - necessary for the successful implementation of this programme. In order to ensure implementation timelines are sped up, the PMU will continue to hold country specific coordination meetings with all relevant partners, in collaboration with IGAD.

All implementing partners have begun discussions and held several coordination meetings with the relevant local government authorities to be granted access to the sites, conduct in-depth needs and site assessments, or build relationships at the specific implementation sites. In the coming period, the PMU will hold country specific coordination meetings to ensure timely delivery of interventions.

4

4. UNOPS, IPs, Member States, and other key stakeholders and authorities coordinate COVID-19 response in the IGAD Region under the *"one programme, one team"* approach. © UNOPS

Constraints/Challenges:

i. Although there was agreement between the Member State and IGAD on sites and other programme activities, this message was at times not communicated within the different levels of authorities of the Member States. This led to miscommunication and delays at the implementation site level. For example, although Galafi was approved by Djibouti representatives with IGAD, the implementing partners faced challenges in being able to start implementation activities.
ii. Independent country offices operating within their own model within the IPs. This requires much more 'hands-on' approach by the PMU at the country level than originally anticipated.
iii. Site visits and field level monitoring was not foreseen in the PMU budget for this programme. In order to ensure appropriate stakeholder management and quality assurance, the PMU must, in collaboration with IGAD, visit specific implementation sites.

See **Annex 1** for a detailed list of activities.

See **Figure 4** for a breakdown of programme activities.

See **Annex 3** for a breakdown of activities per partner.

Figure 3. Breakdown of project outputs

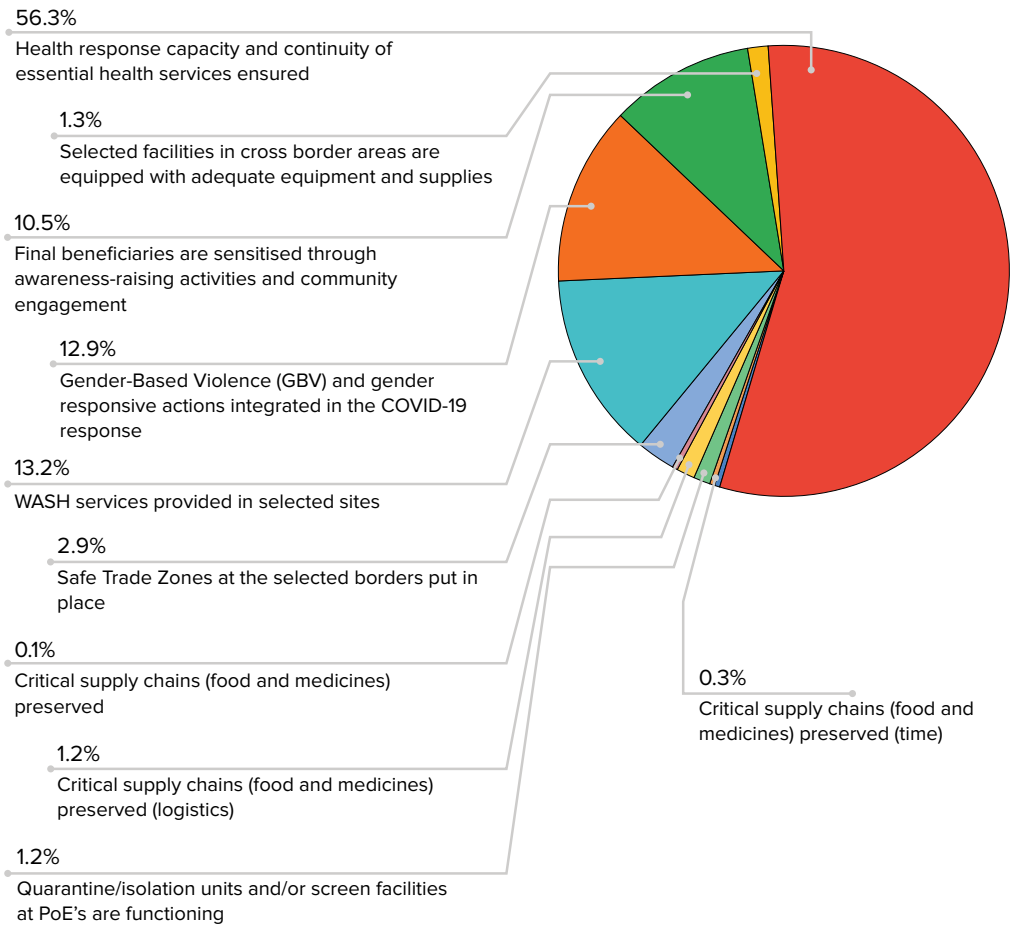


Figure 4. Breakdown of specific implementation activities

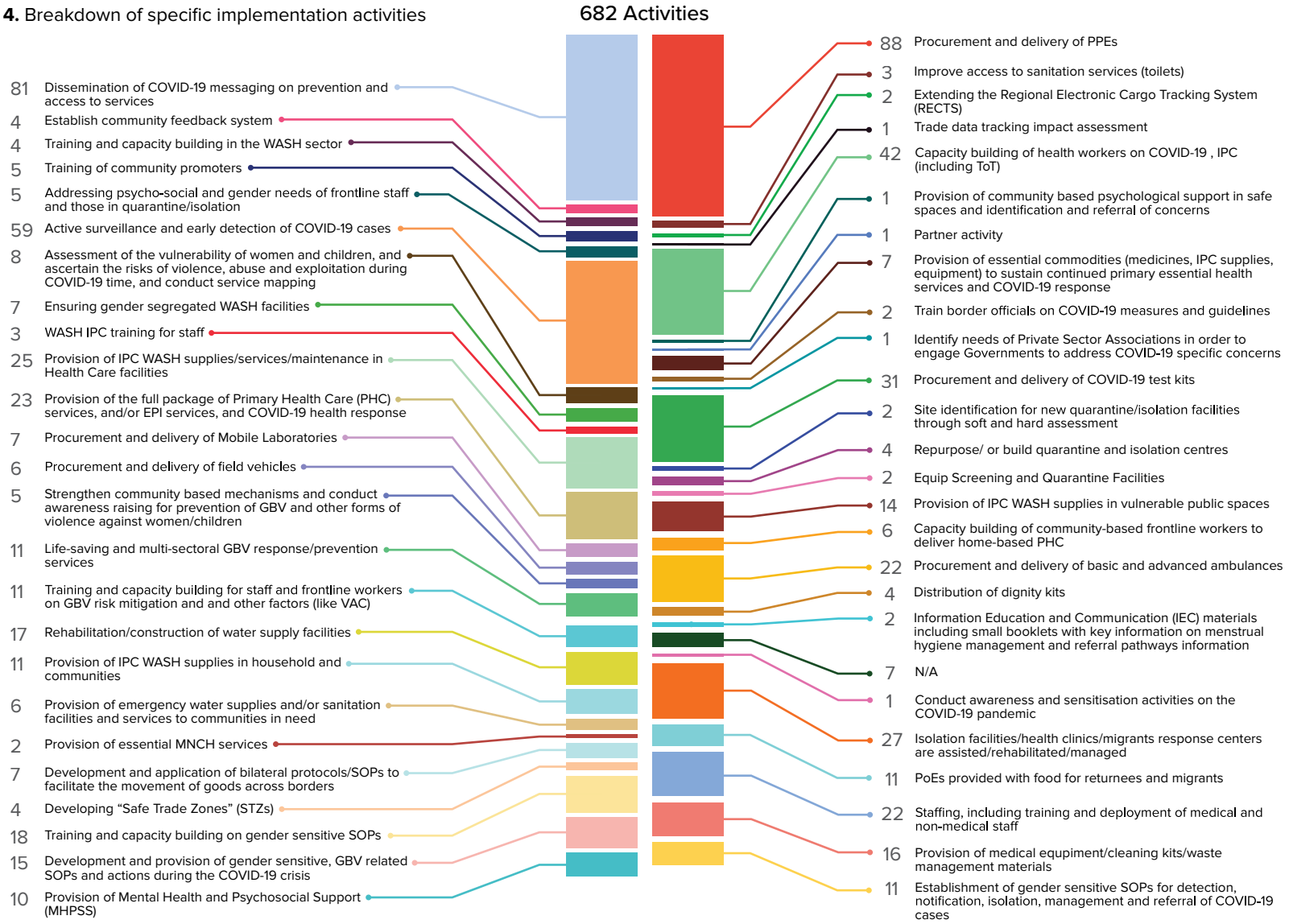


Table 2. The following tables highlight the key results achieved by partners during this first reporting period.

Output 2.1 - Major activities conducted as part of the HEALTH response								
IP	Country	Site 1	Site 2	Site 3	Site 4	Refugee Camp	Migrant Response Center	Major activities started/completed; Risks identified
UNICEF	Djibouti	Galafi	Ali Sabieh (Galile)	Dora	Djibouti Port	Obock (Merkazi)	Obock	-Contracted services to construct pipeline
IOM	Djibouti	Galafi	Ali Sabieh (Galile)	Dora	Djibouti Port	Obock	Obock	-Joint site visit with MoH and MoI
UNICEF	Ethiopia	Hawli	Metema	Moyale	Tog Wajaale	Gambella	Semera	-Procurement process started and underway for supplies including PPEs/relevant kits
IOM	Ethiopia	Hawli	Metema	Moyale	Tog Wajaale	Gambella	Semera	-Procurement and staff recruitment started; need assessments in Semera and Metema; formal discussion with the GoE on PoEs -management done.
UNICEF	Kenya	Diif	Mandera	Turkane	Moyale	Dadaab		
IOM	Kenya	Diif	Mandera	Turkana	Moyale	Dadaab		-Recruitment of staff; procurement of PPEs and IPC started -High risk security situations in the area delay site visits
UNICEF	Somalia	Diif	Dhoblei	Tog Wajale		Baidoa	Bosasso	-Procurement process started and underway for supplies including PPEs/relevant kits
IOM	Somalia	Diif	Dhoblei	Tog Wajale		Baidoa	Bosasso	-In Dhobley and Baidoa, tecnical investigations on going to rehabilitate QFs to int. standards; recruitment of MoH seconded staff; training of the staff on COVID partially done. -In Bossaso, this programme will support the continuation of operational and running costs of activities originally initiated under other funding
UNICEF	South Sudan	Nimule	Renk	Nadapal		Maban		
IOM	South Sudan	Nimule	Renk	Nadapal		Maban		-Activities (training of the staff, renew of contract of volunteers) done under other funds. The EU IGAD programme will benefit of these activities starting from Jan 2021
UNICEF	Sudan	Galabat	Joda	Hamdayet		White Nile	Gadarief	-Procurement process started and underway for supplies including PPEs/relevant kits
IOM	Sudan	Galabat	Joda	Hamdayet		White Nile	Gadarief	-Activities in support to Gedaref MCR done under other funding. EU IGAD will assure the continuation staring Jan 2021.
UNICEF	Uganda	Elegu	Busia	Malaba		Adjumani		
IOM	Uganda	Elegu	Busia	Malaba		Adjumani		-Preliminary discussion with MoH and UNICEF; recruitment of the staff underway

Started | Potential risk/delays identified | Partner/intervention not active in this site | Activities to be implemented in upcoming period

Output 2.2 - Major activities conducted as part of the WASH response								
IP	Country	Site 1	Site 2	Site 3	Site 4	Refugee Camp	Migrant Response Center	Major activities started/completed; Risks identified
UNICEF	Djibouti	Galafi	Ali Sabieh (Galile)	Dora	Djibouti Port	Obock	Obock	-Contracted services to construct pipeline
IOM	Djibouti	Galafi	Ali Sabieh (Galile)	Dora	Djibouti Port	Obock	Obock	
UNICEF	Ethiopia	Hawli	Metema	Moyale	Tog Wajaale	Gambella	Semera	
IOM	Ethiopia	Hawli	Metema	Moyale	Tog Wajaale	Gambella	Semera	-Preparatory activities for procurement done; procurement will start soon
UNICEF	Kenya	Diif	Mandera	Turkane	Moyale	Dadaab		
IOM	Kenya	Diif	Mandera	Turkana	Moyale	Dadaab		-Procurement of IPC and WASH supplies for the 4 screening areas at PoEs -High risk security situations in the area delay site visits
UNICEF	Somalia	Diif	Dhoblei	Tog Wajale		Baidoa	Bosasso	
IOM	Somalia	Diif	Dhoblei	Tog Wajale		Baidoa	Bosasso	
UNICEF	South Sudan	Nimule	Renk	Nadapal		Maban		
IOM	South Sudan	Nimule	Renk	Nadapal		Maban		-Continuation of activities under other funding starting from Jan 21; include maintenance of sanitation facilities at Jelei Bus Yard Park
UNICEF	Sudan	Galabat	Joda	Hamdayet		White Nile	Gadarief	
IOM	Sudan	Galabat	Joda	Hamdayet		White Nile	Gadarief	-Started technical assessments to improve the WASH facilities at Gedaref Hospital
UNICEF	Uganda	Elegu	Busia	Malaba		Adjumani		"-Started delivery of WASH IPC items (soap, chlorine, cleaning kits) for handwashing/disinfection stations -Procurement process started and underway for ambulance"
IOM	Uganda	Elegu	Busia	Malaba		Adjumani		-Assessment for the target health faciliies of Bibia (11 km from Elegu) and Adjumani hospital are planned for next reporting period

Started | Potential risk/delays identified | Partner/intervention not active in this site | Activities to be implemented in upcoming period

Output 2.3 - Major activities conducted as part of the GBV response								
IP	Country	Site 1	Site 2	Site 3	Site 4	Refugee Camp	Migrant Response Center	Major activities started/completed; Risks identified
UNICEF	Djibouti	Galafi	Ali Sabieh (Galile)	Dora	Djibouti Port	Obock	Obock	-Engaged local partners and signed agreements with Government (APPDEM, Ministry of Women and Family)
IOM	Djibouti	Galafi	Ali Sabieh (Galile)	Dora	Djibouti Port	Obock	Obock	-Discussions conducted with MoH; activities will start Jan 2021
UNICEF	Ethiopia	Hawli	Metema	Moyale	Tog Wajaale	Gambella	Semera	"-Procurement process started and underway for supplies including PPEs/relevant kits -Discussions and coordination meetings with Ministry and government counterparts "
IOM	Ethiopia	Hawli	Metema	Moyale	Tog Wajaale	Gambella	Semera	-SOPs for PoEs set up; training to be conducted starting from Jan 2021
UNICEF	Kenya	Diif	Mandera	Turkane	Moyale	Dadaab		
IOM	Kenya	Diif	Mandera	Turkana	Moyale	Dadaab		-Recruitment of the staff; SoPs for PoEs begun -High risk security situations in the area delay site visits
UNICEF	Somalia	Diif	Dhoblei	Tog Wajale		Baidoa	Bosasso	
IOM	Somalia	Diif	Dhoblei	Tog Wajale		Baidoa	Bosasso	-SOPs at PoEs and training of the staff on GBV will be conducted starting from Jan 2021. No news from Bossaso
UNICEF	South Sudan	Nimule	Renk	Nadapal		Maban		-Identification of beneficiaries and partners
IOM	South Sudan	Nimule	Renk	Nadapal		Maban		-SOPs revision started, it will include training on PSEA
UNICEF	Sudan	Galabat	Joda	Hamdayet		White Nile	Gadarief	
IOM	Sudan	Galabat	Joda	Hamdayet		White Nile	Gadarief	Gedaref: SOPs revision started, it will include training on PSS
UNICEF	Uganda	Elegu	Busia	Malaba		Adjumani		"-Initial joint workshop health with PSEA/Gender partners -Identification of beneficiaries and partners"
IOM	Uganda	Elegu	Busia	Malaba		Adjumani		-Development/Revision of SOPs started

Started | Potential risk/delays identified | Partner/intervention not active in this site | Activities to be implemented in upcoming period

Output 2.4 - Major activities conducted as part of the RCCE response								
IP	Country	Site 1	Site 2	Site 3	Site 4	Refugee Camp	Migrant Response Center	Major activities started/completed; Risks identified
UNICEF	Djibouti	Galafi	Ali Sabieh (Galile)	Dora	Djibouti Port	Obock	Obock	
IOM	Djibouti	Galafi	Ali Sabieh (Galile)	Dora	Djibouti Port	Obock	Obock	
UNICEF	Ethiopia	Hawli	Metema	Moyale	Tog Wajaale	Gambella	Semera	
IOM	Ethiopia	Hawli	Metema	Moyale	Tog Wajaale	Gambella	Semera	
UNICEF	Kenya	Diif	Mandera	Turkane	Moyale	Dadaab		
IOM	Kenya	Diif	Mandera	Turkana	Moyale	Dadaab		-Started to work on risk communication messaging
UNICEF	Somalia	Diif	Dhoblei	Tog Wajale		Baidoa	Bosasso	
IOM	Somalia	Diif	Dhoblei	Tog Wajale		Baidoa	Bosasso	-Awareness activities have been on going. Preparing tools and methodologies for RCCE
UNICEF	South Sudan	Nimule	Renk	Nadapal		Maban		
IOM	South Sudan	Nimule	Renk	Nadapal		Maban		-PoEs equipped with IEC material
UNICEF	Sudan	Galabat	Joda	Hamdayet		White Nile	Gadarief	
IOM	Sudan	Galabat	Joda	Hamdayet		White Nile	Gadarief	-Preparation on going to scale up hygiene awareness sessions
UNICEF	Uganda	Elegu	Busia	Malaba		Adjumani		
IOM	Uganda	Elegu	Busia	Malaba		Adjumani		-Coordination with relevant stakeholders is on going in compiling the IEC materials already approved by the MoH

Started | Potential risk/delays identified | Partner/intervention not active in this site | Activities to be implemented in upcoming period

Output 3.1 - Major activities conducted as part of 'Ensuring cross-border areas are established and equipped with PPEs and Supplies'								
IP	Country	Site 1	Site 2	Site 3	Site 4	Refugee Camp	Migrant Response Center	Major activities started/completed; Risks identified
TMEA	Djibouti	Galafi	Ali Sabieh (Galile)	Dora	Djibouti Port	Obock	Obock	-Procurement of items has been conducted
TMEA	Ethiopia	Hawli	Metema	Moyale	Tog Wajale	Gambella	Semera	-Procurement of items has been conducted
TMEA	Kenya	Diif	Mandera	Turkana	Moyale	Dadaab		-Procurement of items has been conducted
TMEA	Somalia	Diif	Dhoblei	Tog Wajale		Baidoa	Bosasso	-Procurement of items has been conducted
TMEA	South Sudan	Nimule	Renk	Nadapal		Maban		-Procurement of items has been conducted
UNOPS	South Sudan	Nimule	Renk	Nadapal		Maban		-Site visit and initial assessment for building a QF/IF completed
TMEA	Sudan	Galabat	Jodah	Hamdayet		White Nile	Gadarief	
TMEA	Uganda	Elegu	Busia	Malaba		Adjumani		-Awareness activities have been on going. Preparing tools and methodologies for RCCE

Started | Potential risk/delays identified | Partner/intervention not active in this site | Activities to be implemented in upcoming period

Output 3.2 - Major activities conducted as part of 'Establishing Safe Trade Zones'								
IP	Country	Site 1	Site 2	Site 3	Site 4	Refugee Camp	Migrant Response Center	Major activities started/completed; Risks identified
TMEA	Djibouti	Galafi	Ali Sabieh (Galile)	Dora	Djibouti Port	Obock	Obock	-Initial assessments completed
TMEA	Ethiopia	Hawli	Metema	Moyale	Tog Wajale	Gambella	Semera	"-Initial assessments completed -Project implementation team established -Established a joint Tog Wajaale coordination committee/cross border committee -Finalized design for Women's market; construction to begin Jan 2021 -Consultation workshops held with women regarding COVID-19 protocols"
TMEA	Kenya	Diif	Mandera	Turkana	Moyale	Dadaab		-Initial assessments completed
TMEA	Somalia	Diif	Dhoblei	Tog Wajale		Baidoa	Bosasso	"-Initial assessments completed -Project implementation team established -Established a joint Tog Wajaale coordination committee/cross border committee -Finalized design for Women's market; construction to begin Jan 2021 -Consultation workshops held with women regarding COVID-19 protocols"
TMEA	South Sudan	Nimule	Renk	Nadapal		Maban		-Initial assessments completed
TMEA	Sudan	Galabat	Jodah	Hamdayet		White Nile	Gadarief	
TMEA	Uganda	Elegu	Busia	Malaba		Adjumani		-Initial assessments completed

Output 3.3 - Major activities conducted as part of 'Ensuring critical supply chains are preserved'								
IP	Country	Site 1	Site 2	Site 3	Site 4	Refugee Camp	Migrant Response Center	Major activities started/completed; Risks identified
TMEA	Djibouti	Galafi	Ali Sabieh (Galile)	Dora	Djibouti Port	Obock	Obock	-Preliminary engagements with Government authorities
TMEA	Ethiopia	Hawli	Metema	Moyale	Tog Wajale	Gambella	Semera	-Preliminary engagements with Government authorities
TMEA	Kenya	Diif	Mandera	Turkana	Moyale	Dadaab		
TMEA	Somalia	Diif	Dhoblei	Tog Wajale		Baidoa	Bosasso	
TMEA	South Sudan	Nimule	Renk	Nadapal		Maban		
TMEA	Sudan	Galabat	Jodah	Hamdayet		White Nile	Gadarief	
TMEA	Uganda	Elegu	Busia	Malaba		Adjumani		

Started | Potential risk/delays identified | Partner/intervention not active in this site | Activities to be implemented in upcoming period

5. Boxes of protective masks, gloves, goggles, safety boxes and other critical items delivered to South Sudan. © UNOPS

5.1.7. Procurement and distribution of critical supplies

Immediately following the programme conceptualization and announcement of the Action, UNOPS began to procure much needed critical PPEs and medical supplies, COVID-19 tests, ambulances, mobile laboratories, and field vehicles. UNOPS Ethiopia has significant experience and expertise in providing procurement support and services managing major procurement services projects for multiple Ministries in the Government of Ethiopia (particularly medical supplies), and for other UN agencies including UNHCR, UNICEF, and WHO. Therefore, while the PMU was being established, UNOPS Ethiopia was able to manage this procurement process.

For items procured by UNOPS and distributed to the Ministry of Health through IGAD, the list of items provided by IGAD were immediately procured in bulk. Once the items arrived in Ethiopia, the items were then repacked as per the needs for each recipient country and site, and then shipped to the capital city of each country by air, before further transported (usually by road) to the specific recipient site. With the movement of goods either completely stopped or significantly restricted in many countries, arrangements for further logistics and transportation, especially to hard-to-reach sites where access due to infrastructure or security situations is limited, were extremely challenging. In order to assist with these challenges and due to their wide network and experience delivering in challenging areas, WFP was engaged to transport and deliver the supplies from Ethiopia. For items procured by implementing partners as part of their implementation activities, all procurement activities are underway.

During this reporting period, all procurement activities for this programme were initiated and in various stages of completed. Delivery to final sites has begun for both items procured through UNOPS and through other IPs.

Challenges/Constraints:

i. **Global shortages:** Delays in the procurement of some items (specifically mobile laboratories, COVID-19 tests, nitrile gloves) were caused due to global shortages and unavailability of qualified suppliers. As these items were purchased for use by and protection of health workers, it was critical that supplies were procured from credible sources

ii. **COVID-19 lockdown restrictions:** Imposition of lockdowns worldwide due to COVID-19 meant limited mobility and production shutdowns globally. This contributed to production delays from suppliers (especially for ambulances and other vehicles) who had to either wait for lockdown restrictions to ease or work in limited capacity.

iii. **Supply chain volatility:** In relation to the above points, as the needs for these items increased significantly globally, and the supply becoming increasingly limited, suppliers were unable to meet demand and fulfil their commitments. This resulted in procurement processes being relaunched. Nevertheless, UNOPS made every attempt to use all available channels to source suppliers, including tapping into LTAs with other UN agencies. The volatility in the supply chain also led to shortages in different components of the required product. For example, when the COVID-19 tests were ordered during the period of an extremely high global demand, suppliers were initially unable to provide both the detection and extraction component of the test kit. In an attempt to minimize delays, UNOPS procured both components from different suppliers who had separate components in stock. Unfortunately, due this volatility, one component arrived much earlier than planned, and the other, later than agreed.

iv. **Limited availability of logistics providers/resources:** Although WFP was engaged[11] to manage this process using their network, many of their suppliers were unavailable due to lockdowns or increased demand. WFP was unable to use their own planes as anticipated since the Government of Ethiopia imposed them to prioritize shipment of other medical items for the sake of national interest. As a result, WFP had to book cargo flights through Commercial Airlines, resulting in long queues for available space. For some countries, WFP had to ship the PPEs in several batches due to aircraft cargo capacity. Each country received more than 900 cartons.

v. **Unclear customs import/export regulations:** Although UNOPS managed to overcome initial procurement challenges and ensure that all PPEs and medical supplies arrived in Ethiopia by August, the degree of bureaucracy and complications of processes related importing and then exporting out of Ethiopia was not foreseen. The changing requirements and approvals delayed the repackaging and shipment of these goods to other countries by WFP. This delay was further exacerbated by unclear or delayed reactions (import authorizations, tax clearances, etc.) from customs authorities in the recipient countries. Country specific requirements such as pre-import inspections for medical items such as test kits were not made clear at the time of planning and order. Another example is in Somalia where the COVID-19 test kits were rejected because they had less than a six month shelf life. Unfortunately, ordering a product with a longer shelf life was not possible because of the FDA regulations in the country of production, and suppliers were limited due to a global shortage and increased demand. IGAD is consulting other member states to see if these tests can be absorbed by them. In an event that this is not possible, UNOPS has negotiated with the supplier to return these tests.

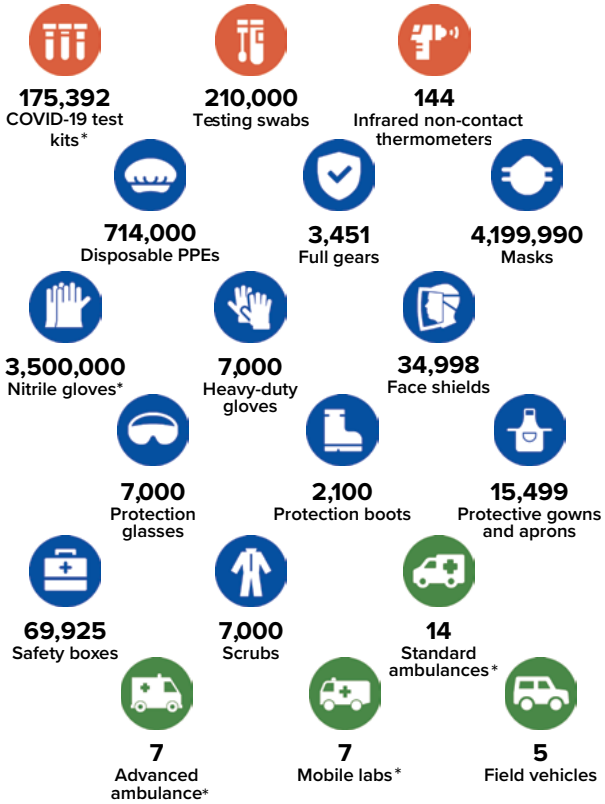
vi. **Inaccurate or missing consignee information:** Incomplete or changing consignee information resulted in delayed distribution as customs clearance letters or other shipping documents needed to be reissued.

vii. **Delayed response from customs authorities:** Delays in the provision of the necessary information and support for the clearance paperwork (donation certificates, tax exemption letters, etc.) resulted in delays in distribution. For example, the detection kits for Somalia have been waiting in Kenya for over one month because the necessary customs clearance paperwork was missing.

viii. **Changing of final distribution sites after shipping:** Requests from the member state that the final recipient site to be changed, after the items had already arrived in the country resulted in delays in distribution, and at times, in increased storage costs.

ix. **Staffing:** Unfortunately, separation of key personnel managing and coordinating this procurement process during a critical period resulted in loss of knowledge and expertise. Although the resource was replaced immediately, the necessary background and relation-

Direct Procurement Support through UNOPS



Total value of items: **€7,571,980**

*Order is placed but delivery of items is delayed due to mass shortages in the global market.

11. Complete COVID-19 test kits include testing swabs, an extraction kit, and a detection kit. All three are necessary in order to use a test effectively.

Table 3. Status update of the procurement and distribution process:

Category of item	Status as of 31 December 2020	Status as of February 2021
COVID-19 test kits	• Detection kits arrived in Member States capital cities on –Kenya on 27 November 2020 –Djibouti on 06 December 2020 –South Sudan on 15 December 2020 –Sudan on 18 December 2020 –Somalia: Shipment in Kenya pending –Ethiopia: Shipment ordered and expected to arrive in Q1 2021 –Uganda: Shipment ordered and expected to arrive in Q1 2021 • Extraction kits ordered and pending delivery, expected in Q1 2021 • Swabs delivered as part of PPE packages	• Detection kits: –Somalia: No change in status –Uganda: Order arrived in the capital city on 01 January 2021 and awaiting approval for clearance by authorities to be delivered to IGAD –Ethiopia: Shipment delivered to Consignee MoH on 23 February 2021 • Extraction kits for all countries arrived in capital cities in February 2021: –Sudan: Cleared and handed over to IGAD on on 22 February 2021 –All other countries: pending and on-going customs clearance
Field vehicles for IGAD	• Djibouti: 2 Land Cruiser Hardtop 76 4.2l 10-Seater delivered on 17 August 2020 • Kenya: 1 Land Cruiser Hardtop 76 4.2l 10-Seater delivered on 16 September 2020 • Ethiopia: 1 Land Cruiser Hardtop 76 4.2l 10-Seater delivered on 14 October 2020 • Sudan: 1 Patrol 4WD S/wagon GL 4.8L(P) 7 seats ordered	• Sudan: 1 Patrol 4WD S/wagon GL 4.8L(P) 7 seats scheduled for shipment tin Q1 of 2021
Standard ambulances	• Djibouti: 2 units delivered on 28 December 2020 • Somalia: 2 units delivered on 14 November 2020 • Uganda: 2 units delivered on 02 December 2020 • Kenya: 1 of 2 units ordered delivered on 25 September 2020, 2nd unit expected to be delivered in Q2 2021 • South Sudan: 2 units expected to be delivered Q1 2021 • Ethiopia: 2 units expected to be delivered Q1 2021 • Sudan: 2 units expected to be delivered Q2 2021	• Ethiopia: 2 units arrived in Capital city and are currently undergoing pre-delivery inspection before final delivery to consignee • Kenya: No Change • Sudan: No Change • South Sudan: 2 units arrived and pending tax exemption paperwork to facilitate customs clearance before final delivery to consignee

Category of item	Status as of 31 December 2020	Status as of February 2021
Advanced ambulances	• Advanced ambulances for all countries ordered and delivery expected in Q2 2021	• Djibouti: Scheduled for arrival in April 2021 • Somalia: Scheduled for arrival in April 2021 • Sudan: Scheduled for arrival in April 2021 • Kenya: Scheduled for arrival in April 2021 • Ethiopia: Scheduled for arrival in April 2021 • Uganda: Scheduled for arrival in April 2021 • South Sudan: Scheduled for arrival in June 2021
Mobile Laboratories	• Mobile laboratories for all countries ordered and delivery expected in Q1 2021	• 3 units to be delivered in March 2021 • 4 units to be delivered in April 2021 (delivery delayed due to shortage of key components (from IVECO) caused by COVID-19) • The Member States will receive the units in the following order provided by IGAD: Kenya, Uganda, Ethiopia, Sudan, others
PPEs and other medical supplies	• Djibouti: –Delivered to the capital on 10 December 2020 –Delivered to final destinations on 29 December 2020 • Uganda: –Delivered to capital on 16 Decmber 2020 –Delivery to final destinations underway • South Sudan: Delivered to Juba on 22 December 2020; delivered to Nimule on 29 December 2020; all other final destinations pending • Ethiopia: Delivered to capital in August 2020, delivery to final destinations pending customs clearance • Kenya: Items currently in Ethiopia, delivery pending availability of space for cargo shipment • Sudan: Items currently in Ethiopia, delivery pending availability of space for cargo shipment • Somalia: Items currently in Ethiopia, delivery pending availability of space for cargo shipment	• Uganda: delivered to final destinations Adjumani, Busia, Malaba, Elegu (on 07 January 2021) • Kenya: Items arrived in capital on 23 January 2021; delivered to final destinations Moyale (on 19 February 2021); Wajar (on 11 February 2021); Mandera (on 15 February 2021); Turkana (on 10 February 2021); and Daadab (on 10 February 2021) • Somalia: Items arrived in capital on 12 January 2021, delivered to final destinations on Mogadishu Benadir Hospital (on 04 February 2021), Bosasso (on 11 February 2021), Togwajale (on 17 February 2021). Delivery to other sites on-going • Sudan: Items arrived in capital on 26 December 2020, delivered to final destinations Kosti and Joda (on 26 January 2021), Khartoum (on 09 February 2021), Hamdayet (on 23 February 2021) • South Sudan: Items arrived in the capital on 22 December 2020; delivered to final destination Nimule (on 26 December 2020). Other sites (Renk, Maban, Nadapal) shipment on-going and delayed due to lack of access to sites • Ethiopia: final clearances received by Ethiopian authorities, shipment scheduled for the 1st week of March

5.1.8. Coordination with EU and IGAD

During this reporting period, the PMU attended weekly, and then bi-weekly, coordination meetings with the EU and IGAD. This allowed for an opportunity to provide a frequent status update and discuss any programme related critical issues in a timely manner.

In addition, the PMU, in its role, holds weekly scheduled meetings, as well as any ad-hoc meetings, with IGAD to discuss and address overall progress and challenges under this programme. Timely discussion of programme implementation and coordination issues resulted in a faster resolution.

Constraints/Challenges:

i. As implementation activities continue to increase and become more demanding, the bi-weekly meetings with IGAD and the EU in addition to the regular IGAD meetings and other coordination meetings with IPs will reduce the time available for the PMU to address IP challenges. The frequency of these coordination meetings at the level of both the EU and IGAD should be revisited.

ii. Unclear roles and responsibilities between IGAD playing a coordination role, and the PMU playing a programme management role under this programme created potential for miscommunication and ambiguity. Definition of clear responsibilities and scope of role vis-a-vis programme implementation will serve beneficial for smooth implementation and management of the programme.

5.1.9. Launch of media events for IGAD handover to MoH of the Member States

With support from the PMU, IGAD organized a media event to mark the handover of PPEs and ambulances to the Djibouti MoH on 21 December 2020. This event was attended by the EU Representative in Djibouti, the Executive Secretary of IGAD, the Resident Coordinator of the UN in Djibouti, the Minister of Health, and other high level officials from the Ministry of Health, IGAD, UN, and EU. Following the event, the PPEs were then delivered to the final programme implementation sites in Djibouti. Similar events will be organized for all other Member States in January and February 2021.

5.1.10. Responding to the refugee humanitarian crisis in East Sudan

This programme is intended to address the needs of health workers and vulnerable populations in cross-border areas. The conflict in the Tigray region of Ethiopia in November 2020 resulted in several thousands refugees crossing the border into Sudan. Existing refugee camps in the cross-border area in East Sudan are already close to capacity and have inadequate facilities. Overcrowding with limited access to WASH facilities and protective equipment will contribute to the spread of COVID-19. As a result, in discussions with the EU, IGAD, IOM and UNICEF (partners already working in the region), the PMU is organizing a response to the growing needs in the region. Funding will be allocated through a reprogramming of the budget accommodating for any cost efficiencies gained in the procurement process conducted by UNOPS, and from savings from the budget previously allocated to Eritrea.

6

6. Health care worker in IGAD site with full PPE gear providing COVID-19 testing at cross-border areas. © UNOPS

6 RISK AND ISSUE MANAGEMENT

In addition to the constraints/challenges highlighted in above sections, there are several other risks identified that may impact the effective implementation of the programme.

Risk	Likelihood of Risk	Potential Impact	Impact in 2020	Mitigation Measure/Next Steps
Active conflict and unstable security situations	High	–Lack of or limited access to implementation sites	–The planned site assessments to Renk (Wunthou border crossing), South Sudan by the UNOPS infrastructure team had to be cancelled due to lack of access caused by security incidents. The entire area was closed to any international organizations	–The UNOPS infrastructure team has negotiated with relevant authorities that project activities are humanitarian and potentially life-saving. In relation, they have negotiated the use of an aircraft by UNHAS to access the site. The site visited is expected in Q1 2020 –Use of local sub-grantees/partners where relevant and possible
Lack of transportation infrastructure	Medium	–Lack of or limited access to implementation sites	–No major impact	–Explore alternate modes of transportation or implementation (e.g. negotiate access to the site from the other side of border crossing, where possible)
Weather conditions/ flooding during rainy season	High	–Lack of or limited access to implementation sites –Increased spread of COVID-19 virus	–No major impact	–Implementation activities, especially construction activities are completed outside of the rainy season, if possible –Activities are being planned to mitigate the spread of the virus (construction of WASH facilities which that can withstand flooding)
Unstable political contexts	High	–Delayed activities	–Elections in Uganda resulted in country-wide shutdown of internet for at least 100 hours –Influx of refugees and humanitarian crisis in Sudan caused by conflicts in the Tigray region of Ethiopia	–Appropriate planning around election periods and speeding up implementation areas in relevant countries –Remain agile to reallocate funds from savings and other cost efficiencies in all areas of the programme

Risk	Likelihood of Risk	Potential Impact	Impact in 2020	Mitigation Measure/Next Steps
Limited or lack of communication infrastructure	High	–Delayed activities/lack of oversight due to lack of communication channels	–Sparing loss of connectivity/responsiveness from site focals due to lack of connection	–Explore additional methods of communication, increase field visits, engage with GIZ who is managing the digitization component of this Action to review possibilities to increase connection –Develop and launch UNOPS Collect, a remote monitoring tool that facilitates data collection without internet access[12] that allows reporting of results in low and limited bandwidth environments
PPEs and other supplies not used or activities not implemented in the intended manner	High	–Misrepresentation of results/ fraud	–No major impact in 2020	–Develop and launch UNOPS Collect, a remote monitoring tool that facilitates submission of geo-tagged and date stamped pictures of relevant activitie
Increasing priorities	High	–Increased time constraints for the PMU as programme implementation activities pick up steam; potential for changing needs and demands from Member States due to the evolving nature of the pandemic and country specific contexts	–Tigray crisis: In order to respond to the humanitarian crisis, programme activities had to be adjusted and reallocated; increased attention to this matter meant providing lower priority to other matters –Changes in scope (activities/sites) from partners	–Ensure PMU is sufficiently staffed as needed in order to allow effective management –Limit the possibility of changes to the scope of the programme –Reduce the frequency of non-critical meetings, improve effective communication, and focus on relevant coordination activities

12. The application requires, at minimum, low bandwidth internet connection to download the necessary data collection forms and upload results. However, once the form is downloaded, it remains saved on the application for data collection and submission.

Risk	Likelihood of Risk	Potential Impact	Impact in 2020	Mitigation Measure/Next Steps
Insufficient qualified staff/ delays in joining (PMU and other partners)	Medium	–It is impossible for all organizations to deliver their respective components of the programme without being appropriately resourced	–Delays in PMU staffing due to lack of qualified applicants or inability to meet gender parity requirements –Delays in staffing national and site focal points for IGAD (e.g. Djibouti/Ethiopia) –Delays in staffing for IPs (long recruitment process for all IPs or establishment of operations in a new country, eg. TMEA in Djibouti)	–Use of retainers/consultants and resources from other UNOPS offices in the region to deliver the programme –Use of IGAD ECU to manage responsibilities where possible –Use of currently employed staff (on other projects) based in activity locations
Changes in programme activities needed due to lack of an appropriate initial needs assessment	Medium	It is impossible for organisation to deliver in absence of need assessment and without further coordination with partners/ stakeholders in the region	–Delays in programme implementation –Lack of clarity and issues where the available facilities in a site are different than what is anticipated –Inability of partners to absorb support: e.g. COVID-19 tests delivery underway but Member States don't have sufficient testing machines to be able to use them effectively or received too many tests –Tardive need assessment with consequente effects of changing in scope (activities/sites) from partners. Examples: changes of the sites for final delivery of the items (Mogadishu MRC to Benadir Hospital; Diif to Belet Hawa; from Galabat, Hamdayet to Gedarif and Kassala, respectively) or changes in sites for implementation (Mogadishu to Baidoa)	Invest in appropriate need assessments prior to/during programme design even during an emergency context

7 COMMUNICATION AND VISIBILITY

The communication and visibility component is critical to the success of this programme, especially as it allows member states to see the results of this Action in a demonstrative manner. As programme implementation activities increase in 2021, communication and visibility will also become more frequent. In 2020, the critical achievements include:

I. Development and publication of the programme logo, and branding and visibility guidelines: In line with the European Union's visibility guidelines, the programme logo was created and shared with all partners. The branding and visibility guidelines communicate a harmonized approach for all material produced under this programme.

II. Establishment of a Communications Working Group: A Communications Working Group is established with focal points from each partner and each country to ensure that in-country communication and visibility is harmonized across partners to present a "one programme, one team" approach. The PMU worked and continues to work with communication focal points from each partner's country office to provide guidance and direction on any programme visibility.

III. Development of a Communications and Visibility Plan: A Communications and Visibility Plan was developed and shared with the CWG to guide programme visibility actions.

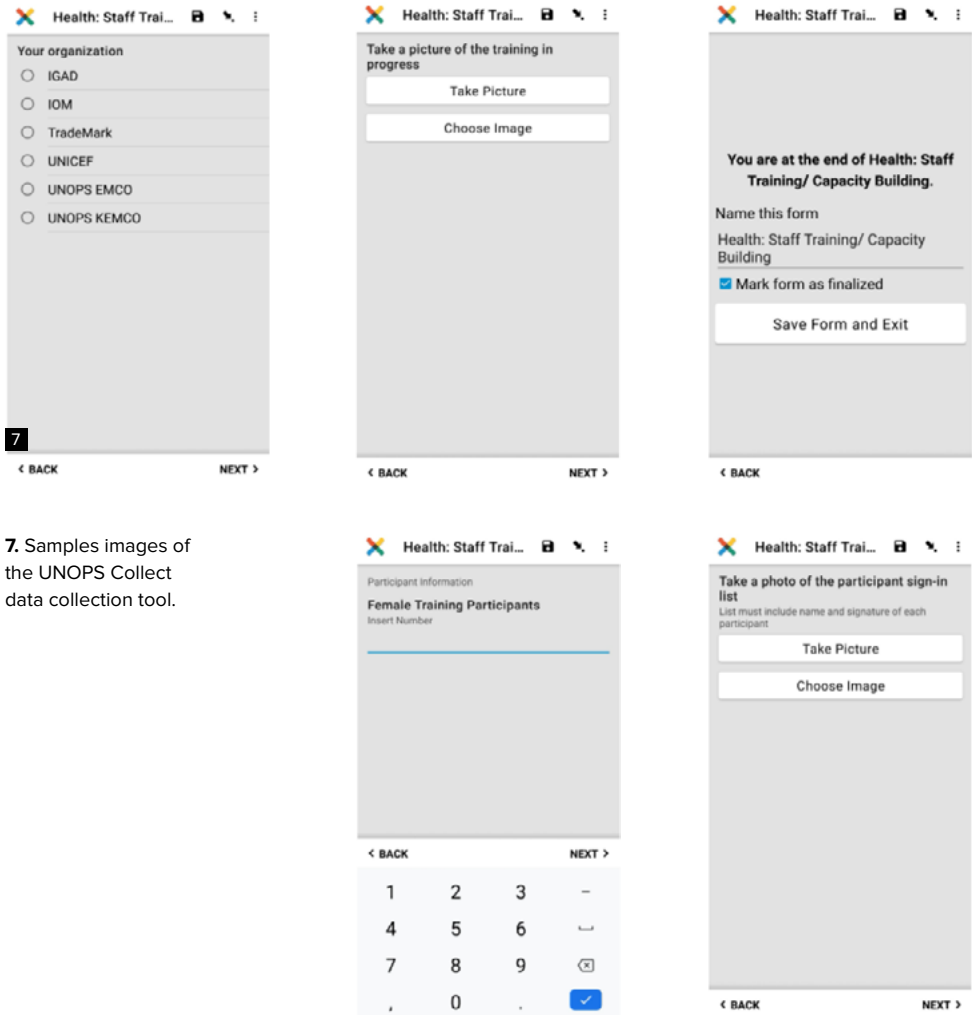
IV. Programme launch and country specific media events: This programme was officially launched in Addis Ababa at Bole International Airport, Ethiopia on 31 August 2020. The launch event included a ceremony for the handover of PPEs and other critical items procured to IGAD. Following the arrival of these items in Member States, country specific media events were organized to mark the handover of items from IGAD to the Ministries of Health of Member States . The media and handover event in Djibouti was organized on 21 December 2020. In addition to relevant media outlets, both events were attended by relevant dignitaries and high officials including EU Ambassadors and representatives, IGAD Executive Secretary, Minister of Health, and Heads of UN Agencies.

V. Online articles and twitter posts: In addition to associated press releases to media events highlighted above, see **Annex 2.**

8 MONITORING AND EVALUATION

It is incredibly challenging to transform the activities of this multi-dimensional, multi-partner, multi-country implementation programme into a coordinated and effective response mechanism. A comprehensive Monitoring and Evaluation plan with an appropriate results framework is being developed and will be formalized in Q1 of 2021. In 2020, all partner activities have been scrutinized for effectiveness, applicability, and compliance with the programme design. The PMU also worked closely with each partner to define appropriate targets for activities. Through significant investment and in-depth discussions with partners, a detailed activity framework with a harmonized list of activities[13] (and relevant indicators) in each country has been established.

The PMU has also started development of a very simple mobile remote data collection and monitoring tool (UNOPS Collect) which will allow the collection and feeding of results into a broader Management Information System. This tool will be active in Q1 2021, and allows for the collection of data, pictures, and geo-tags even in areas with no internet[14]. Currently, data validity of information provided by IP country offices is validated at their regional office and then verified by the PMU. Where relevant, IGAD ECU and the national level coordinators are engaged for additional verification of information and data.



7. Samples images of the UNOPS Collect data collection tool.

13. See **Annex 1.**

14. Internet connection is needed for downloading blank forms and uploading completed forms.

9 FINANCIAL MANAGEMENT

9.1. Utilization of Funds

Project Financial Update (as at 31 December 2020)[15]				
Outputs	**Costs Breakdown**	**Approved Budget**	**Programme Expenditure[16]**	**Expenditure Rate**
1. Project Management Unit – UNOPS	1.1 Personnel salaries (Staff)	€1,437,270	€148,867	10.36%
	1.2 Non- personnel (vehicles, fuel, laptops, etc.)	€193,820	€25,073	12.94%
	1.3 Project office portion personnel - Ethiopia Hub Support	€177,475	€6,816	3.84%
	1.4 Project office portion non personnel - Djibouti Office	€385,705	€66,731	17.30%
	1.5 Project specific output costs (materials, subcontracting, etc.)	€403,385	€287	0.07%
	Sub-total	€2,597,655	€247,774	9.54%
2. Coordination Capacity – IGAD *Objective 1 of the Action*	2.1 Personnel salaries (Staff)	€1,650,938	€699,581	42.37%
	2.2 non- personnel (vehicles, fuel, laptops, etc.)	€476,418	€201,881	42.37%
	2.3 Project office portion personnel and non personnel	€383,684	€162,585	42.37%
	2.4 Project specific output costs (materials, subcontracting, etc.)	€320,835	€135,953	42.37%
	Sub-total	€2,831,875	€1,200,000	42.37%
3. Health, WASH, GBV/ Gender Action, RCCE – UNICEF *Objective 2 of the Action*	3.1 Personnel salaries (Staff)	€2,280,511	€1,156,863	50.73%
	3.2 non- personnel (vehicles, fuel, laptops, etc.)	€1,501,579	€761,725	50.73%
	3.3 Project office portion personnel and non personnel	€1,233,360	€625,662	50.73%
	3.4 Project specific output costs (materials, subcontracting, etc.)	€11,087,829	€5,624,662	50.73%
	Sub-total	€16,103,279	€8,168,912	50.73%

15. This financial update considers the programme expenditure (i.e. UNOPS expenditure as contract holder) and does not account for any commitments currently open and not yet received.

16. Disbursements to IPs are paid as a lumpsum, therefore the breakdown per "costs breakdown category" is estimated for this interim report proportional to the budget breakdown.

Outputs	Costs Breakdown	Approved Budget	Programme Expenditure	Expenditure Rate
4. Procurement and Facilities – UNOPS *Objective 2 and 3 of the Action*	4.1 Personnel salaries (Staff)	€1,593,891	€76,537	4.80%
	4.2 non- personnel (vehicles, fuel, laptops, etc.)	€198,030	€10,540	5.32%
	4.3 Project office portion personnel - multiple offices	€177,475	€0	0.00%
	4.4 Project office portion non personnel - multiple offices	€311,519	€0	0.00%
	4.5 Project specific output costs (materials, subcontracting, etc.)	€13,922,007	€4,213,662	30.27%
	Sub-total	€16,202,922	€4,300,740	26.54%
5. Trade – TradeMark East Africa *Objective 3 of the Action*	5.1 Personnel salaries (Staff)	€531,853	€212,741	40.00%
	5.2 non- personnel (vehicles, fuel, laptops, etc.)t	€0	€0	
	5.3 Project office portion personnel and non personnel	€0	€0	
	5.4 Project specific output costs (materials, subcontracting, etc.)	€5,496,537	€2,198,614	40.00%
	Sub-total	€6,028,390	€2,411,355	40.00%
6. Facility – Health, WASH, GBV/Gender Action, RCCE – IOM Objective 2 and 3 of the Action	6.1 Personnel salaries (Staff)	€1,834,119	€1,053,032	57.41%
	6.2 non- personnel (vehicles, fuel, laptops, etc.)	€262,763	€150,861	57.41%
	6.3 Project office portion personnel and non personnel	€357,628	€205,327	57.41%
	6.4 Project specific output costs (materials, subcontracting, etc.)	€2,881,020	€1,654,095	57.41%
	Sub-total	€5,335,530	€3,063,315	57.41%
	Sub-total direct eligible costs of the Action	€49,099,651	€19,392,096	39.50%
	Indirect costs[17]	€3,436,976	€317,629	9.24%
	Total eligible costs of the Action	€52,536,627	€19,709,725	37.52%
	Provision for contingency reserve	€463,373		0.00%
	Total eligible costs	€53,000,000	€19,709,725	37.19%
	Taxes & Contributions in kind	€0		
Total costs of the Action		**€53,000,000**	**€19,709,725**	**37.19%**

17. Expenditure reported here is indirect fees incurred by UNOPS under this programme and is interim. Indirect fees incurred by grantees are captured as part of the expenditure under their respective components. The detailed financial report with the submission of the annual report will include further details.

9.2. Overview of Cost Controls

9.2.1. Financial Control

All implementing partners under this programme have established financial management and accounting policies. As part of the emergency response nature of this programme, and envisioned as part of the programme design, detailed financial reporting was not requested from UN partners. Nevertheless, the PMU verifies expenditure across partners by country, objective, and activity, where possible, to ensure reasonableness. UN partners cannot be audited under this programme due to the UN single audit principle. Nevertheless, all UN partners undergo an annual audit through the UN Board of Auditors at the organization level, and internal audits at the country office and regional level. For non-UN partners, UNOPS PMU will conduct an external financial audit of their grant before the end of the programme.

Within UNOPS, all financial and procurement transactions undergo stringent review to ensure that all activities are transparent and in line with the appropriate policy, and that there is sufficient segregation of duties. Similar robust financial processes and internal audit functions are in place for implementing partners. Additionally, all UNOPS-IP (non-UN) agreements include provisions for UNOPS to conduct a detailed verification of all financial transactions and implementation activities related to the programme.

9.2.2. Programme Quality Assurance

Quality Assurance in the Procurement Process

All suppliers selected to supply any items procured are selected through a competitive bidding and selection process. Not only does this ensure value for money, but part of the evaluation is to ensure any supplier selected has a recognized certification of quality (e.g. ISO certificate[18] or CE marking[19])

Programme Implementation and Management

The PMU holds regular meetings with IGAD and other IPs to ensure that the programme is implemented in accordance with the agreed plans in order to deliver the most impact for final beneficiaries. Additionally, the regional coordinators for each IP review all reports and results of specific country offices to ensure they are in accordance with agreed deliverables.

In order to improve overall programme oversight and strengthen assurance, the PMU proposes the following actions from the next quarter:

i. Introduce quantitative and qualitative monthly update reports from the IPs in addition to regular results reporting
ii. Coordinate with IGAD site level focals to conduct more frequent visits to specific implementation sites and to report to the PMU
iii. Coordinate with IP focal points in specific distribution sites[20] to provide an informal update on use of delivered items
iv. Organize site level visits and field monitoring by the PMU

18. A certification issued by the International Organization for Standardization, which is dedicated to developing voluntary standards that ensure product safety and quality in a global marketplace.

19. CE marking is an administrative marking that indicates conformity with health, safety, and environmental protection standards for products manufactured to the standards of the European Economic Area.

20. In reference to sites where PPEs/Vehicles were delivered.

Figure 5. Budget Forecast for Upcoming Period

Programme budget forecast for the upcoming period (EUR)				
Output (Partner)	**Total Budget**	**Expenditure to date**	**Forecast for upcoming period**	**Remaining Balance**
Project Management Unit (UNOPS)	2,597,655	247,774	653,000	1,696,881
Coordination Capacity (IGAD)	2,831,875	1,200,000	682,594	949,281
Health, WASH, GBV/Gender Action, RCCE (UNICEF)	16,103,279	8,168,912		7,934,367
Procurement and Facilities (UNOPS)	16,202,922	4,300,740	4,100,000	7,802,182
Safe Trade (TMEA)	6,028,390	2,411,355	1,371,647	2,245,388
Facility - Health, WASH, GBV/Gender Action, RCCE (IOM)	5,335,530	3,063,315		2,272,215
Subtotal direct eligible costs of the Action	**49,099,651**	**19,392,096**	**6,807,241**	**22,900,314**
Indirect costs	3,436,976	317,629		3,119,347
Provision for contingency reserve	463,373	0	0	463,373
Total costs of the Action	**53,000,000**	**19,709,725**	**6,807,241**	**26,483,033**

Figure 6. Summary of Programme Expenditure (EUR, as of 31 Dec 2020)

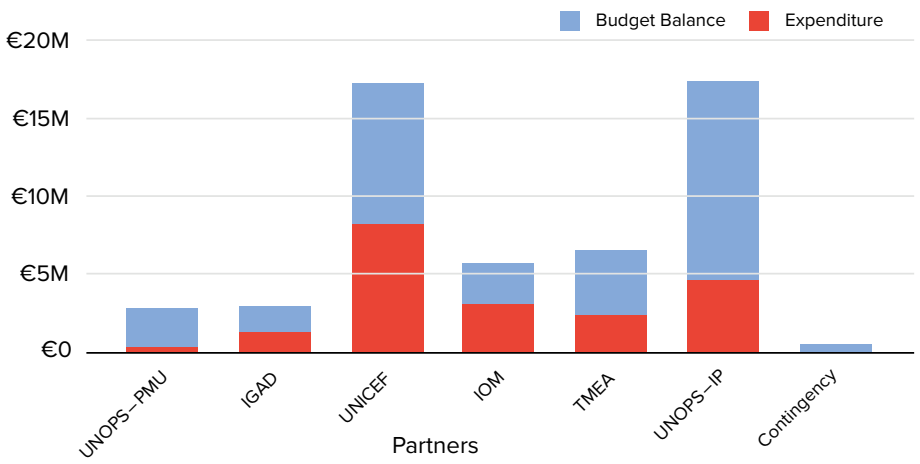


Figure 7. Financial support provided per country

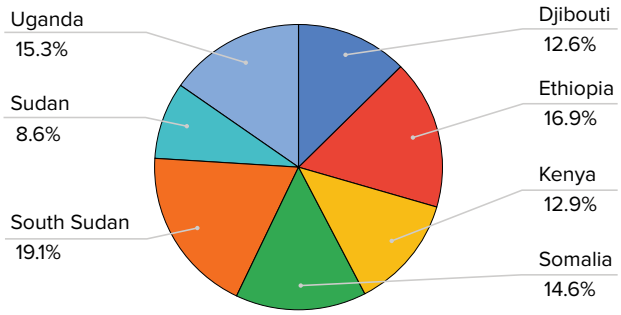
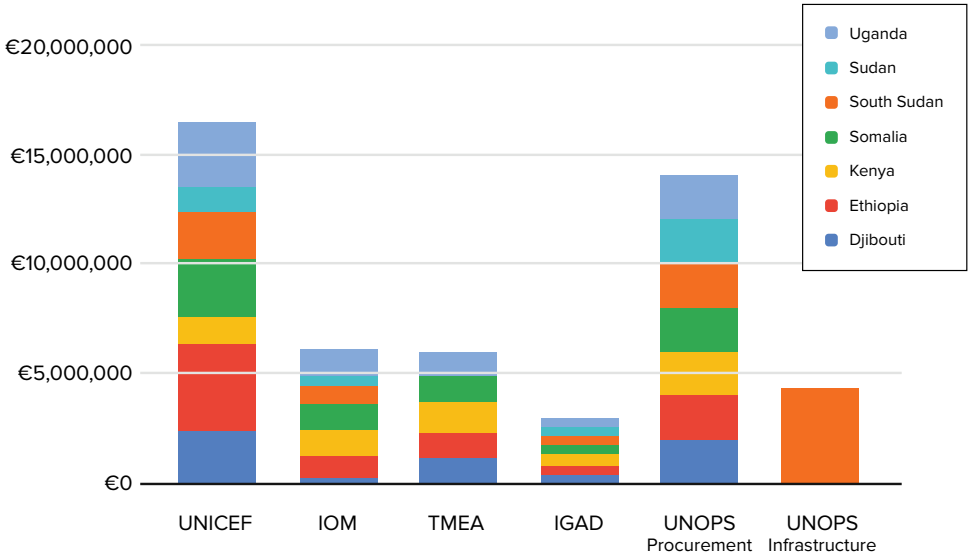


Figure 8. Financial support provided per IP/country



10 PROGRAMME WORK PLAN

In order to implement an effective and impactful programme with measurable results addressing real needs at the selected cross-border areas, the majority of the activities implemented by the partners during this period focused on planning and coordination activities. The table below highlights the list of major programme management and coordination activities and deliverables at the PMU and IGAD level. Activities and deliverables to be implemented by other partners are found in Annex 1.

Overview of the work plan for Programme Management and Coordination (PMU and IGAD):

	Status as of 31 December 2020	Y1 Q1			Y1 Q2			Y1 Q3			Y1 Q4			Y2 Q1			Y2 Q2			Y2 Q3			Y2 Q4			Y3 Q1			Y3 Q2		
		MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APL	MAY	JUN	JUL	AUG	SEP	OCT
Establishment and management of the PMU																															
EU-UNOPS Agreement signed	Completed																														
Hiring and on-boarding personnel	Started and on-going																														
UNOPS-IP Agreements signed	Completed																														
Review of IP reports	Planned activity																														
Progress reports due to the EU	Planned activity																														
Annual reports due to the EU	Planned activity																														
Programme management and implementation coordination activities																															
Coordination meetings with the EU	Started and on-going																														
Coordination meetings with IGAD	Started and on-going																														
Project Steering Committee #1	Completed																														
Implementation Working Group #1	Completed																														
On-going project management	Started and on-going																														

	Status as of 31 December 2020	Y1 Q1			Y1 Q2			Y1 Q3			Y1 Q4			Y2 Q1			Y2 Q2			Y2 Q3			Y2 Q4			Y3 Q1			Y3 Q2		
		MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APL	MAY	JUN	JUL	AUG	SEP	OCT
Detailed work-plan definition	Completed																														
Coordination of detailed work plan activities	Started and on-going																														
Implementation Working Group #2	Completed																														
Regional/Country specific coordination meetings	Started and on-going																														
Implementation Working Group meetings	Started and on-going																														
East-Sudan Refugee Response	Started and on-going																														
IGAD coordination activities																															
Establish an ECU at regional level	Completed																														
Liaise with Member States and identify programme implementation sites	Completed																														
Identify procurement needs for each Member State	Completed																														
Convene Project Steering Committees	Started and on-going																														
Establish cross-border committees	Planned activity																														
Convene regular cross-border meetings	Planned activity																														
Coordinate with relevant regional bodies (Africa CDC, RCC)	Planned activity																														
Establish links with IGAD university consortium to conduct research activities	Planned activity																														
Coordinate with relevant focals in Member States	Started and on-going																														
Establish Rapid Regional Response Teams	Started and on-going																														
Research and publications	Planned activity																														
Handover of PPEs to MoH of Member States	Started and on-going																														
Procurement and distribution																															
PPEs procured and handed over to IGAD	Completed																														
PPEs delivered to country capitals	Started and on-going																														

	Status as of 31 December 2020	Y1 Q1			Y1 Q2			Y1 Q3			Y1 Q4			Y2 Q1			Y2 Q2			Y2 Q3			Y2 Q4			Y3 Q1			Y3 Q2		
		MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APL	MAY	JUN	JUL	AUG	SEP	OCT
PPEs delivered to final sites	Started and on-going																														
COVID-19 test kits delivered to country capitals	Started and on-going																														
Field vehicles delivered to IGAD	Started and on-going																														
Ambulances delivered to country capitals (total 14)	Started and on-going					1		2	4			4			3																
Mobile labs delivered to country capitals	Planned activity																														
Communication and Visibility																															
Programme launch event	Completed																														
Drafting press releases	Completed																														
Develop Communication and Visibility Plan	Completed																														
Communication Working Group meetings	Started and on-going																														
On-going communication/visibility initiatives (monthly newsletters, fact sheets, etc.)	Started and on-going																														
Country specific media events	Started and on-going																														
Monitoring and Evaluation																															
Specific reporting indicators established	Completed																														
Set-up a monitoring and MIS plan	Started and on-going																														

Programme implementation and IP work-plan: Refer to **Annex 1.**

11 CONCLUSION

December 2020 marked the end of the preparatory phase of the project. The first 2 months of the Action, until the Agreement with the EU was signed, were primarily focused on high level project design and partner selection. Immediately following the signature of the Programme Agreement, negotiations with implementing partners on broader scope of activities and budget were begun. Detailed need assessments and specific implementation activities were only started by IPs once the agreements were signed. This, unfortunately, led to a delay of approximately 3 months in project activities. During this reporting period, significant efforts were made to identify and build consensus with partners on implementation activities and relevant indicators. During the period of needs assessments and activity definition, based on new information or changing country context and needs, there was a realignment of activities at the site level, with some partners adjusting the sites where they were initially planned to implement.

During this reporting period, the key deliverables, in addition to needs assessment and stakeholder coordination, included overall programme management, the development of instruments and tools for governance and effective management of the programm, and procurement of PPes, COVID-19 test kits, ambulances, mobile clinics, and field vehicles. An effective monitoring and evaluation plan and tools were also in the process of being developed.

With this much needed preparatory phase now completed, the project is in a position to deliver strong results in 2021. The Programme Management Unit remains confident that this programme will meet its objectives by the end of the implementation period, and deliver some much needed support to the IGAD Member States as they battle the health and socio-economic impact of the COVID-19 pandemic.