

UNHCR Evaluation Management Response			
Evaluation title:	<i>Baseline Assessment of Non-Communicable Diseases (NCDs) for Refugee and Host Community in the East and Horn of Africa and Great Lakes Region: The Context of Tanzania 2022</i>		
UNHCR evaluation reference:	EVO/2024/13		
Entity that commissioned the evaluation:	East and Southern Africa, Regional Bureau		
Due date of Management Response:	5/May/2025		
Coordinator of Management Response:	Asaad Kadhum/Hassan Abdi	Senior Public Health Officer/PHO	RB ESA
Management Response approved by (<i>senior manager in commissioning office</i>):	Name: Mamadou Dian Balde	Job title: Regional Director	Country/Office: RB ESA
Date:	10/03/2026		

General comments on the evaluation:	<p><i>[add any general remarks by the commissioning office on the evaluation findings, recommendations]</i></p> <p>The commissioning office appreciates the thorough baseline assessment and finds the results highly valuable in understanding the current status of NCD services, behavioural risk factors, and system-level gaps within the refugee settings. The findings clearly highlight ongoing challenges such as limited service availability, inadequate staffing, frequent stock-outs of essential NCD commodities, and low community awareness.</p> <p>The recommendations provided are relevant and actionable, and they will help guide future planning, advocacy, and program strengthening efforts. Overall, the assessment offers a strong evidence base that will support informed decision-making and enhance the effectiveness and accountability of NCD interventions moving forward</p>
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RECOMMENDATION 1:	<p>Championing against tobacco use: <i>the assessment found that tobacco smokers were initiated to tobacco smoking at a very early age. The project should develop innovative approaches for advocating against tobacco use</i></p>		
Management response:	<input checked="" type="checkbox"/> Agree <input type="checkbox"/> Partially agree <input type="checkbox"/> Disagree		
Reasons (if partially agree or disagree):	<i>[add only if partially agree or disagree was selected]</i>		
Unit or function responsible:	RB/UNHCR Tanzania		
Top-line planned actions	By whom	Comments	Progress

			Expected completion date	Status	Comments	
1	Strengthen advocacy and community-level interventions to prevent early initiation of tobacco use and promote healthy behaviours.	Tanzania Country Office (Health/NCD Focal Point) & Implementing Partners (MTI, TRCS)	<ul style="list-style-type: none"> • Design and implement targeted anti-tobacco awareness activities focusing on adolescents and young adults, informed by evidence that initiation occurs at a very early age. • Equip CHWs with tailored IEC materials and simple messaging tools to integrate anti-tobacco education into routine household visits and community dialogues. • Engage community influencers (teachers, religious leaders, youth mentors) to reinforce consistent anti-tobacco messaging during gatherings, school sessions, and religious forums. • Develop innovative, youth-friendly communication approaches (peer-led sessions, storytelling, sports events) to discourage early uptake of tobacco products. • Use camp-wide communication channels (radio spots, posters, megaphone announcements) to regularly highlight the health risks associated with tobacco use. • Strengthen monitoring by CHWs and community committees to identify early patterns of tobacco initiation and refer at-risk youth for counselling. 	Dec 2024	Completed and ongoing as per routine as messages were intergrated into community awareness programs	The planned activities were partially completed, with progress noted in awareness-raising and community engagement efforts; however, several actions remain ongoing due to capacity constraints, limited CHW coverage, and the need for continued investment in youth-focused prevention approaches. While initial steps were taken to integrate anti-tobacco messaging into community platforms, full implementation will require additional time and continued partner support to ensure sustainable behaviour-change outcomes.

RECOMMENDATION 2:		<i>Sustained advocacy, awareness creation and engagement of parents, caregivers, and faith leaders on their role in creating a healthy environment to support healthy lifestyles for children and their families to address issues that lead to NCDs and support practices that protect their families from being exposed to NCDs.</i>				
Management response:		<input checked="" type="checkbox"/> Agree <input type="checkbox"/> Partially agree <input type="checkbox"/> Disagree				
Reasons (if partially agree or disagree):		<i>[add only if partially agree or disagree was selected]</i>				
Unit or function responsible:		RB/UNHCR Tanzania				
Top-line planned actions		By whom	Comments	Expected completion date	Progress	
					Status	Comments
1	<i>Strengthen and sustain community-based NCD prevention efforts by expanding targeted advocacy and continuous awareness activities for parents, caregivers, and faith leaders to promote healthy family environments and reduce exposure to NCD risk factors. (Scale up sustained community advocacy and engagement to empower families and faith leaders in promoting healthy lifestyles and preventing NCD risks.</i>	Tanzania Country Office – Health/NCD Team, with Implementing Partners (MTI, TRCS).	<ul style="list-style-type: none"> • Conduct continuous awareness sessions with parents, caregivers, and faith leaders on healthy lifestyles, risk factors, and early prevention of NCDs, using community gatherings, faith-based forums, women’s groups, and school-linked platforms. • Integrate NCD prevention messaging into routine CHW activities, including home visits, support groups, and outreach events, to ensure families receive consistent guidance on nutrition, physical activity, and reducing exposure to harmful behaviours. • Develop and distribute culturally appropriate IEC materials that simplify NCD risks and preventive behaviours for households and faith-based institutions. • Engage religious and community leaders as champions to reinforce positive norms, dispel myths, and encourage supportive family environments that reduce exposure 	<i>By Dec 2024</i>	Completed a sper the project workplan but ongoing as roputine	Significant progress has been made in strengthening community engagement and raising awareness among parents, caregivers, and faith leaders, with many advocacy and education activities already integrated into routine CHW outreach and community forums. However, these efforts remain insufficient to fully meet the scope and depth envisioned in the recommendation, mainly due to limited CHW coverage, competing community priorities, and the need for more frequent and sustained awareness sessions. Continued investment and partner support are still required to

			<p>to tobacco, unhealthy diets, harmful alcohol use, and physical inactivity.</p> <ul style="list-style-type: none"> Organize periodic community dialogues (barazas, faith-based seminars, caregiver education sessions) to foster collective responsibility for children's and families' health. 			reinforce positive behaviours and ensure consistent, long-term impact across all target groups.
RECOMMENDATION 3:		<i>Advocating for targeted initiatives with high impacts in reducing food insecurity through livelihoods and targeted food security programs. This could include livelihoods-based interventions which will help the refugees secure adequate and sustainable income thus a reduction in food insecurity.</i>				
Management response:		<input type="checkbox"/> Agree <input checked="" type="checkbox"/> Partially agree <input type="checkbox"/> Disagree				
Reasons (if partially agree or disagree):		Huge investment needed to achieve this – this will take long time to achieve requires multi stakeholder including policy changes				
Unit or function responsible:		RB/UNHCR Tanzania				
Top-line planned actions		By whom	Comments	Expected completion date	Progress	
					Status	Comments
1	Advocate for and expand targeted livelihood and food-security initiatives that strengthen household self-reliance, improve dietary access, and reduce overall food insecurity among refugee families.	Tanzania Country Office Livelihoods, Protection, and Public Health Units, together with Implementing Partners (e.g., MTI, TRCS, WFP).	<ul style="list-style-type: none"> Advocate with government, donors, and partners for increased investment in livelihoods-focused food security programmes that address chronic food gaps in refugee settings. Design and expand livelihood opportunities such as small business grants, vocational skills training, income-generating activities, kitchen gardening and climate-smart agriculture to enhance household self-reliance. Work with WFP and partners to target the most food-insecure households with complementary livelihood support alongside food assistance to reduce long-term dependency. 	<i>Continuous</i>	<i>Ongoing</i>	Considerable progress has been made in advocating for improved food security and expanding livelihood activities in the camps. Several partners have initiated small-scale livelihood efforts, and targeted food support has reached vulnerable NCD patients and households. However, these actions remain insufficient to significantly reduce overall

			<ul style="list-style-type: none"> Integrate nutrition education and budgeting skills into community sessions to help families better use available resources and improve dietary diversity. Strengthen monitoring systems to track food security trends, identify vulnerable households, and adjust livelihood interventions for maximum impact 			food insecurity , which continues to affect dietary quality and NCD risk. More sustained advocacy, increased funding, and wider coverage of livelihood interventions are needed to achieve meaningful and lasting improvements in household food security.
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RECOMMENDATION 4:		Staffing: The assessment advocates for additional staffing in the health facilities, specifically in the NCD unit.				
Management response:		<input checked="" type="checkbox"/> Agree <input type="checkbox"/> Partially agree <input type="checkbox"/> Disagree				
Reasons (if partially agree or disagree):						
Unit or function responsible:		RB/UNHCR Tanzania				
Top-line planned actions	By whom	Comments	Expected completion date	Progress		
				Status	Comments	
1	Advocate for incremental staffing support within existing partner structures by reallocating available human resources and identifying opportunities for task-shifting to strengthen NCD service delivery in the health facilities.	<i>UNHCR Tanzania, MTI, TRCS, MOH</i>	<ul style="list-style-type: none"> Work with implementing partners to review current staffing gaps and reassign available clinical staff to support NCD consultations where feasible. Introduce task-shifting approaches, enabling trained nurses and clinical officers to manage stable NCD cases to reduce pressure on limited specialized staff. Strengthen CHW involvement in NCD follow-ups, counselling, and adherence 	By 2024	Completed	Some progress has been made in strengthening the capacity of existing health workers through training and task-sharing; however, the overall staffing needs remain unmet . The high workload, limited number of trained NCD personnel, and reliance on partners constrain full implementation. More sustained advocacy and

			<p>monitoring to reduce the workload on facility-based clinicians.</p> <ul style="list-style-type: none"> • Advocate with partners and donors for future recruitment or secondment of additional staff dedicated to NCD management, especially in high-burden facilities. • Provide refresher training for existing clinical staff to expand their capacity in NCD diagnosis and management, thereby increasing functional staffing without requiring new hires. 			resource mobilisation will be required to ensure adequate clinical staffing for comprehensive NCD care.
RECOMMENDATION 5:		Support the equipping of health facilities with NCD equipment, diagnostic tests, and consumables to promote adequate and timely stocking of the health facilities.				
Management response:		<input checked="" type="checkbox"/> Agree <input type="checkbox"/> Partially agree <input type="checkbox"/> Disagree				
Reasons (if partially agree or disagree):		<i>[add only if partially agree or disagree was selected]</i>				
Unit or function responsible:		RB/UNHCR Tanzania				
Top-line planned actions		By whom	Comments	Expected completion date	Progress	
					Status	Comments
1	<ul style="list-style-type: none"> • Worked with implementing partners and facility management to identify priority NCD equipment, diagnostic needs and essential consumables, and supported procurement within available project resources. • Facilitated timely distribution of procured items to targeted health facilities to strengthen NCD screening, diagnosis and routine case management 	UNHCR Tanzania	<ul style="list-style-type: none"> • Conducted joint reviews with partners to determine gaps in NCD equipment, diagnostics and consumables in camp-based health facilities. • Procured and supplied essential items such as basic diagnostic tools, BP machines, glucometers, test strips and related consumables within Phase 1 resources. Sophisticated NCD machines were procured • Coordinated with partners and facility teams to ensure proper utilisation, 	By 2024	Completed	Major procurement was completed in line with the project proposal, and both partner-run and government health facilities received essential NCD equipment and consumables. While needs in the facilities remain immense, the support provided in 2023 significantly strengthened diagnostic

			<p>documentation and stock monitoring for timely replenishment.</p> <ul style="list-style-type: none"> • Provided guidance to health staff on correct use and maintenance of the equipment to optimize service delivery. • Explore opportunities for additional support, although further procurement was limited by funding constraints beyond Phase 1. 			capacity within the scope of available resources
RECOMMENDATION 6:		<p><i>Establishment of peer support programs/ groups to provide community level support in response to the shortage of CHWs in conducting follow-ups among patients therefore enhancing support for the delivery of mental health services that complement the efforts of CHWs. The group participants can assist in conducting follow-ups, monitoring medication adherence, providing basic support, and referring clients to specialized mental health services as needed.</i></p>				
Management response:		<input checked="" type="checkbox"/> Agree <input type="checkbox"/> Partially agree <input type="checkbox"/> Disagree				
Reasons (if partially agree or disagree):		<p>[add only if partially agree or disagree was selected]</p>				
Unit or function responsible:		UNHCR Tanzania Public Health Unit and program/operations				
Top-line planned actions		By whom	Comments	Expected completion date	Progress	
					Status	Comments
1	<ul style="list-style-type: none"> • Facilitate the creation of peer-support groups to complement CHW efforts by providing community-level follow-up, basic support and adherence monitoring for NCD and mental-health patients. 	UNHCR TZ	<ul style="list-style-type: none"> • Identified and mobilized community members—including stable NCD and mental-health patients—who could serve as peer supporters within their neighbourhoods. • Formed small peer-support groups in the camps to help monitor medication adherence, provide basic psychosocial 	2024 Dec	Completed by the end of the project but integrated into general Primary health care activities	Partially implemented. Peer-support mechanisms were established in 2023 to reinforce follow-up and adherence support in the community, helping mitigate CHW shortages. Further expansion will depend on

	<ul style="list-style-type: none"> Provide orientation and light-touch training to selected peer group members to strengthen referral, follow-up and medication-adherence support within their communities 		<p>support, and encourage attendance at health appointments.</p> <ul style="list-style-type: none"> Linked peer groups with CHWs and health-facility focal staff to streamline referrals and ensure follow-up for individuals presenting with worsening symptoms or missed appointments. Conducted orientation sessions for peer supporters on confidentiality, appropriate support boundaries, identifying red-flag symptoms and when to refer clients to CHWs or health facilities. Encouraged integration of peer-support activities into community structures (e.g., women’s groups, youth groups, faith-based groups), improving continuity of support despite CHW shortages. 			future resources and partner capacity.
RECOMMENDATION 7:	<i>Awareness creation on drug adherence to enhance good health seeking behaviours among the target population, there is need to counsel and educate the NCD clients on the importance of modern medicine and drug adherence before providing them with the medication.</i>					
Management response:	<input checked="" type="checkbox"/> Agree <input type="checkbox"/> Partially agree <input type="checkbox"/> Disagree					
Reasons (if partially agree or disagree):	[add only if partially agree or disagree was selected]					
Unit or function responsible:	RB/UNHCR Tanzania					
Top-line planned actions	By whom	Comments	Expected completion date	Progress		
				Status	Comments	

1	<ul style="list-style-type: none"> • Integrated drug-adherence counselling into routine NCD consultations and community outreach to ensure clients understood the importance of consistent medication use before receiving treatment. • Equipped CHWs and partner staff to reinforce adherence messages during household visits and follow-up interactions. 	UNHCR TZ	<ul style="list-style-type: none"> • Counsele NCD clients at health facilities on the importance of completing prescriptions, avoiding treatment interruptions, and recognizing early warning signs. • CHWs provided adherence reminders, follow-up visits, and basic guidance for clients struggling with consistent medication use. • Delivere short educational sessions through community structures (women’s groups, youth clubs, faith-based groups) to strengthen understanding of modern medicine and its role in controlling NCDs. • Distribute simple IEC materials promoting adherence and explaining how medication supports long-term disease control. • Encourage peer-support groups to share reminders and encourage members to remain consistent with treatment plans. 	<i>Dec 2024</i>	Completed with the project but expected to continue as routine service	Fully implemented within available scope. Drug-adherence counselling was integrated into facility- and community-level activities in 2023/2024, improving understanding of modern medicine and supporting better follow-up among NCD clients.
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