MONITORING AND EVALUATION PRACTICES OF NGOs
IMPLEMENTING HIV/AIDS PROJECTS
IN LUWERO AND NAKASEKE

BY

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A report submitted to the graduate school in partial fulfillment for the award of masters of Business Administration of Makerere University

OCTOBER 2013
DECLARATION

(i) I Mutyaba Stephen do hereby declare that “monitoring and Evaluation practices of NGOs implementing HIV/AIDS project in Luwero and Nakaseke” is entirely my original work, except where acknowledged, and that it has never been submitted before to any University or Institution of higher learning for the award of a degree.

(ii) This report has been submitted for examination with my approval as the candidate’s supervisor

Dr. Bruno Yawe

........................................

Date: .................................
DEDICATION

I dedicate this piece of work to my late parents, I will dearly love you. (RIP)
ACKNOWLEDGEMENT

Special thanks go to my family that has stood the test of time while undertaking this project, Cynthia and Peninah, all my relatives who have tirelessly lifted me up and always encouraged me; it’s my prayer that God rewards each and every individual.

I also wish to extend my special thanks to my supervisor, Dr.Yawe for the guidance and insights he has often challenged me throughout this research study.

Lastly, I must extend my thanks to the District Community Officers of Luwero and Nakaseke district and the management of the NGOs that responded positively to this study.
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LIST OF ABBREVIATIONS

ACHAP                African Comprehensive HIV/AIDS Partnership
APM                  Association for Project Management
APMBOK               Association for Project Management Body of Knowledge
ARVs                 Anti Retro -Virals
Aus AID              Australian Government Overseas AID program
BCC                  Behavioral Change Communication
CBO                  Community Based Organization
CHBC                 Community Health Based Care
DFID                 Department of Foreign International Development
EVM                  Earned Value Management
FBO                  Faith Based Organizations
FHI                  Family Health International
GDP                  Gross Domestic Product
GFATM                Global Fund to Fight AIDS Tuberculosis and Malaria
GRIDS                Gay Related Immune Deficiency Syndrome
HDN                  Health Development Network
HIV/AIDS             Human Immune Virus/Acquired Immune Deficiency Syndrome
IEC                  Information Education Communication
IFAD                 International Fund for Agricultural Fund
IFRC                 International Federation of Red Cross
LFA                  Logical Framework Approach
<table>
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<tr>
<td>M&amp;E</td>
<td>Monitoring and Evaluation</td>
</tr>
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<td>MSM</td>
<td>Men who have Sex with Men</td>
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<td>NGO</td>
<td>Non Governmental organizations</td>
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<tr>
<td>NORAD</td>
<td>Norwegian Agency for Development Cooperation</td>
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<tr>
<td>OECD</td>
<td>Organization for Economic Co-operation and Development</td>
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<tr>
<td>OVCs</td>
<td>Orphans and other Vulnerable Children</td>
</tr>
<tr>
<td>PASSIA</td>
<td>Palestine Academic Society for International Affairs</td>
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<tr>
<td>PEPFAR</td>
<td>President's Emergency Plan for AIDS Relief</td>
</tr>
<tr>
<td>PLWHA</td>
<td>People Living With HIV/AIDS</td>
</tr>
<tr>
<td>PMBOK</td>
<td>Project Management Body of Knowledge</td>
</tr>
<tr>
<td>PMI</td>
<td>Project Management Institute</td>
</tr>
<tr>
<td>PMTC</td>
<td>Prevention of Mother to Child Infection</td>
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<tr>
<td>UNAIDS</td>
<td>United Nations Program on HIV/AIDS</td>
</tr>
<tr>
<td>UNDP</td>
<td>United Nations Development Program</td>
</tr>
<tr>
<td>UNFPA</td>
<td>United Nations Fund for Population Activity</td>
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<tr>
<td>US$</td>
<td>United States Dollars</td>
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<tr>
<td>USAID</td>
<td>United States Agency for International Development</td>
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<td>WHO</td>
<td>World Health Organization</td>
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ABSTRACT

One of Uganda’s greatest development challenges is the HIV/AIDS pandemic which has affected it with immense proportion. A lot of stakeholders including government, private companies, international donor agencies, and civil society have come up with interventions to respond to this challenge of fighting this pandemic worldwide.

Among the key players in this fight against HIV/AIDS in Uganda are civil society organizations, commonly known as NGOs. These organizations play a crucial role of bringing HIV/AIDS services to the communities where the other players may not reach or may not be effective. The services the NGOs offer to communities are normally delivered as projects. Effective monitoring and evaluation of projects is usually one of the ingredients of good project performance and provides means of accountability, demonstrating transparency to the stakeholders and facilitates organizational learning for benefit of future projects.

This study sought to determine how effectively the HIV/AIDS projects implemented by the local NGOs are monitored and evaluated in Nakaseke and Luwero Districts. The study investigated the monitoring and evaluation practices of the NGOs and compared them with the best practices. Data for the study was collected using the descriptive survey method where a questionnaire was administered to the officials of the NGOs. The results of the study show that at most 71% of the NGOs were implementing Behavioral Change Communication projects. The study also determined that the monitoring and evaluation practices of the local NGOs fell short of the best practices. Most of the best practices were ignored and there was no reliable information of proof for those that are done, and others were not done at all. Planning for monitoring and evaluation
was also a problem, for some ignored this while implementing projects. The study found out that all in all, the projects implemented by the local NGOs did not follow the best practices required for effective Monitoring and Evaluation.
CHAPTER ONE: INTRODUCTION

1.0 Background

Uganda was one of the first sub-Saharan African Countries to be affected by HIV/AIDS. It is among the countries in the world hit by the Human Immune deficiency Virus / Acquired Immune Deficiency Syndrome (HIV/AIDS) pandemic and has become one of its developmental challenges. The level of the problem has reached severe epidemic proportions, with an estimated 1,200,000 people out a total country population of 33 million people infected with HIV that causes AIDS (UNAIDS, 2011). With an adult (15-49 yrs) prevalence increasing to 6.4 % and 0.7% children aged less than 5 years infected with the virus(Uganda HIV Sero- Behavioral Survey 2005) Uganda now has one of the worst prevalence rates in the world according to the Uganda AIDS Indicator Survey report. There are an estimated 100,000 orphans as a result of this scourge, bearing huge pressure on the social welfare sector (WHO, 2011). The pandemic has affected all economical and social sectors of the country.

Several stakeholders in the country have instituted a number of interventions to fight this scourge and respond to the challenges presented by this scourge. The stakeholders in this fight include the government of Uganda, international development partners through their agencies like United States Agency for International Development (USAID), Department For International Development (DFID), the United Nations Joint Program on HIV/AIDS(UNAIDS) and other United Nations (UN) family agencies like United Nations Development Program (UNDP).

The other key player in the fight against HIV/AIDS is the civil society through Non Governmental Organizations (NGOs). NGOs particularly the local ones are playing a crucial role in taking HIV/AIDS services closer to the people in the community where other players may not be able to cover or may not be as effective as the local NGOs. Their role supplements the role
played by all the other stakeholders in the fight against this scourge. The NGOs solicit for resources from donors to carry out their activities through projects they implement.

**Resources and objectives to respond to HIV/AIDS**

A lot of resources have been provided to the local NGOs to implement HIV/AIDS related projects. The donors and other stakeholders expect transparency, proper accountability and good project performance from them. For example Uganda applied for 5 grants totaling up to US$ 426,763,257 to be provided for the fight against AIDS Tuberculosis and Malaria (GFATM) to be spent by Uganda in its fight against the scourge (Global fund status report 2011). A big portion of these GFATM funds has been provided to NGOs to implement projects to fight HIV/AIDS (New Vision Sept.17 2012). The resources were provided with set objectives of adequately responding to the challenges posed by HIV/AIDS.

**NGOs**

NGOs carry out projects with the resources provided in order to achieve objectives such as reduction in HIV prevalence rates in the areas, improvement in quality of life for People Living with HIV/AIDS (PLWHA) and mitigation of the impacts of HIV/AIDS.

**Need for project monitoring**

There was a need to determine whether the resources provided by the donors are being used efficiently and effectively, whether the projects are within schedule and to determine any problems that may be hampering the implementation. Determination of efficient management of resources is a factor of project monitoring.
Need for evaluation

There was a need to determine whether the set objectives are achieved and extent of achievement of the same plus capture any lessons learned from the implementation of the projects to aid future projects. This is a function of project evaluation.

Research question

The research question of the study was finding out whether monitoring and evaluation was done effectively on the projects implemented by local NGOs and if at all they compared with best practices. The subsequent sub sections expounded on the research dilemma, objectives of the research and the contextual definition of terms used in this study.

1.1 Problem Statement

A lot of donor and government resources are provided to local NGOs in Uganda to implement HIV/AIDS projects. Not only does best practice require that projects are monitored for control but also project stakeholders require transparency, accountability for resource use and impact, good project performance and organizational learning to benefit future projects. There have been reports in the media decrying the inadequate monitoring and evaluation of HIV/AIDS projects implemented in Uganda. Independent auditors Price Waterhouse coopers raised serious concerns about inappropriate expenditure and improper accounting which led to the Geneva based fund suspending five grants totaling over US $200million in August 2005 the report revealed massive graft, leading to suspension of the grants to Uganda, however the grants were reinstated several months later and several people were put in jail in connection with the scandal. Uganda also lost out a US $16million grant in 2007 because of the country’s unsatisfactory performance (Aidspan 2007). There were again allegations of mismanagement of a US $ 51 million malaria grant to Uganda meant to procure and distribute 7.4 million long lasting,
insecticide-treated mosquito nets according to a Price Waterhouse coopers report of November 2011. All these reports decry the serious lack of control of funds that were disbursed through the Project Management Unit (PMU) under the Ministry of Health to NGOs to implement HIV/AIDS activities. These reports highlight the lack of accountability for the disbursed funds and absence of any evidence of the attainment of the objectives for which the funds were disbursed to the NGOs. The agency had dispersed these funds to implementing agencies (grantees) inclusive of mainly of local NGOs and blamed the poor monitoring and evaluation by the grantees for their failure to timely compile a nationwide report of expenditure and impact. Despite the huge amount of resources provided to the local NGOs to implement HIV/AIDS projects and despite the fact that these projects play a big role in the fight against HIV/AIDS in the community it is not clear how effectively monitoring and evaluation is done on these projects implemented by local NGOs.

1.2 Purpose of the Study
The research provided the individual local NGOs with knowledge for improving the monitoring and evaluation of their projects they implement hopefully with the benefit of improving the performance of the projects and their accountability to the stakeholders in terms of resource use and impact of the projects they implement.

1.3 Objectives of the study
The general objective was;

- To determine the effectiveness of monitoring and evaluation practices of local NGOs implementing HIV/AIDS projects..

The specific objectives were;
• To identify the best practices in monitoring and evaluation of HIV/AIDS projects from literature.

• To determine the extent of resourcing provided to the Ugandan based local NGOs implementing HIV/AIDS projects.

1.4 Research Question

• How effectively are the monitoring and evaluation processes done on HIV/AIDS projects implemented by local based NGOs?

1.5 Significance of the study

• Findings of the research were provided to the individual local NGOs to assist them in understanding the monitoring and evaluation aspect of project management of HIV/AIDS projects implemented by their member organizations.

• These findings will assist NGOs design interventions to help them improve their monitoring and evaluation.

• The findings were also provided to the individual local NGOs to improve the performance of the projects and their accountability to the stakeholders in terms of resource use and impact of the projects they implement.

1.6 Scope of the Study

The study focused on local NGOs that implemented HIV/AIDS projects in the two districts of Luwero and Nakaseke for the period 2011/12. The effectiveness of the monitoring & evaluation tools used was key and formed a major basis for the entire research work.
CHAPTER TWO: LITERATURE REVIEW

2.0 Introduction

This chapter presents the related literature on the study. The chapter is presented under the following sections: impact of HIV/AIDS, response of NGOs to HIV/AIDS, monitoring and evaluation techniques, types of HIV/AIDS projects, best practices in monitoring and evaluation of HIV/AIDS projects. Each of the sections is presented next:

2.1 The Impact of HIV/AIDS

According to Hooper, 2003: and Martin, 1993 the exact origin of the HIV virus that causes AIDS is still questionable. In the early 1980s, doctors in USA noticed an increasing frequency of an unusual form of pneumonia (Tony Barnett and Piers Blaike, 1992). A medical report called simply and obscurely ‘Pneumocytis pneumonia-Los Angels’ herald recognition of this life threatening epidemic in June 1981 (Morbidity and Mortality Weekly Report, 5 June 1981, pp. 250-252) reported and clearly defined a case of an individual with HIV/AIDS was in United States in 1981 (Hooper, 2000). The first victims were young home-sexual men and early suggestions for the name for the disease indicated the prejudices so easily associated with the disease. GRIDS-Gay Related Immune Deficiency Syndrome was the first attempt. Cases were soon found in people other than homosexual men. In 1983 the United States Centers for Disease Control coined the name AIDS. It was also discovered that an earlier sample of blood stored in 1959 was found to have contained the virus when it was tested in 1998. The case of a Congolese man is the earliest documented case of an individual carrying the virus in Africa (Sharp, 2000). Uganda’s first HIV/AIDS case was reported in Rakai the early 1980’s and since then the more and more cases have been reported (Tony Barnett and Piers Blaike, 1992). The virus that causes AIDS was also
isolated by a researcher Luc Montagnier at the Institut Pasteur in France in 1982 and the same virus was also isolated independently by Doctor Robert Gallo in United States.

Controversial as the origins of the HIV/AIDS may be the number of cases of HIV/AIDS globally and Uganda in particular have been growing reaching pandemic levels. Statistics show that an estimated 34 million people are living with HIV/AIDS worldwide (UNAIDS 2012). The statistics further show that an estimated 2.5 million new infections were registered at the end of 2012 while another 1.7 million lost their lives in the same year worldwide. Of the 34 million people living with HIV/AIDS worldwide, Sub- Saharan Africa accounts for about 23.5 million people which is about 69% of the world AIDS/HIV population yet it has only about ten percent of the total world population (UNAIDS 2012). It is clear from the statistics that the region is very hard hit by the pandemic. Uganda is one of the countries in the Sub-Saharan Africa, with over 1,200,000 people both young and adults infected out of an estimated population of about 33 million people(UNAIDS 2012). The HIV/AIDS scourge has had a huge impact on the economical and social landscape of Uganda. Life expectancy has fallen from 65 years as of 1995 to 54/57 m/f years in 2013 due to HIV/AIDS & poverty (WHO, 2013), several health indicators such as infant mortality rate have also been affected negatively.

2.1.1 Response to HIV/AIDS

As a result of the devastating impact of HIV/AIDS the president of Uganda launched the National Strategic Plan 2007/08-2011/12 which set the three thematic service areas of Prevention, Care and Treatment and social support as well as outlining imperatives for strengthening systems for service delivery. This justified the two-pronged strategy that maintained the well established ABC approach complemented with a refocus on the most cost-
effective prevention interventions, balancing care, treatment and prevention costs and embracing new prevention technologies.

**Government ministries**

Different government ministries and departments carry out different AIDS related activities but generally current government interventions involve prevention of HIV/AIDS infections through

a) Behavioral Change Communication (BCC) programs

b) Prevention of Mother to Child Infection (PMTCI) infections

c) Provision of Anti-Retrieval Virals (ARVs) treatment.

d) Care of orphans who have lost their parents to HIV/AIDS.

e) Mitigating the impact of HIV/AIDS, managing the legal and ethical environment concerning HIV/AIDS.

**Donors**

The donors include international development agencies for example USAID, DFID and UNAID plus the other UN related organizations like UNDP through their own interventions programs or through partnership with government to implement or fund some government interventions.

**Private sector**

Private entities such as pharmaceuticals companies like quality chemicals, Pfizer, Merck and Bristol Myers-Squib are also involved in the interventions through provision of subsidized drugs, funding research into the efficacy of the drugs used in the treatment of the disease, and funding other interventions. Different private sector companies such as banks and telecommunication companies also have their own HIV/AIDS policies to try and manage this scourge in the workplace.
2.1.2 Extent of funding in the HIV/AIDS fight

A lot of funds and other resources have been committed in the fight against HIV/AIDS globally (Halmashaw and Hawkins, 2004). According to UNAIDS (2012) an estimated US$16.8 billion had been spent on HIV/AIDS related programs globally in 2012, an estimated US$24 billion was required to adequately respond to the challenges of the scourge in 2012 of which only about US$16.8 billion had been committed. Most of these funds have been committed by developed nations and philanthropic bodies to initiatives such as the Global Fund to fight AIDS Tuberculosis and Malaria (GFATM) (Avert, 2005). Uganda was allocated US$200,838,019 million by the GFATM, a big portion of which was channeled to the civil society organizations through PMU and Uganda AIDS Commission(UAC) who were the fund managers though the primary receipt of these funds was Ministry of Finance, Economic Planning and Development. The former president of United States of America George W Bush in 2003 announced the President's Emergency Plan for AIDS Relief (PEPFAR) in which he committed up to US$15 billion for 5 years (Myra, 2005). The 15 focus countries eligible for the PEPFAR initiative included Uganda among other the 12 sub-Saharan countries and other hard hit countries (Myra, 2005). A lot of funds have been spent and more are being committed for the fight against the scourge in Uganda in particular by the different stakeholders in the fight. The projected total cost of implementing the National Strategic Plan for HIV/AIDS (2007/08–2011/12) was US$229,250,000 over the 5 years. The government of Uganda was expected to contribute US$14,962,500 resources to the implementation of this framework and receive funding from its development partners including the European Union, Norway, Sweden, United Kingdom, and Japan, to supplement. Another initiative in which resources in the fight against the scourge in Uganda have been committed is the African Comprehensive Partnership on HIV/AIDS
(ACHAP). This is a partnership between the Bill and Melinda Gates Foundation and Merck Pharmaceutical Foundation. Each year these partners contribute a significant amount of funds (Gates foundation, 2006). ACHAP has worked with civil society organizations through Uganda National NGO forum and have funded over 325 community-based projects ranging from US$7,500 to US$95,000 (ACHAP, 2011). It is evident that a significant amount of funds have been committed in the fight against HIV/AIDS globally and Uganda. Specifically the different NGOs have different sources of funding, therefore it is quite difficult to document the actual amount of funds that NGOs in Uganda have accessed over the period of time they have been involved in the fight against HIV/AIDS. Nevertheless it is evident that a significant amount of resources have been provided to the NGOs. As a result there is need for these funds to be effective in achieving the objective for which they are disbursed or else they just go down the drain. There is need to demonstrate that the funds actually did achieve what they were disbursed for. It is not prudent in the fight against HIV/AIDS to commit more and more funds without value for money in terms of impact. It is even highlighted that total funds committed are not sufficient to adequately respond to the scourge. The expenditure of these funds is at expense of other priorities in the country the further reason why they should be of an impact to the beneficiaries.

2.2 NGO Projects

The activities of NGOs to respond to HIV/AIDS are usually done as projects, with a set and defined time framework, budget and objectives to achieve. The projects the local NGOs implement have a large number of stakeholders that include: donors, beneficiaries of the project activities (e.g. people living with HIV/AIDS, orphans), the community in which the project is
implemented and government. The stakeholders require accountability in terms of resource use and impact of the project, transparency and good project performance.

Hulme and Edward (1995) as quoted by Crawford and Bryce (2003) define accountability in the context of NGOs as the means by which individuals or organizations report to recognized authority and are held responsible for their actions. They further discuss that accountability entails transparency in decision making and honest reporting of how and what resources have been used and what has been achieved by the project. It is important that there is accountability of the resources so that donors are motivated to commit more funds. Other stakeholders also “own” the project if it is accountable to them and is not seen as a money making venture for a few individuals. Avina (1993) distinguishes between short-term functional accountability i.e. accounting for resource use and immediate impacts and strategic accountability: accounting for the impacts that NGOs actions have on the actions of other organizations and the wider environment.

2.3 Monitoring and Evaluation

Monitoring and evaluation are two linked project management functions and as a result there has been a lot of confusion in trying to make them work on projects (Crawford and Bryce, 2003). Monitoring and evaluation are distinct but work hand in hand (PASSIA, 2004). Casley and Kumar (1986) as quoted by Crawford and Bryce (2003) disprove the use the acronym M&E (monitoring and evaluation) as it suggests that we are looking at a single function without making a clear distinction between the two. For the purposes of making a clear distinction between the two they are described separately below:
2.3.1 Monitoring

Different authors have defined monitoring differently there is some overlap and disagreement between the operational definition stated in the background of this research and the definitions of the different authors as highlighted below.

McCoy et al. (2005) definition is adopted and modified as the operational definition in the context of this research and it defines monitoring as the routine tracking of the key elements of project implementation performance, usually inputs, activities and outputs, through recordkeeping, regular reporting and surveillance. It seeks to determine if the inputs, activities and outputs (immediate deliverables) are proceeding according to plan. Inputs to be tracked include financial resources, human resources, equipment used on the project and any other input that goes into project implementation. The financial resources are tracked with a budget and performance is analyzed by comparing planned expenditure against actual expenditure. Activities or processes are tracked using a schedule, which is planned schedule against actual schedule of the activities i.e. what activities have been done versus what should have been done according to the planned schedule. Crawford and Bryce (2003) argue that monitoring is an ongoing process of data capture and analysis for primarily project control with an internally driven emphasis on efficiency of project. The authors define efficiency in this context as doing the right thing that is: efficient conversion of inputs to outputs within budget and schedule and wise use of human, financial and natural capital. This definition emphasizes the fact that monitoring is geared mainly to project control. This is in agreement with the operational definition that looks at project control as taking corrective action and making decisions pertaining to the project by the project manager during implementation. Uitto (2004) defines monitoring briefly as a continuous function that aims primarily to provide management and
stakeholders with early indicators of project performance of a project and progress (or lack thereof) in achievement of the results. Monitoring is seen as a continuous function as highlighted in the contextual definition of this research but it does not highlight what is tracked against what so as to be able to indicate performance. Nevertheless it emphasizes the fact that monitoring is very important in that it provides information to the management and stakeholders about performance. It also highlights the fact that monitoring is results oriented. UNFPA (2004) defines monitoring as a process that continuously tracks performance against planned by collecting and analyzing data indicators established for monitoring and evaluation purposes. Monitoring is seen as in the contextual definition as providing continuous information on whether progress is being made toward achieving results through record keeping and regular reporting systems. Monitoring looks at the project processes that transform inputs into outputs, it also identifies project strength and weaknesses. The performance information from monitoring enhances learning and decision making during implementation.

It is important as highlighted by all the authors above that there is dissemination of the monitoring information to the stakeholders. The purpose of monitoring in summary is to:

a) ensure that implementation is moving according to plans and if not the project manager takes corrective action, the control function of project management. The monitoring enhances project management decision making during the implementation thereby increasing the chances of good project performance (Crawford and Bryce, 2003: and Gyorkos, 2003). This function also aids early identification of problems before they get out of hand since it is continuous. This is very important in management of projects as it lessens the chances of crisis management since there is constant feel of the “project temperature”.

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b) facilitate transparency and accountability of the resources to the stakeholders including donors, project beneficiaries and the wider community in which the project is implemented. Monitoring tracks and documents resource use throughout the implementation of the project (PASSIA, 2004: Crawford and Bryce, 2003: and Uitto, 2004). This enhances accountability in that it facilitates the demonstration of the resource use throughout the implementation of the project.

c) facilitate evaluation of the project. In a well-designed monitoring and evaluation system, monitoring contributes greatly towards evaluation. Information from monitoring feeds into the evaluation process.

2.3.2: Evaluation

As with monitoring, evaluation is also defined differently by different authors. Evaluation is defined contextually in this research as the episodic (not continuous, usually midterm and at end of the project) assessment of an ongoing or completed project to determine mainly its actual impact against the planned impact (strategic goal or objectives for which it was implemented), sustainability, effectiveness and efficiency. Uitto (2004) argues that evaluations are systematic and independent. They are an assessment of an ongoing or completed project including its design, implementation and results. He further argues that evaluations assess the relevance, efficiency of implementation, effectiveness, impact and sustainability of the project.

Assessing relevance of a continuing project is important to justify continued investment of resources into the project, if found that the project is no longer relevant then funding can be stopped and funds channeled elsewhere.
*Effectiveness* is defined as the extent to which the set project objectives were achieved and efficiency as how economically resources (inputs) were converted into outputs for completed or partially completed projects.

*Efficiency* looks at how the project faired in terms meeting the set schedule and allocated budget. *Sustainability* is defined as the continuation of the project to bear benefits to the beneficiaries long after the project has ended or the donors have withdrawn funding. It looks at probability of long-term benefits of project long after the project close (Jody and Ray, 2004). Sustainability is very important in that it is not prudent to have a lot of resources invested in a project whose benefits will be short lived. The design and implementation can be altered in order to increase the chance of sustainability. Sustainability has gained a lot of attention in the recent times, because the donors want to determine whether the project benefits will continue to accrue after they cease financing the project (PASSIA, 2004).

The Organization for Economic Cooperation and Development (OECD) (2002) definition as cited by Jody and Ray (2004) is in agreement with the above definition but adds that an evaluation should provide information that is credible and is useful and can be incorporated into decision making by both the implementers of the project and the donors who financed the project. IFAD (2004) states that evaluations should be as objective as possible so that the information provided is as credible as possible and is not questionable. Objectivity could be achieved by bringing in external consultants that were not involved in the project implementation but who should work in partnership with the project implementation officials. McCoy *et al.* (2005) are in agreement with other authors and the contextual definitional that evaluation assess the projects effectiveness in achieving its goals and in determining the relevance and sustainability of an ongoing project.
Shapiro (2004) emphasizes the fact that evaluation compares the project impact with what was set to be achieved in the project plan and further argues that evaluation examines how the project impacts were achieved and what went wrong or right for the benefit of organizational learning. The emphasis of this approach to evaluation is on impact of the project after implementation. It does not recognize the midterm evaluations that tend to look at the continued relevance and sustainability of the project and the impacts that the project has had even before completion. This can be divided into two types depending on when they take place: formative and summative each is described below in detail.

**Formative evaluations:**
This takes place during the implementation of the project. They are mainly implementation process oriented, reviewing the overall performance of the project in terms of input use, schedule of project and outputs. They also look at strengths, weakness, and challenges of the project and whether the continued project plan will be able to deliver the project objectives or it needs redesigning (PASSIA, 2004). This type of evaluation may also look at the continued relevance of the project and its sustainability. The aim is to improve the performance of the project during implementation (Shapiro, 2004). Formative evaluations are sometimes called interim or midterm evaluations.

**Summative evaluations**
Summative evaluations are carried out at the end of the project with objective of determining how the project progressed, what went right and wrong and capture any lessons learned. Summative evaluations may also be able to determine the overall impact of the project and the extent to which the project achieved its objectives (Shapiro, 2004). Wellings and Macdowall
(2000) identify two types of summative evaluations: processes evaluation and outcome evaluation. A discussion of each follows:

**Process evaluations**

Process evaluation is geared towards guiding future projects by facilitating organizational learning. It is not enough to capture whether a project succeeded or not but it is important to understand and document why it succeeded or why it failed so that the mistakes are not repeated and good practices are shared across the stakeholders. Process evaluation also assess how the project faired in terms of efficiency i.e. whether the targeted project outputs were achieved within budget and schedule and if not what the reasons hampered that.

**Outcome evaluations**

Outcome evaluation is concerned with the extent to which the set objectives were achieved and how we can attribute the role of project to the outcomes. It is quite hard to clearly attribute that the observed outcomes are solely the result of the project without any other exogenous factor and it is even harder to determine the actual contribution of the project to the observed outcomes. In order to effectively evaluate a project it is important that both the formative and summative evaluations are carried out and with summative evaluation both process and outcome evaluations should be done fully optimize the benefits of evaluation.

**2.3.3 The link between monitoring and evaluation**

Monitoring and evaluation though usually taken as common functions, they are distinct. Monitoring usually happens during the implementation phase of the project and involves tracking the inputs, activities and the outputs. On the other hand evaluation usually happens after implementation, after project termination and involves determining whether the outcomes and goals were achieved.
Despite the fact that we have attempted to delineate monitoring and evaluation in the earlier discussions, the two are complementary and in most organizations, they are taken as a single function. Each supports the other although they seek to ask different questions as illustrated in the earlier discussions. Jody and Ray (2004) identify the complementary roles of the two functions to include the following:

a). information from monitoring feeds into evaluation in order to understand how the project progressed and capture any lessons at the end of the implementation, it is important to capture what went right and what went wrong for learning purposes.

b). in case where the projects is performing very badly as demonstrated by the monitoring function, an evaluation may be scheduled to understand why there is a problem.

c). a mid-term evaluation may determine that the monitoring function may need redesigning to be able to capture more data to give a better understanding of the project performance.

There is need to locate and embed monitoring and evaluation in the project management lifecycle. The link highlighting monitoring and evaluation as processes of project management is explored in next subsection.

2.3.4: Monitoring and evaluation as project management processes

In order to locate and embed monitoring and evaluation as project management processes, two authoritative project management bodies of knowledge have been reviewed and their views on monitoring and evaluation are highlighted. The two project management bodies of knowledge are the Project Management Institute (PMI) body of knowledge (PMBOK) and the Association of Project management (APM) body of knowledge (APMBOK). The Project Management Institute (PMI) body of knowledge (PMBOK) divides project lifecycle into five major stages
namely initiation, planning, implementation, control and project close out/termination (PMI, 2004).

In terms of the PMBOK monitoring is a function that happens during the implementation stage of the project life cycle. Information from monitoring facilitates the control function of the project (PMI 2004). It is important that the monitoring happens continuously and effectively thought out the project implementation process to enable the project manager to adequately control the project. This is very important if the project manager is to quickly diagnosis problems that may hinder project success and hence seek remedy. The PMI (2004) also asserts that evaluations occur at the end of the project during the lifecycle, where it assess how the project performed and capture any lessons from it. Monitoring information is very helpful in determining how the project progressed in terms of schedule, cost and any hindering problems encountered during implementation. As highlighted earlier when assessing how the project progressed during evaluation, information from monitoring is very relevant and useful (Shapiro, 2004) hence there should be safekeeping of monitoring data.

The PMI (2004) life cycle is inadequate in looking at projects with a long term impact after end of implementation and project closeout. HIV/AIDS projects usually have long-term impact such as sustained longtime behavioral change. Some impacts of HIV/AIDS projects like reduced HIV/AIDS prevalence can only be ascertained long after the project was closed down. In that regard evaluation for long term impact cannot be illustrated on the final stage project life cycle advocated by PMI.

The APMBOK identifies measurement of project success as a very vital factor in the management of projects (APM 2006). And it defines project success as the satisfaction of stakeholders needs and is measured by success criteria set at the beginning of the project (APM,
2006). This implies that at the end of the project there is need to evaluate how successful the project has been in relationship with the earlier set criterion by the stakeholders. Different stakeholders have different interest, the project manager may be interested in minimum scope change, the management may be interested in achieving the project within budget and schedule and fully scope this implies all the interests of the different stakeholders should be incorporated and agreed upon as a basis to measure project success. The success of the project according to APM (2006) is determined at project close out and handover.

The APM (2006) also identifies benefits as impact of the project specific deliverables on the stakeholders. These are measured after the project has ended and would include for example increased market share, staff and customer care, reduced prevalence, and increased condom use. This implies that there is need to schedule an impact assessment to determine to what extent the project achieved the benefits that it had intended it to achieve. Both the APM (2006) and PMI (2004) also identify a project monitoring control technique called Earned Value Management (EVM), which integrates both schedule and cost management. It is a tool that has been widely used in engineering and construction projects. It is a very powerful tool but not much is known of how it can be applied in these HIV/AIDS projects.

The APM (2006) and PMI (2004) orientation is skewed towards commercial projects. In order to use them on monitoring and evaluation of HIV/AIDS projects there is need to go into deeper interpretation. Both APM (2006) and PMI (2004) techniques do not appreciate much of human development projects like HIV/AIDS projects and the techniques may not be easily transferred to management of these projects without significant alterations.
After embedding and locating monitoring and evaluation in the project management process, it is important to explore the link between the two with project planning. The subsequent section explores the link

2.3.5 The link between monitoring, evaluation and project planning

PASSIA (2004) argues that monitoring and evaluation should be integral components of the project management cycle including project planning and design. Thinking in terms of monitoring and evaluation at the design stage facilitates the project stakeholders to think in terms of performance measurement even before implementation starts with a clear picture of expectations of what a successful project would look like.

PASSIA (2004) further argues that poorly designed projects are hard to monitor or evaluate. The project plan defines the project budget and schedule of activities and outputs which act as baselines against which implementation performance is assessed periodically during the project monitoring process. The project plan also defines the project’s expected outcomes and goals and facilitates the evaluation to determine the extent to which the objectives were achieved. Monitoring and evaluation can only be as good as the project plan, if the project plan is flawed and unrealistic then monitoring and evaluation will not be of any significant value to the project stakeholders.

Gyorkos (2003) notes that project planners should include a clearly delineated monitoring and evaluation plan as an integral part of the overall project plan. The monitoring and evaluation plan, he argues, should have the following components:

a) monitoring and evaluation activities

b) persons to carry out the activities

c) frequency of activities
d) sufficient budget for activities

e) specification of the use of monitoring and evaluation findings

Having a clearly delineated monitoring and evaluation plan ensures that monitoring and evaluation activities are given the due attention they require and are not treated as a peripheral function on the project. Next the techniques of monitoring and evaluation are explored.

2.4 Monitoring and Evaluation Techniques

Monitoring and evaluation techniques can be divided into approaches, frameworks and data collecting methods. The different approaches to monitoring and evaluation include participatory and traditional/conventional. No matter which approach is used, there are two frameworks that can be employed in monitoring and evaluation i.e. logical framework or theory based. With either frameworks there are different data collecting methods for the purposes of monitoring and evaluation but they can be divided into qualitative and quantitative. Each of the techniques is described next.

2.4.1: Approaches

There are two types of approaches to monitoring and evaluation, the conventional/traditional and the newer one, the participatory approach, each is explained hereafter:

- **Conventional/traditional approach**

The traditional approach to monitoring and evaluation is very prevalent in which donors dictate how monitoring and evaluation will be done. The donors provide a preset monitoring and evaluation reporting format that the implementing agency has to adhere to. All that the implementing staff has to do is collect data that goes into filling this report for passing over to
the donor (World Bank, 2004). The most emphasis is on the monitoring and evaluation needs of the donor as opposed to other stakeholders. Evaluations are usually done by an external individual at the end of the project.

- Participatory

The World Bank (2004) defines participatory monitoring and evaluation as the approach that involves stakeholders such as the project beneficiaries, staff, and donors and community in the design and implementation of the project monitoring and evaluation as opposed to the conventional approach. Ideally all the stakeholders in the participatory monitoring and evaluation are involved in identifying the project, the objectives and goals and identification of the indicators that will be used in monitoring and evaluation. The stakeholders are also involved in collection and analysis of the data and capturing the lessons. The role of the managers of the project is to facilitate the monitoring and evaluation process.

2.4.2: Frameworks

With either approach to monitoring and evaluation there are two frameworks: theory based and logical framework, a discussion of each follows in the next sub-section.

- Theory-based evaluation

Theory-based evaluation allows an in-depth understanding of the workings of a program or project. In particular, it need not assume simple linear cause-and-effect relationships (Davidson, 2000). It applies a systems approach where the success of an intervention is affected by other factors in the environment which should be identified and how they might interact, it can then be decided which steps should be monitored as the program develops, to see how well they are in fact borne out. This allows the critical success factors to be identified. And where the data show
these factors have not been achieved, a reasonable conclusion is that the program is less likely to
be successful in achieving its objectives (Uitto, 2004).

Rogers et al., as cited by Uitto (2000) identifies advantages of the theory based framework to
monitoring and evaluation to include the following:

a) being able to attribute project outcomes to specific projects or activities:

b) being able to identify unanticipated and undesired program or project consequences.

Theory based evaluations enable the evaluator to tell why and how the program is working
(Weiss, 2003: and Birkmayer and Weiss, 2000). However Theory based evaluations are not
widely used by local NGOs.

- **Logical framework:**

The logical framework approach (LFA) has come to play a central role in the planning and
management of development and aid interventions over the last twenty years of which
HIV/AIDS projects are. This is the most widely used approach. Its origins lie in a planning
approach for the United States military, which was then adapted by the National Space Agency
(NASA) before being adopted by USAID for development projects. It was adopted by European
development organizations in the 1980s and by the end of the 1990s the LFA (or an adapted
form of it) had become the standard approach required by many donors for grant applications

Most NGOs implementing HIV/AIDS projects use the logical framework approach in planning
designing and aiding monitoring and evaluation of their projects. Despite the wide use and wide
requirement by donors for adoption of LFA to aid planning, management and the monitoring and
evaluation amongst NGOs, it is not clear how skilled the NGOs are in the use of this approach.
The inability to effectively be able to use this tool means that the NGOs cannot optimally benefit
from it. The result of the logical framework approach is a 4X4 matrix that shows the relationship of inputs, processes, outputs, outcomes and goals of the project plus underlying assumptions (Crawford and Bryce, 2003)

Table 1, showing a summary of the Logical framework

<table>
<thead>
<tr>
<th>NARRATIVE SUMMARY</th>
<th>OBJECTIVELY VERIFIABLE INDICATORS (OVIs)</th>
<th>MEANS OF VERIFICATION</th>
<th>ASSUMPTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. OVERALL GOAL</strong></td>
<td>These are yardsticks to verify the extent to which Overall Goal has been achieved. Attributes of OVIs are: Note: Quality, quantity, time, location and target group</td>
<td>MOVs specify sources of data for verifying each OVI</td>
<td>These are events or conditions that must prevail in order to ensure the achievement of the Overall Goal</td>
</tr>
<tr>
<td>The higher-level objective towards whose achievement plan is expected to contribute</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>2. PURPOSE</strong></td>
<td>These are the conditions that will indicate whether the Purpose has been achieved or not. The specify the quality, quantity, time, location and target group(s) of the Purpose</td>
<td>Specific sources of data for each chosen indicator</td>
<td>Important events, condition or decisions outside the control of the plan that must prevail in order for the Purpose to be attained</td>
</tr>
<tr>
<td>The purpose is what we expect to result from all the achievement of the Outputs of one program</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>3. OUTPUTS/RESULTS</strong></td>
<td>These are the conditions that will indicate whether the Outputs have been achieved or not. The indicate the magnitude of outputs necessary and sufficient to achieve purpose</td>
<td>Specific sources of data for each chosen indicator</td>
<td>Important events, conditions or decisions outside the control of the plan management, necessary for the achievement of each Output</td>
</tr>
<tr>
<td>The Outputs/Results are the outcomes that result from the execution of the planned activities. They are also the important achievements that need to be realized in order to reach the Purpose</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Table 1 illustrates components logical framework matrix, a description of each component in the matrix using a Behavioral Change Communication (BCC) project as a reference project.

**Inputs**

Inputs are the resources that go into the project to produce outputs. The resources would include:

- a) financial resources,
- b) human resources e.g. trainers,
- c) equipment audio visual equipment, HIV testing equipment

**Process/activities**

The process/activities are the tasks carried out to implement the project and deliver the identified outputs. The activities of BCC project would include for example:

- a) Developing of Information Education Communication (IEC) materials
- b) Selecting of communities and schools to be involved in project
- c) Formation of peer groups
d) Recruitment of peer educators

e) Training of peer educators

f) Staging of the workshops, drama competitions

g) Distribution of condoms

h) Distribution of IEC material

Outputs

Outputs are information, products, or results produced by undertaking projects activities highlighted above. Outputs relate to completion of activities and are the type of results over which managers have a high degree of influence. Outputs reflect what you hoped to produce from a particular input (or set of inputs). Outputs usually reflect a result achieved in a relatively short time period (0–2 years) (McCoy et al., 2005). Examples of outputs would include

a) Trained peer educators

b) Formed and active peer groups

c) Community members trained

d) IEC materials distributed

e) Condoms distributed

Outcomes

Outcomes are immediate impact of the outputs of the projects on the community. McCoy et al. (2005) defined outcomes of HIV/AIDS project as the broad changes in development conditions. Outcomes help us answer the “so what?” question, for example we trained 100 people in behavior change and increased their knowledge but did they change their behavior? Outcomes often reflect behavior or economic change. Outcomes usually reflect a result achieved over a
short or intermediate time period, 2–5 years (McCoy et al., 2005: and Rugg and Heitgerd, 2000).

Examples of outcomes from a BCC project include:

a) More accurately informed community on HIV/AIDS issues (transmission, prevention)
b) More skilled and assertive people on HIV/AIDS e.g. girls saying no or negotiating for safer sex
c) Increased condom use
d) Delayed sex debut
e) Less stigma in community
f) More use of health services
g) Increased number of people in community testing for their HIV status.

Goals or impact

Goals or impact are the long term outcomes of the project. McCoy et al. (2005) define impact as the overall and long-term effects of an intervention/project. Impacts are the ultimate result attributable to a project intervention over an extended period. Impacts usually reflect a result achieved over a longer time period (5–10+ years). For example in this case the goal is to reduce HIV/AIDS prevalence.

Goals are usually general desirable conditions the project should bring about: the goal may be divided into smaller objectives. These objectives should be Specific, Measurable, Achievable, Realistic, and Time bound (SMART) (Reijer, 2002). For example the goal is to reduce overall HIV/AIDS prevalence, one of the objectives would be to reduce HIV/AIDS prevalence by half among 15-25 years age group within five years. This eases the process of performance measurement, which monitoring and evaluation actually do on the project.
The logical framework approach provides a structure for logical thinking in project design, implementation and monitoring and evaluation. It makes the project logic explicit, provides the means for a thorough analysis of the needs of project beneficiaries and links project objectives, strategies, inputs, and activities outputs and outcomes to the specified needs (NORAD, 1995).

The logical framework approach also helps to clarify objectives of any project, program, or policy. It aids in the identification of the expected causal link in the following results chain: inputs, processes, outputs, outcomes, and impact. It leads to the identification of performance indicators at each stage in this chain, as well as risks which might impede the attainment of the objectives. The approach is also a vehicle for engaging partners in clarifying objectives and designing activities. During implementation the Log Frame that results from the logical framework approach serves as a useful tool to review progress and take corrective action.

There have been numerous alterations to the logical framework buts its fundamental structure and functionality has remained the same. The vertical axis presents a logical hierarchy of objectives and assumptions based on cause and effect logic known as “vertical logic” of the project. The horizontal axis of the matrix can be verified at each level in the vertical logic and is known as the “horizontal logic” of the project (Crawford and Bryce, 2003).

The vertical logic of the log frame is tested by starting at the bottom of the log frame in the manner below: as illustrated in Figure 2.1.

If the inputs are provided and the input activity assumptions hold then the activities can be undertaken effectively. An example of an input activity assumption of a BCC project is the community being receptive and taking part in the activities of the project actively.

If the activities are undertaken and the activity output assumptions hold, then desired project outputs will be produced. An example of an activity output assumption of a BCC project is that
the Information Communication Materials (IEC) and trainings are well designed and convey the accurate information on behavioral change and are well understood by the target population.

If the project outputs are produced and the output outcome assumptions hold, then the outcomes should be realized. If the outcomes are realized and the outcome goal assumptions hold then the goal is likely to be attained. The outcome goal assumptions for a BCC project in this case is that environment should be able to sustain and motivate behavioral change to avoid HIV/AIDS.

**Using the log frame for monitoring**

According to the framework adapted from International Federation of Red Cross (IFRC), different monitoring questions are asked at different levels of the project log frame (IFRC, 2001). Figure 2.1 illustrates the different questions at each level of the log frame. The different monitoring questions are highlighted next:

![Log frame diagram](image)

- **Goals**: Are outputs leading to outcomes?
- **Outcomes**: Are activities leading to expected outputs in number?
- **Outputs**: Are activities being done on schedule and within budget?
- **Activities**: Are finances, personnel, materials available in right amounts time and quantity?
- **Inputs**: Goals are long term so may not be able to measure them now during implementation

What is causing delays or unexpected results? What can management do to rectify the problem?
**Inputs**

The interest at this level is whether the finances, human resources, materials and equipment are available at right time in right amounts and quality.

**Activities**

The question of interest is whether the activities are being done on schedule and within budget.

**Outputs**

The question of interest is whether the project activities are leading to expected outputs in number and quality.

**Outcome and goal**

Tracking these is mainly a function of evaluation.

Monitoring the project using the logical framework entails using “input indicators” such as a budget to monitor resource use throughout the implementation of the project. It also entails tracking the human resource deployment on project activities i.e. who is doing what and where.

The use of equipment on project should also be monitored. The activity schedule is used to monitor the project progress in terms of what activities have been done in relation what should have been done. The output indicators are monitored at different milestones to determine the progress of the project in attaining the set outputs in the project plan.

**Using the log frame for evaluation**

The IFRC framework (IFRC, 2001) for monitoring highlighted above also further discusses different project evaluation questions at the different levels of the log frame.
Figure 2.2: shows the different questions of evaluation and the discussion follows:

**Impact:** What changes did project have on community? Were there unintended changes the project brought about?

**Sustainability:** Will the benefits of the project continue to accrue after end of the project/financing?

![Logframe diagram]

**Goals**

**Outputs**

**Activities**

**Inputs**

**Effectiveness:** Did outputs lead to outcomes? Were the intended outcomes and goals attained? What was the contribution of the project in attaining the goal?

**Efficiency:** Were the resources used for what they were supposed to be used for?

Were targeted outputs produced? Were the outputs produced economically?

Fig 2.2 Evaluation using log frame elements

Source: adapted from IFRC (2001)
**Inputs and activities**

Evaluation is interested in determining the efficiency of resource use and results of the activities that were carried out on the project and the following questions are normally posed:

a) Were the resources used for what they were supposed to be used for?

b) Were targeted outputs produced?

c) Were the outputs produced economically?

d) Were activities done within schedule and budget?

**Outputs, outcomes and goals**

Evaluation is interested in determining the effectiveness of the project and it poses questions such as:

a) Did outputs lead to outcomes?

b) Were the intended outcomes and goals attained?

c) What was the contribution of the project in attaining the goal?

Other than the effectiveness and efficiency at the different levels of project log frame, the IFRC (2001) also highlights other important attributes that evaluation seeks to determine, that is sustainability and impact.

**Sustainability**

Evaluation seeks to determine whether the benefits of the project will continue to accrue long after the project has ended.

**Impact**

Evaluation seeks to determine what changes project had on community and whether there were any unintended changes the project brought about. Despite the wide use of the logical framework
approach in the design, planning, monitoring and evaluation of projects it has got some shortcomings as discussed below:

a) It lacks a time dimension to implementation and scheduling of the monitoring and evaluation activities. For the approach to be effective in managing the project there is need to have an extension of a schedule of project activities inclusive of the monitoring and evaluation activities, such as data collection, analysis dissemination.

b) The logical framework approach is obsessed with measurable indicators that are SMART. There is a bias towards quantitative data which may not be sufficient in describing the whole picture of what the project has achieved or attained for example, one of the indicators for an HIV/AIDS projects output would be number of people exposed to behavioral change messages. This does not tell us anything about the effectiveness of the exposure. There is need to incorporate qualitative data alongside the mainly quantitative indicators that are used with the logical framework approach.

2.4.3: Methods of data collection

There are various methods and tools used in gathering data that goes into tracking the indicators for the monitoring and evaluation function of the project. Walden et al. (1999) states that data collection has been traditionally divided into quantitative and qualitative. Quantitative methods are involved with counts and numbers, e.g. number of people trained, number of PLWHA reached. The data from quantitative methods is analyzed numerically whereas qualitative methods look at an in-depth understanding of the issues, describing perceptions, feelings opinions about the intervention etc. The qualitative method looks at the how and why questions (Webb and Elliot, 2002).
Quantitative data collecting methods include distribution log books, attendance registers, service recording, and surveys with aid of questionnaires while qualitative data collecting methods include among others focus group discussions, in depth interviews, participatory observations. Each of the methods is described next:

Distribution log books

These are records of materials that were distributed during implementation of the project (FHI, 2004). The materials distributed may include IEC materials, condoms, and supplies such as food stuffs to the sick, gloves to care givers. Analysis of this information requires periodic aggregation to determine how many materials were distributed and this is compared with what was planned and decision is made. This method is applicable in the project monitoring process in order to track the deployment and distribution of material inputs such as condoms, posters, and gloves. This information can also be of value during an evaluation to determine how inputs (materials) were distributed.

Service recording

This entails recording attendance of participants in project activities such as the number of people that have attended a behavioral change communication workshop. It may also involve keeping a record or count of people that are using a particular service of the project such as people that have been counseled and tested for HIV, youth that are active in peer activities, number of peer clubs set up and number of PLWHA served. This helps in determining how many people have been reached by the project. This data can be aggregated at a monthly interval and compared with what is in the work plan in order to determine how the implementation of project is proceeding in respect to the project plan.
This method is of use in collecting data for monitoring outputs of the project in terms of people actually reached by the project, for example the number of people trained in a BCC workshop, number of people counseled and tested for HIV/AIDS.

**Surveys using questionnaire**

A survey entails targeting a sample of respondents and seeking their views, perceptions, knowledge and attitudes about an intervention for which the project was designed. Shao (1997) defines a questionnaire as a formal set of questions or statements designed to gather information from respondents. This method is very handy in determining the perceptions of the project stakeholders about the implementation and can be used in evaluating the impact of the project. It can be of use in a BCC project to determine baseline knowledge and perceptions about HIV/AIDS prior to commencement of the project (Walden *et al.*, 1999) and also a comparison can be done at the end to determine the impact of the project in terms of changing perceptions, attitudes and behavior of the community. Analysis of the questionnaire can be aided by computer software either Microsoft Excel or Statistical Package for Social Sciences (SPSS).

**Qualitative data collection**

**Focus group discussions**

Focus group discussion is a qualitative data collecting method that uses interaction between small groups of participants between eight and twelve to generate data that would inform on how the implementation of the project is proceeding or how the project faired after end (Branigan and Mitchel, 2002; and World Bank, 2004). A focus group discussion is aided by a facilitator using a focus group discussion guide (FHI, 2004) in order to elicit the discussions on the areas of interest. Branigan and Mitchel (2000) state that during monitoring of the project focus group
discussions method can help in collecting data about project activities and outputs during implementation in order to determine the following aspects highlighted:

a) acceptability of the project among the target population.

b) explore reasons for participation or lack of it among target community in the project activities.

c) identify challenges or obstacle to project implementation.

Branigan and Mitchel (2000) also identify instances of applying the focus group discussions method to collect data to aid project evaluation in order to determine the following:

a) changes in attitudes as a result from the project: this is of value in determining the extent to which the outcome of the project was attained if one of the intended outcome was

b) attitude change as the case is with BCC and human rights and advocacy projects:

d) evaluate perceived effectiveness of an intervention and suggestions for improvement:

*In depth interviews*

One qualitative method of data collection is by conducting in depth interviews with individual respondents. In such interviews the interviewer gently probes the respondents in order to facilitate them to have a conversation in which ideas flow freely (Casley and Kumar, 1988). The interview method may be applied also in instances identified above where the focus group discussion is applied.

*Participant observation*

Another qualitative data collecting method is the participant observation which involves direct extensive observation of an activity behavior or relationship (Casley and Kumar, 1988) aided by an observation guide (FHI, 2004) to be able to pick up some salient features of the
implementation process. For example observing how participants are interacting with the facilitators.

This method of data collection is applicable during monitoring of activities on the projects and outputs. It is not enough to know that the project output was 100 youth trained: participant observation can give you information on how the training transpired and the level interaction and feedback during the training.

As highlighted from the discussion on qualitative methods of data collection, the in depth clear understanding of the project dynamics cannot be unraveled by numerical data from quantitative methods, but from descriptions in the words of the project stakeholders including beneficiaries and project staff implementing the project activities.

After discussing the different monitoring and evaluation techniques the next subsection explores the different types of activities implemented as HIV/AIDS projects that would need to be monitored and evaluated.

2.5 Nature of Activities Implemented as HIV/AIDS Projects in Uganda

There are various activities carried out in the fight against HIV/AIDS in Uganda by local NGOs and these are classified into four categories. The categories of projects include: Behavioral Change Communication (BCC), Support, care and treatment of the sick, Socio-economic impact mitigation and HIV/AIDS advocacy and human rights (UAC, 2006). The nature of activities done in each category is discussed next.

2.5.1 Behavioral Change Communication (BCC)

Behavioral change communication through IEC can be defined as the process through which tailored HIV/AIDS messages are provided through a variety of communication channels to communities in order to ensure positive and sustained behaviors. This is done so that members of
the community can protect themselves from HIV/AIDS infection through less risky actions, offer more support and care to the infected and the affected and reduce discrimination and stigma of the infected and affected in the community (FHI, 2004). Under BCC projects several activities can be scheduled by the NGO such as video shows, drama shows with HIV/AIDS messages, radio messages and drama, dissemination of information through peer groups, talks on HIV/AIDS to the communities, distribution of IEC materials such as posters, flyers, caps, t-shirts and setting up of billboards, voluntary counseling and testing for HIV/AIDS.

Through information communication and education activities FHI (2004) other authors argue that effective BCC projects can play a big role in fight against HIV/AIDS as illustrated below:

a) Increase knowledge by ensuring that people are given basic facts about HIV/AIDS in a language or visual medium or any other medium they can understand or relate to. The media could be radio, drama, songs television, dances, and art. Empowering the communities with basic facts about HIV/AIDS is very important: there are a lot of misconceptions and falsehoods about HIV/AIDS. The communities need to know what HIV/AIDS is, how it is spread, and how it is prevented so that they can adopt positive lifestyles.

b) Effective BCC can stimulate community dialogue by encouraging community discussions on the basic facts of HIV/AIDS and the underlying factors that contribute to the epidemic, such as risk behaviors and risk settings such bars coupled with alcohol abuse. The community can come up with by laws or even lobby government to regulate the risk activities and environments in their communities. They could for example lobby for a regulation of alcohol business in their communities.
c) Reduce stigma and discrimination through accurate information communication and education about HIV/AIDS that addresses stigma and discrimination and attempts to influence perceptions and behaviors towards those infected and affected by the scourge.

d) Stigma and discrimination of those affected and infected by HIV/AIDS is mostly as result of lack of accurate information about the disease (Kalichani and Simbayi 2003: and Valdiserri, 2002). Stigma helps to drive the epidemic underground because people fear to test for their status and even when they test they cannot come out openly about their status if they find they are infected because of fear of discrimination (Kalichani and Simbayi 2003). Bond et al. (2002) argues that stigma negatively affects all aspects of HIV/AIDS prevention, diagnosis (testing), treatment and care. It is imperative that if we are to have a substantial headway in the fight against the epidemic we need to defeat stigma and discrimination and its subsequent effects by arming communities with accurate information on HIV/AIDS and attempt to change their perceptions and behaviors about HIV/AIDS. BCC can motivate individuals and communities to demand more information on HIV/AIDS and appropriate services. Such services would include counseling services from governments or donors, care and treatment for the sick and those infected with other sexually transmitted infections, demand for more condoms. Effective BCC is known to result in more people seeking to voluntary know their HIV status which is very important tool in the fight against HIV/AIDS. Effective BCC is also associated with increased use of mainstream services in health such as treatment of STIs, screening for tuberculosis (Keating et al., 2006).
BCC also empowers communities with life saving skills such as negotiating for safer sex and delay in sexual activities, skills of proper and consistent condom use to prevent Infections (Keating et al., 2006).

2.5.2 Support care and treatment of the sick

The second categorization of activities done by the local NGOs is the community based support, care and treatment of the sick. Under this categorization of project activities NGOs usually provide community based home care. Community based home care is defined by the Health and Development Network (HDN) as care given to an individual in their own natural environment by their family and supported by skilled social welfare officers and communities to meet not only the physical and health needs, but also the spiritual, material, and psychosocial needs (HDN, 2011). The NGOs provide care and support through facilitating the provision of basic physical care to the sick, palliative care, nutritional support, and psychosocial support and counseling to the infected people and their families and care givers, support to the sick through provision of income generating skills to the sick. The NGOs usually work with hospitals and clinics to ensure that the sick are enrolled for anti retro-viral treatment and that they seek treatment for any opportunistic infection that may afflict them.

The NGOs work with the communities to identify the PLWHA and their families who need support care and treatment in the communities. Depending on their work plans they may recruit volunteers and care givers for the PLWHA and offer them training on care and counseling of the sick. They usually provide requirements like gloves, basins, disinfectant, nutritional supplements that facilitate the care givers. The NGOs also facilitate the establishment of support care groups for PLWHA through which they come together for mutual support and to share experiences of coping with the disease. The NGOs also offer counseling services for the sick, care givers and
the affected families so as to able to cope with the situation. They may also partner with faith based organizations to offer spiritual counseling to the sick and prayers. HDN (2011) argued that the benefits of community based home care (CHBC) to include among others:

a) Helping to decrease the congestion in hospitals. This is very important since HIV/AIDS has reached very high levels resulting in a big number of hospital beds being occupied by people with HIV/AIDS related ailments.

b) Working directly with affected families creates many opportunities for family members to assess their own risk of infection, which could promote behavior change and HIV prevention.

c) Many patients prefer CHBC to hospitalization and their needs and desires should always be considered first and foremost. Hospitals have that detachment from the community and there is still a lot stigma associated with hospitalization. In research by Bond et al. (2002), the most extreme cases of stigmatization were reported in health care settings such as clinics and hospitals. This would explain the preference for community care by the sick.

2.5.3: Socio-economic impact mitigation activities

The NGOs carrying out these activities attempt to mitigate the impact of HIV/AIDS through support and care of orphans and other vulnerable children (OVCs) and widows. An orphan is defined as a child below the age of 18 who has lost at least one parent in this context as a result of HIV/AIDS. AIDS orphans are one category of vulnerable children: the others may include children who are in a homestead where one or two parents or guardian are terminally ill with HIV/AIDS. In such a homestead the children are affected long before the parents succumb to the diseases because incomes and most of the available resources go into looking after the ill parent and little or none into providing basic care for the children.
Other vulnerable children are those in poor households that have taken in HIV/AIDS orphans and those who are discriminated against because their parents are HIV infected or they themselves are infected (Gail et al., 2006). The vulnerability is because in these circumstances the children have problems associated with accessing material provisions such as food, clothing, healthcare, shelter and education. The children also have emotional problems as result of lack of care, love, support, space to grieve and containment of emotions. The children also have social problems resulting from lack of supporting peer groups, role models to follow and parental figures for guidance in risky environmental and difficult situations children encounter as they grow up (Skinner et al., 2009). Because of the vulnerability of these children, they are at a risk of abuse: physical, emotional and sexual and exploitation through child labor that puts them at higher risks of contracting HIV/AIDS.

Depending on the work plan, the NGO usually identifies the OVCs that need care in the community. The OVCs are usually in child headed and grandparent headed homes others are with extended families. The needs of the OVCs are identified. The needs may include healthcare, shelter, education, food, parentage.

The NGOs may run orphanages where they take care of the children and make provision for the education, health care, food and other basic needs. But we are seeing another approach where the OVCs are supported within the extended families and by other caregivers that are willing to take them in. Usually these people may not have capacity due to the prevailing poverty. The NGOs play a role where they mobilize resources and make them available to these families to be able to provide food, educational, emotional and other basic needs to the OVCs. This approach is more cost effective than the orphanages making it possible to take care of more children (Sutherland et al., 2011).
The NGOs may also assist these homesteads to fight poverty by providing them with training in skills and micro credit so as run small business in order to get income to look after the OVCs. The widows may also be supported under this intervention to start income generating projects for their own survival and survival of the orphans they could be taking care of. These activities are met to mitigate the economic hardships that may be faced by the OVCs and the widows (Sutherland et al., 2011).

As the OVCs get older depending on their level of education some NGOs are providing vocational training in areas such as carpentry, bricklaying to them and assisting them to start a new life as adults by facilitating them to start small business or acquire employment.

2.5.4: HIV/AIDS advocacy and human rights

The fourth categorization of projects is concerned with advocacy on HIV/AIDS issues and human rights. Safe guarding human right is very vital in the fight against HIV/AIDS pandemic at personal, community and national levels. The rights of some people that are very vital in the fight against pandemic are violated (UNAIDS, 2012). This only serves to drive the epidemic up. UNAIDS (2012) identifies four categories of people whose human rights are violated and yet they are very vital in the fight against the pandemic because of the high prevalence of HIV/AIDS amongst them and their contact and link with wider society. The groups include sex workers, men who have sex with men, prisoners and drug users. Their vulnerability is discussed next:

- **Sex workers**

Sex work is criminalized in most countries including Uganda and the sex workers get arrested by the authorities. Society stigmatizes them for what they do: in most countries the interventions to
fight the pandemic are not adequate given the magnitude of the HIV/AIDS prevalence amongst the sex workers. Because of criminalizing of their work, they face a lot of occupational hazards. Some of the hazards they face include violence from their clients, refusal to pay, rape and the refusal by their clients to use condoms, hence putting them at risk of contracting HIV/AIDS.

- **Men who have Sex with Men (MSM)**

These are also people whose rights in society are violated through discrimination and stigmatization because of their sexual orientation. In Uganda homosexuality is criminalized in the penal code Act 1950, because of this, there are no specific tailored government interventions to assist MSM (Ravasi et al., 2006).

- **Prisoners**

These are at the risk of rape in prison from fellow inmates and prison warders and hence risk infection. Their rights to protection from physical and sexual violence are not protected. For the willing partners there are no condoms provided to them in prison and this violates their right to protection from HIV infection.

- **Drug users.**

These are also another category which is very vulnerable yet no adequate interventions have been designed for them. The NGOs carry out advocacy to ensure that the rights of these people and other vulnerable people are protected through appropriate legislation, policies and service provision.

The other role of the organizations is to fight for rights of PLWHA, such as the right to confidentiality when they go for HIV testing, the right to informed consent before an HIV test is carried, the right not to be discriminated against when they seek treatment and at the work place.
The issue of informed consent has become very pertinent with the government of Uganda proposing the adoption of routine testing for HIV in all the government healthcare setting and this is yet to be confirmed.

Some health officials are known to deny PLWHA patients treatment with the premise that after all they are going to die (Valdiserri, 2002). In a research by Bond et al. (2002) findings were that HIV/AIDS patients were often not given the service as other patients because the doctors said they were going to die anyway and confidentiality of patients HIV/AIDS status were breached. This is a blatant illustration violation of the human rights of the patients. Some organizations under this categorization of activities also provide free legal assistance to widows, orphans in succession disputes to be able to secure their property in case the relatives want to grab it and succession planning through writing wills for PLWHA.

The NGOs may schedule training workshops for key stakeholders such as policemen, prison warders, leaders, policy makers, doctors, nurses and train them on the Human rights issues concerning HIV/AIDS. They also carry out lobbying of government to have HIV/AIDS friendly legislation, policies and services for all categories of people including the four categories highlighted above.

In a nutshell this categorization of project activities is not mutually exclusive, NGOs projects may be a combination of activities, e.g. an NGO doing Human rights and advocacy may also be involved in BCC campaigns and some of these interventions are complementary in an integrated program e.g. a Human rights and Advocacy NGO may use a BCC project to change the attitudes of the stakeholders so that they respect the rights of their subordinates.

2.6 Best Practices in Monitoring and Evaluation of HIV/AIDS Projects
The contextual use of the term “Best practices” in monitoring and evaluation is meant to refer to those practices that have been found to be effective and hence recommended by authorities in this field of monitoring and evaluation. Through research and practice these practices have come to be known as effective in achieving monitoring and evaluation objectives. Webb and Elliot (2000) argue that the term best practices should not be taken literally: it should be taken as theoretical concept. Best practices are more about sharing effective practices. The best practices associated with monitoring and evaluations are described below:

- **Baseline study**

A baseline study should be undertaken before the project commences so that the condition prior to the implementation of the project is determined. This aids the evaluation function in order to determine whether the designed project did have an impact (Webb and Elliot, 2002: and Gyorkos, 2003). Hughes-d’Aeth (2002) argues that a baseline study helps to assess the state of the community in terms of what the project intends to achieve. This is important for evaluating the project for it provides a point of reference to determine how far the community moved in terms of achieving the project objectives. With reference to a BCC project, a baseline may determine the levels of HIV/AIDS knowledge in the community before the project, to be compared with levels of knowledge at the end of the project to determine how successful the project was on that aspect.

- **Monitoring and evaluation plan**

The project should have a monitoring and evaluation plan. The plan should be prepared as an integral part of project plan and design (PASSIA, 2004: and McCoy et al., 2005). The integration is for clear identification of project objectives for which performance can be measured.
Coherent framework

Monitoring and evaluation should be aided by a coherent structured conceptual framework. The framework aids in identifying the logic behind project elements and performance measurement, how they are elated and the underlying assumptions. One of the best practices that have been adopted because of its structured approach is the use of the LFA as a tool to aid both the planning and the monitoring and evaluation functions during implementation (Aune, 2000: and FHI, 2004). Vannopen (1994) as quoted by Aune (2000) argues that the LFA makes the planner’s of the project from the onset to think in terms of measuring performance by identifying the measures and criteria for success during the planning stage. This gives it great leverage in that from the beginning the project design hence implementation are integrated with performance measurement through identification of indicators that will demonstrate how the project is performing during implementation.

Monitoring and evaluation budget

The project budget should provide a clear and adequate provision for monitoring and evaluation activities. A monitoring and evaluation budget can be clearly delineated within the overall project budget to give the monitoring and evaluation function the due recognition it plays in project management (Gyorkos, 2003: and McCoy et al., 2005). Some authors argue for a monitoring and evaluation budget to be about 5 to 10 percent of the total budget (Kelly and Magongo, 2004: IFRC, 2001: and AIDS alliance, 2006). The intention with this practice is not to be prescriptive of the percentage that is adequate, but to come up with sufficient funds to facilitate the monitoring and evaluation activities. Provision of a budget for monitoring and evaluation ensures that the monitoring and evaluation activities take place when they are due. It also ensures that monitoring and evaluation are not treated as peripheral function.
Schedule of monitoring and evaluation activities

The monitoring and evaluation activities of the project should also be included in the project schedule so that they are given the due importance they require, not only done at the whims of the project manager (IFRC, 2001: AusAID, 2006: and McCoy et al., 2005).

Personnel assigned for monitoring and evaluation activities

There should also be an individual who is directly in charge of the monitoring and evaluation as a main function (Kelly and Magongo, 2004) and an identification of different personnel for the different activities of the monitoring and evaluation such as data collection, analysis, report writing, dissemination of the monitoring and evaluation findings (AusAID, 2006: Gyorkos, 2003: and McCoy et al., 2005). Having staff clearly designated with monitoring and evaluation roles ensures that when the monitoring and evaluation is due somebody is available to do it, and staff appreciate that the project managers value monitoring and evaluation not as a compliance to the funding agency but as a tool for project management, learning and improving on the performance of the project.

Specification of the frequency of data collection

There should be a clear specification of how often monitoring and evaluation data is to be collected and from whom. There should also be a specification of a schedule for monitoring and evaluation reports to be written (Gyorkos, 2003). The monitoring should be done regularly in order to be able to track the project and identify problems early enough before they go out of hand. The regularity of monitoring could be a function of the size of the project, but a monthly frequency would be adequate, monitoring every 3 months would still be acceptable (AusAID,
The monitoring would entail collecting data, analysis and writing a report at the specified frequency.

\[\text{Stakeholder involvement}\]

Involvement of all stakeholders (beneficiaries, implementation staff, donors, wider communities) in the monitoring and evaluation process of the project is very important. Participatory approach to monitoring and evaluation is viewed as an empowerment tool for the beneficiaries and other stakeholders of project who in most cases are not consulted in this. It is also demonstration of downward accountability i.e. accountability to the beneficiaries. There is a lot of emphasis on upward accountability i.e. the donor without as much regard to beneficiaries and the communities in this case the HIV/AIDS affected and infected (Aune, 2000). This obsession with upward accountability creates a barrier between the project and other stakeholders in terms of monitoring and evaluation, this result in the process being geared towards satisfying the demands of the donor at the expense of the other stakeholders. Involvement of the beneficiaries in monitoring and evaluation gives them a sense of ownership and contributes to long term sustainability long after the project donor has ceased financing the project and also increases the chances of more beneficiaries to take up the services of the project.

Other key neglected stakeholders are the field staff involved in implementing the project. They usually play a passive role of collecting monitoring data and passing it on to the higher offices without an active role in the monitoring and evaluation. CORE (2006) argues that the beneficiaries do not stand to benefit optimally from the monitoring and evaluation since monitoring and evaluation information is not shared with them hence they reduce the chances of learning and improving the project implementation techniques. He further argues that when the monitoring plan and indicators are determined at the highest level e.g. monitoring and evaluation
officers and the project manager or externally it is not easy for beneficiaries and implementing staff to tap that information for their benefit of learning.

There are various levels of participation in monitoring and evaluation:

a) The ideal way is the involvement of all stakeholders including the donors, community, beneficiaries, and people involved in the planning and implementation of project in all stages monitoring and evaluation throughout the duration of the project. In consultation and collaboration with all these, they determine what is to be monitored and evaluated, how monitoring and evaluation is to take place including identification of indicators, they do the analysis of the data and asses the performance of the project and be able to generate guidance on how to proceed with the project (CORE 2006: and Bradley et al., 2002). This participatory monitoring and evaluation should be part of a participatory project design and planning to fully optimize its benefits outlined above. Communities would be engaged in this participatory approach through village meetings and assistance from of a facilitator.

b) Other approaches would entail having community and field staff representatives on the team that is planning and executing the monitoring and evaluation with care to involve all the otherwise usually marginalized categories like the youth, women and elderly.

c) In reality having a fully participatory monitoring and evaluation requires a lot time and skill in getting a consensus from all the parties on what is to be monitored and evaluated and how, but nevertheless there should be some level of participation in this process to obtain some benefits it accrues to the project.

d) For tracking of the specific elements as described by the logical framework matrix of the project the best practices include among others:
**Inputs**

The different inputs of the project need to be monitored effectively to ensure that they are used optimally on project the activities in order to produce the desired outputs. The recommended practices for monitoring each of the inputs as identified by the log frame approach include the following:

**Financial resources**

Financial resources should be tracked with a project budget with the project activities having cost attached to them, with comparison of what has been spent on project activities with what should have been spent as per planned expenditure in the budget (Crawford and Bryce, 2003). This information of expenditure is obtained from the individual in charge of project accounts. This comparison of actual expenditure versus planned expenditure should be done regularly to determine if the project is not going over the budget.

**Human resources**

Human resources on the project should be given clear job allocation and designation befitting their expertise, if they are inadequate then training for the requisite skills should be arranged. For projects with staff that are sent out in the field to carry out project activities on their own there is need for constant and intensive on-site support to the out-field staff (Ramesh, 2002; and Reijer et al., 2002) e.g. in a BCC project where a number of peer educators are recruited and deployed on their own in the different parts of the implementation area, there is need to constantly check on them and help solve any challenges they may be encountering such as running out of materials, supplies, encountering hostile communities.
Activities

Project schedule

Processes or activities to be done on the project are tracked with aid of a project schedule or project timeline. At regular intervals actual schedule of activities done is compared with the planned schedule to determine whether the project is within schedule or over schedule (Crawford and Bryce, 2003).

Outputs

For monitoring outputs of the project, it is important to use a mix of both qualitative and quantitative indicators.

Quantitative indicators

Quantitative indicators look at outputs in terms of numbers, such as number of people reached, number of trainings carried out, number of IEC materials distributed (Hughesd’Aeth, 2002). Quantitative information such as attendances, people served, is best captured by a standardized form then information is aggregated at regular intervals (Gyorkos, 2003). Materials distributed can be captured by a standard distribution log. The standardization facilitates the implementation staff and allows for comparability across implementation areas and also facilitates data entry of the information. These actual outputs at specified periods such as are then compared with planned or targeted outputs as illustrated in the project plan.

Qualitative indicators

Qualitative indicators describe situations and give an in-depth understanding of issues of the outputs. For example dissemination of 100 people with HIV/AIDS human rights information, qualitative monitoring would require us to determine, what the perception was of the training, in terms of quality, adequacy and delivery. Methods such as focus groups discussions, observation,
interviews are used with qualitative methods of monitoring. For evaluation of both the outcomes and goals, both qualitative and quantitative methods are recommended in order to get clear in-depth understanding into the success of the project (FHI, 2004).

**Outcomes and goals**

Outcomes and goals are best evaluated with both qualitative and quantitative data. Data from project records is very vital and should be kept securely up to end the end of the project and even longer. This helps in getting the whole picture of the project and is cost effective. Other best practices associated with monitoring evaluation other than those tied to the elements of the log frame identified above include the following:

- **Use of computers**

  Computers can be of immense value in monitoring and evaluation process. The analysis of data should be aided by computers where applicable, for example if a questionnaire was distributed as a tool in the monitoring and evaluation, software like Microsoft Excel, SPSS, can be used to analyse the responses. Numerical data like counts of people served, attendances of activities, number of IEC materials distributed can be aggregated and information stored over the lifelong of the project more efficiently and reduce on paper work and its associated disadvantages (Kelly and Magongo, 2004). This is a very good practice because it makes the task of managing monitoring and evaluation information more effective and efficient. Other applications of computers are in word processing and in report writing.

- **Midterm and end of project evaluations**

  For evaluation usually there is midterm and another at end of project implementation, an impact assessment should be scheduled after the project has ended to determine what the impact of the project was and what the contribution of the project was to the attainment of the goal (Gyorkos,
The midterm evaluation and the one at the end of the project implementation can review the implementation process (process evaluation) to determine how project faired in terms of input use, carrying out the scheduled activities and in terms of how the project faired in terms of level of output in relation with the targeted output (Gilliam et al., 2003). The short term outcomes can also be evaluated at this point.

- **Capture and documentation of lessons learned**

Lessons learned from the implementation should be captured and documented for incorporation into the subsequent projects and sharing with other stakeholders. The lessons would include what went right in implementation and what went wrong and why so that the mistakes are not repeated in the subsequent projects (PASSIA, 2004: Uitto, 2004: and Reijer et al., 2002). These lessons should be shared with the implementing staff. Sustainability of the project should be determined. It is not easy to determine sustainability, but the level of the communities’ involvement can give an indication of the continuation of the project activities even at the end of funding period.

- **Objectivity by an external facilitator**

Objectivity in evaluations is enhanced by an outside facilitator that would come in to aid the evaluation. This is in contrast to the fully participatory advocating authors who argue that objectivity is not that important, but empowering the stakeholders to learn from the evaluation, so evaluations should be subjective and done by the stakeholders (Bradley et al., 2002: and Aune, 2000). A compromise position is recommended, whereby an external facilitator comes in for objectivity and an outward opinion but the stakeholders are actively involved in the process for learning and empowerment.

**Dissemination of monitoring and evaluation findings**
There should be a monitoring and evaluation findings dissemination plan. Monitoring and evaluation findings should be disseminated to the stakeholders by way of a report to the donor depending on his requirement, communication or report to the community and beneficiaries and to the implementing staff to improve on their implementation practices and strategies (Gyorkos, 2003; and McCoy et al., 2005).

CHAPTER THREE: METHODOLOGY

3.0 Introduction
This chapter presents the research methodology of the study. It describes and justifies the methods and processes that were used in order to collect data that was used in answering the research questions, the research design, survey population, and sample size and information analysis.

3.1 Research Design

The study used descriptive and analytical research designs based on questionnaires, available information and observation. The descriptive design involved understanding of the effectiveness of the NGOs in Monitoring and Evaluation of projects implemented on HIV/AIDS. The analytical design was used to evaluate the facts that were got from the field. It entailed looking at the Monitoring and Evaluation reports submitted by the local NGOs in order to understand how they do Monitoring and Evaluation. It required a lot of convincing for the organization to surrender their documents.

3.2 Area and Study Population

A total population of registered NGOs in the two districts (Luweero and Nakaseke) was obtained from the District Community Development Officers and a purposeful convenient random sample of NGOs was selected. After the random sample extraction the study mainly concentrated on the implementers and monitoring and evaluation officers in these NGOs for the period of study.

3.3 Sampling Design

3.3.1 Sampling Size
A total of 10 local NGOs were selected from the 14 registered NGOs with the respective District Community Officers. Nakaseke district had 4 whereas Luwero had 10 registered NGOs.

3.3.2 Sampling Technique

The sampling method employed was simple random sampling since it is considered effective due to the fact that they are sparsely located in the two districts. Three (3) were selected from Nakaseke and 7 from Luwero district.

3.4 Data Collection

Data was collected from using questionnaires.

- **Questionnaire**

A series of questions that are easy and convenient to answer but can describe the intended practices or behaviors were formulated into a questionnaire. In this respect the questionnaire was able to tell the researcher about the practices of that particular organization the way it monitors and evaluates its HIV/AIDS projects. The study adopted mainly a structured questionnaire which was disseminated to the respondents through either e-mail contacts or hand delivered and later picked after responding and a few semi structured questions to maximize the advantages of both types of questions and minimize their disadvantages. These were convenient for the study and ensured maximum coverage as opposed to the face to face administered questionnaire which is time consuming.

3.4.1 Designing the questionnaire
A questionnaire was designed in order to collect data that was used in answering the investigative questions. At this point it was important to describe the relationship between the research questions, investigative questions and the questions that constitute the questionnaire.

Figure 3.2 illustrates the hierarchy of the question and brief description of each follows

<table>
<thead>
<tr>
<th>Research questions</th>
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<tr>
<td>Research Qn. 1: How effectively are projects monitored and evaluated?</td>
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<th>Investigative Questions</th>
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<tr>
<td>Research Qn 1:</td>
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<tr>
<td>i) What are the different activities carried out on HIV/AIDS</td>
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<tr>
<td>ii) What is the extent of resourcing provided to local NGO’s implementing HIV/AIDS projects?</td>
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<tr>
<td>iii) What are the best practices in monitoring and evaluation of HIV/AIDS projects?</td>
</tr>
<tr>
<td>iv) How do the monitoring and evaluation practices compares with best practices</td>
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</tbody>
</table>

Fig 3.2 Hierarchy of research, investigative and measuring questions

Source: Segawa and Rwelamila, 2006

These are the main questions that guide the research and were derived from the research problem. If the research questions are answered the research problem is solved.
- **Investigative questions**

These are sub questions derived from the research questions. Each of the research questions were divided into smaller manageable questions. For example from figure 3.2 research question 1 was divided into investigative questions (i) to (iv). If the smaller investigative questions are answered the research question from which they are derived is answered.

*Nature of the projects carried out by the NGOs questions*

This section sought to classify the respondent organizations depending on the catchment area of operation and nature of founding body. This part also sought to determine the kind of activities the NGO are carrying out in their areas of operation. The activities were classified based on the criteria identified in the literature review section as shown below:

(i) Behavioral Change Communication (BCC) activities:

(ii) Support, care and treatment of the sick activities:

(iii) Socio-economic impact mitigation activities:

(iv) HIV/AIDS advocacy and human rights activities

This section also seeks to determine the resources at the disposal of the NGOs, in terms of finances, human resources, equipment and the sources of funding. This section answered the investigative question (i) and (ii).

*Monitoring and evaluation practices question*

This section probed the monitoring and evaluation practices of the NGOs and was divided into two subsections, monitoring and evaluation plan and implementation the monitoring and evaluation process: each is briefly explained below:

a) Monitoring and evaluation plans
This sub section sought to determine whether NGOs drew up monitoring and evaluation plans for their projects. It also sought to determine what constituted the monitoring and evaluation plans and how the plans were used.

b) Monitoring and evaluation during the implementation

This sub section sought to determine the monitoring and evaluation practices when the projects were in the implementation stage.

*Monitoring and evaluation environment questions*

This section probes the environment within which monitoring and evaluation is carried out with the view of identifying the challenges faced by NGOs.

After the design of the questionnaire, it was piloted with a small group of practitioners and then readjustments and refinements were made. The questionnaire was then be personally delivered or e-mailed to the NGOs in the study area addressed to the project coordinators (managers) or monitoring and evaluation officials.

After delivering the questionnaires the researcher took two weeks waiting for response from the respondents, calling and prompting them to respond to the questions.

**3.5 Data Source**

Data was collected from primary and secondary sources. Primary data was collected through observations and use of questionnaires. Secondary data was obtained using already published information like journal articles, annual reports and any other research publications.

**3.6 Data processing and Analysis**
Descriptive techniques like figures, percentages and tables were used to interpret the collected data. Conclusions and generalizations were drawn from the frequency of occurrences of particular issues.

### 3.7 Limitations of the study

i) The major limitation was time. It took longer than anticipated to get the information that was required.

ii) It required high costs in transport and telephone calls on follow ups. The organizations were not centrally located and therefore required some movements from one place to another.

iii) Limited access to all the documents for confidential reasons and hence limited the knowledge for the study.
**4.0 INTRODUCTION**

This Chapter presents the data analysis and discussion of the findings of the research study. The investigative questions whose findings this chapter presents were:

i) What are the different activities carried out on HIV/AIDS?

ii) What is the extent of resources provided to local NGOs implementing HIV/AIDS projects?

iii) What are the best practices in monitoring and evaluation on HIV/AIDS projects?

iv) How do the monitoring and evaluation practices compare with best practices?

**4.1 RESPONSE PROFILE**

This is presented under, response rate and profile of the individual organizations. Each is described as below.

**4.1.1 Response rate**

Questionnaires were sent to 10 organizations whose addresses were obtained from the respective District Community Officers. 7 of the organizations chose in the sample were in operation with exception of 1 which was no longer implementing HIV/AIDS projects by the time of the study mainly due to lack of funding from its sponsors. 2 did not respond to the survey and the sample reduced from 10 to 7 an acceptable rate for mail surveys for not for profit organization averages 50% according to Henig et al. (1995).

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*Figure 4.1 shows the response rate of the survey*
Of the 10 organizations that were targeted in the study, 7 completed the questionnaires. Figure 4.1 shows that the response rate for the survey was 70%, this is higher than average rate of academic surveys done among organizations (Barach, 2004).

4.1.2: Profile of the respondent

This was done using 3 criteria i.e. catchment area of operation, nature of founding body and duration for which they have been carrying out HIV/AIDS projects.

Table 4.1 shows the profile of respondents in terms of area of operation and nature of founding body.
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<tr>
<th>Area of Operation</th>
<th>Nature of Founding body</th>
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<td></td>
<td>FBO</td>
</tr>
<tr>
<td>District</td>
<td>-</td>
</tr>
<tr>
<td>Sub-county</td>
<td>57%</td>
</tr>
<tr>
<td>County</td>
<td>-</td>
</tr>
<tr>
<td>Parish</td>
<td>-</td>
</tr>
<tr>
<td>Village</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>57%</td>
</tr>
</tbody>
</table>

Source: Primary Data Analysis

Table 4.1 shows that 43% operate in the entire district and are not faith based (Non FBO) and 57% shows that these operate within the sub-county and are mainly Faith Based (FBO).

It is evident that the majority of the NGOs operated at sub-county level, explained by the little resources to increase their catchment area and these were all founded by religious bodies highlighting the increased role of religious bodies in providing services in the area of HIV/AIDS pandemic for which they have been carrying out these projects.

Figure 4.2 shows the profile
Figure 4.2. Duration of carrying out HIV/AIDS projects

Source: Primary data analysis

Figure 4.2 shows that majority of the respondents, 71% (57 +14) have been implementing HIV/AIDS projects for over seven years. There was significant increase in the number of organizations carrying out these activities over time. This can be attributed to the increasing community needs as the HIV/AIDS pandemic grew over time.

After examining the profile of the respondents, the subsequent sections highlight and discuss the finding of the research presented under the various themes of the investigative questions.

4.2 Nature of Projects implemented by the NGOs

The organizations were asked which of the identified HIV/AIDS projects activities they carried out. Table 4.2 shows the response to this question.

Table 4.2 Projects implemented by the NGOs
<table>
<thead>
<tr>
<th>Type of project implemented</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Behavioral Change Communication (BCC)</td>
<td>5</td>
<td>71%</td>
</tr>
<tr>
<td>Care and Support if Sick (CSS)</td>
<td>6</td>
<td>85%</td>
</tr>
<tr>
<td>Socio-economic mitigation (SEC)</td>
<td>4</td>
<td>57%</td>
</tr>
<tr>
<td>Human Rights and Advocacy (HRA)</td>
<td>2</td>
<td>28%</td>
</tr>
</tbody>
</table>

Source: Primary Data Analysis

Table 4.2 shows that most of the organizations were implementing more than one type of project. The table shows that care and support of sick are the most frequent; these projects were identified by 85% of the respondents as most involved in. These are emphasized by NGOs to ensure prevention of new infections and are most sustainable way of defeating the disease. BCC follow closely with 85%, these do not need a lot of resources in terms if manpower and finances and can cover a large outreach as opposed to say CSS which require a lot of resources.

The least implemented projects were Human Rights and Advocacy with 28% and social-economic mitigation with 57%. This is attributed to the fact that these are still new concepts and require expertise that is lacking within NGOs as illustrated by the level of permanent employees.

4.3 Extent of Resources employed by the NGOs

This section sought to establish the level of resource at the disposal of the NGOs when implementing their project activities. These were categorized into budget, human resources assets and equipment.
4.3.1 Budget

The finding of size of budget, sources of donor funds and extent of the donor contribution to the NGO budget are defined in the subsequent sections.

Size of Budget

Figure 4.3 illustrate the size of the budget in shillings that was spent on HIV/AIDS projects in 2011/2012 by the local NGOs.

![Pie chart showing budget distribution](image)

Figure 4.3: Sized of the NGO budgets in shillings

Source: Primary Data Analysis

The figure shows that only 14% of the respondents had a budget of 35,000,000 and above and the majority of the respondents 86% (57 + 29) had annual budgets of less than 35,000,000 this can be attributed to lack of adequate funding from donors due to improper use of project funds.
Donor Source of Funding

Table 4.3 Illustrates responses to determine the donor source of funding to the NGOs.

<table>
<thead>
<tr>
<th>Type if project implemented</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>International Donor Agencies</td>
<td>07</td>
<td>100%</td>
</tr>
<tr>
<td>Government bodies</td>
<td>00</td>
<td>0%</td>
</tr>
<tr>
<td>Corporate Companies</td>
<td>00</td>
<td>0%</td>
</tr>
<tr>
<td>Private Donors</td>
<td>03</td>
<td>43%</td>
</tr>
</tbody>
</table>

Source: Primary Data Analysis

Table 4.3 shows that some organizations had more than one source of donor funding for their projects. It can clearly be emphasized that all organizations depended on International donor agencies for funding and among these 43% were also receiving funding from private individuals or donors.

Extent of donor Contribution

Figure 4.4 showing the extent of donor contribution to NGOs in HIV/AIDS Projects

Source: Primary Data Analysis
Figure 4.4 Shows that 85% of the respondents received between 76-100 percent of their budget from donors. Only 15% had a donor contribution of less than 50% to their budgets. It is evident that most of the NGOs, were heavily relying on donors to fund their activities. This is highly disadvantageous in case the donors withdraw funding.

### 4.3.2 Human Resources

The findings regarding the human resources employed into HIV/AIDS projects were as in the table below.

Table 4.5: Human Resources on Projects

<table>
<thead>
<tr>
<th>Number of Staff</th>
<th>Permanent</th>
<th>Volunteer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 7</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>57%</td>
<td>42%</td>
</tr>
<tr>
<td>7-12</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>14%</td>
<td>14%</td>
</tr>
<tr>
<td>13-18</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>29%</td>
<td>42%</td>
</tr>
<tr>
<td>18+</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

**Source: Primary Data Analysis**

Table 4.5 shows that 71% (57 + 14) of the respondents had less than 12 permanent staff. Only 29% of the respondents had more than 13 permanent staff. The table further shows 42% of the respondents had more than 13 volunteer staff.

It is evident that most of the NGOs did not have adequate numbers of permanent staff and only relied more on volunteer staff. This may be attributed to the low budget operated by these NGOs as showed in the research finding earlier 86% operating below 35,000,000.

### 4.3.3 Assets and Equipment

The organizations were probed for the assets and equipment they used on the projects they implemented. Table 4.6 shows the findings.
Table 4.6: Assets and equipment used by the NGOs on their projects

<table>
<thead>
<tr>
<th>Equipment and Assets</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Computers</td>
<td>4</td>
<td>86%</td>
</tr>
<tr>
<td>Cars</td>
<td>3</td>
<td>43%</td>
</tr>
<tr>
<td>Video equipment</td>
<td>2</td>
<td>29%</td>
</tr>
<tr>
<td>Public Address System</td>
<td>2</td>
<td>29%</td>
</tr>
<tr>
<td>Motor Cycles</td>
<td>3</td>
<td>43%</td>
</tr>
<tr>
<td>Agricultural land</td>
<td>4</td>
<td>57%</td>
</tr>
<tr>
<td>HIV/AIDS testing equipment</td>
<td>2</td>
<td>29%</td>
</tr>
<tr>
<td>Still camera</td>
<td>6</td>
<td>86%</td>
</tr>
<tr>
<td>Musical Instruments</td>
<td>4</td>
<td>57%</td>
</tr>
<tr>
<td>Cabins</td>
<td>6</td>
<td>86%</td>
</tr>
</tbody>
</table>

Source: Primary Data Analysis

Table 4.6 shows that majority of respondents had multiple assets and equipment they used on the projects they implemented. The table shows that 86% of the respondents had a computer for proper record keeping in monitoring and evaluation. The use of other equipment and assets on projects is shown; however they need to be kept in good custody.

The NGOs had a significant number of resources at their disposal which necessitated effective monitoring and evaluation. This would increase the chance of the projects implemented by NGOs to achieve their objectives and also demonstrate accountability of the resource use to the project stakeholders.
4.4 Comparison of NGOs practices with best practices

Baseline Studies

Question 2.1 sought to determine whether before NGOs embark on an HIV/AIDS project, they collected any information prior to implementation. It was established that only 57% of the respondents do this and 43% never conduct any survey. This means that the projects they carry out cannot be adequately evaluated. This is greatly supported by the study of Rick, (2001) who found failure to obtain baseline data to be very prevalent amongst NGOs. The baseline study facilitates determination of the community’s welfare before and compare after implementation of the projects. In the absence of such data about the baseline condition of the community, the NGOs would find it very hard to measure the impact of their projects.

Monitoring and Evaluation Plan

Question 2.2 sought out to determine whether the respondents had a plan that guided monitoring and evaluation of the projects they were implementing. It was established that 85% of the respondents had clearly documented plans for M & E whereas 15% never had any plans.

For such projects that did not have plans for M & E, they gave reasons as:

a) They did not know how to design a monitoring and evaluation plan.
b) Their projects were too small and therefore did not necessitate having one.

This implies that not all the projects implemented by the respondents are effectively monitored and evaluated. Projects without M & E plans are not effectively monitored and evaluated (PASSIA, 2004: and McCoy et al, 2005).

Logical Framework Approach

Question 2.8 sought to determine how often the respondent used the logical framework approach (log frame) in aiding the monitoring and evaluation of projects. 71% of the respondents consistently used the log frame on all the projects and only 9% did use it on a few projects.

This implies that the planners of the project think form the onset in terms of measuring performance by identifying the measures and criteria for success during the planning stage as
cited by Aune, 2000. This is also explained by the fact that majority of the donors insist that the NGOs use the LFA to design their projects as condition for funding (Aune, 2000).

**Project Schedule**

Question 2.9 sought to determine whether monitoring and evaluation activities were part of the project schedule. It was established that 42% of the respondents included monitoring and evaluation on some or a few projects (14 +28) respectively and the majority of the respondents 58% included it on all the projects they implemented. This reflects proper decision making and implementation on part of the implementers to effect monitoring and evaluation.

**Stakeholder Involvement**

The respondents were asked which stakeholders were involved in the design of the monitoring and evaluation plans for the projects they implemented.

**Table 4.7 show the findings**

<table>
<thead>
<tr>
<th>Stakeholder</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Donors</td>
<td>06</td>
<td>85%</td>
</tr>
<tr>
<td>Staff</td>
<td>04</td>
<td>57%</td>
</tr>
<tr>
<td>Community</td>
<td>01</td>
<td>14%</td>
</tr>
<tr>
<td>Beneficiaries</td>
<td>02</td>
<td>28%</td>
</tr>
</tbody>
</table>

**Source: Primary Data Analysis**

**Donors**

The table shows that the involvement of the donors was at 85% meaning that they are constantly involved in the process with 15% representing a small variation. This supports the fact that donors will always dictate how the projects they fund will be monitored and evaluated.
**Project Staff**

This shows an average involvement of staff with 57% on the project activities. The staffs therefore have inadequate input in this process and their only works is implementing and collect monitoring and evaluation data as passive participants.

**Community**

The table shows that there is little or no involvement of stakeholders by some NGOs in monitoring and Evaluation. It scored a minimal percentage of 14%.

**Beneficiaries**

The involvement of beneficiaries in the design of monitoring and evaluation plans was inconsistently done by the NGOs with 28% responding to the positive. This implies that the beneficiaries were mostly a source of monitoring and evaluation data without any meaningful input. This does not fully demonstrate downward accountability to the beneficiaries.

It is therefore evident the most of the stakeholders were not consistently involved in the design of monitoring and evaluation plans with the exception of the donors. Non-involvement of the other stakeholders meant that the project implementers lost an opportunity of fully demonstrating downward accountability to all the other stakeholders most especially the community and the beneficiaries (CORE 2006:  and Bradley et al., 2002).

**Contents of the Plans**

The respondents were asked what aspects constitute their monitoring and evaluation plans.
Table 4.8 shows the findings to this question and discussion follow next

<table>
<thead>
<tr>
<th>Aspect</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data to be collected</td>
<td>06</td>
<td>86%</td>
</tr>
<tr>
<td>Individual in charge of M &amp; E</td>
<td>05</td>
<td>71%</td>
</tr>
<tr>
<td>frequently of data collection</td>
<td>02</td>
<td>28%</td>
</tr>
<tr>
<td>Schedule of M&amp;E activities</td>
<td>02</td>
<td>28%</td>
</tr>
<tr>
<td>Dissemination of findings</td>
<td>01</td>
<td>14%</td>
</tr>
<tr>
<td>Individual for specific M &amp; E activities</td>
<td>03</td>
<td>42%</td>
</tr>
</tbody>
</table>

Source: Primary Data Analysis

Data to be collected

Table 4.8 shows that the specification if the data to be collected had a percentage of 86% meaning that this was constantly done in some of the NGOs. It is important to note that the monitoring and evaluation data to be collected is specified in the plan before the project commences, this will ensure that project officials make prior provision to access the data when it is due, for example attendance forms can be printed arranged, effective questionnaires can be tested.

Individual in-charge of Monitoring and Evaluation

The table shows that most NGOs had an individual in-charge of M & E with 71% responding to the positive. Specifying an individual in-charge of monitoring and evaluations ensures that when the monitoring and evaluation activities are due someone ensures that they are done.

Frequency of Data Collection

This had a low percentage of 28% implying that few NGOs specified it in the monitoring and evaluation plans. This meant that some vital data could have been missed and hence ineffective monitoring and evaluation of the projects.
Individuals for Monitoring and Evaluation Activities

The specification of individuals for monitoring and evaluation activities had a percentage of 42% implying that some NGOs did not take this as a priority and therefore when monitoring and evaluation activities were due there may not have been anybody available to carry them out hence they may have been missed out.

Schedule for Monitoring Evaluation Activities

The specification of a schedule for monitoring and evaluation activities had a percentage of 28% which is too low. Failure to schedule these activities would increase the chances of missing some of them and hence poor monitoring and evaluation.

Budget for Monitoring and Evaluation

The respondents were probed for whether monitoring and evaluation activities had a separate budget with a special vote within the project budget. Figure 4.5 shows the findings

![Pie chart showing budget allocation](image)

**Figure 4.5: Monitoring and Evaluation budget**

The figure shows that 57% of the respondents did not have a separate budget with a special vote arrangement for monitoring and evaluation activities, this implies that the majority of the respondents did not have a clear and separate financial provision for monitoring and evaluation activities, this can result in ineffective and inadequate monitoring and evaluation of the projects.
Constitution of Monitoring and Evaluation Budget

This probed the constitution of monitoring and evaluation funds in the overall budget.

Figure 4.6 shows the findings

![Pie chart showing budget allocation for monitoring and evaluation activities]:
- No specific budget: 43%
- 6-9%: 29%
- >5%: 14%
- 10%: 14%

Figure 4.6: Monitoring and Evaluation budget constitution to total budget

Source: Primary Data Analysis

Figure 4.6 show that 42% of the respondents did not have a separate budget with a special vote arrangement for monitoring and evaluation activities. This means that the majority of the NGOs did not have a clear and separate financial provision for M & E activities which implies that the activities were not given the due recognition (Gyorkos, 2003: and McCoy et al, 2005) and would result in activities not being done at all resulting in ineffective and inadequate monitoring and evaluation of the projects. 28% of the respondents had a budgetary allocation of less than 5% and only 28% had the recommended budgetary allocations range of 5% - 10% (Kelly and Magongo, 2004: IFRC, 2001: and AIDS Alliance 2006). This implies ineffective Monitoring and Evaluation as the resource to carry out the activity are limited.
Implementing and Monitoring and Evaluation Process

This section presents findings to questions that sought to determine the respondents’ practices related to how they implemented the monitoring and evaluation process of the projects.

Monitoring Project Finances

Figure 4.7 shows findings to the question that sought to determine how often the respondents monitored the finances on the projects. It sought to determine how often they compared the actual expenditure on the project against the planned budget.

Source: Primary Data Analysis

Figure 4.7 Shows that 28% of the respondents compared their actual expenditure against planned expenditure at least every month. The figure further shows that 72% of the respondents monitored their project finances less frequently that is within a range of 3 months and 12 months.

Comparing the actual expenditure against the planned alerts the project manager to the performance of the project in terms of cost that is to say, whether the project is within budget or has exceeded the budget lines and it enables the manager to take corrective action. The fact that the majority of the projects did not regularly carry out this practice means that the project were at a risk of going over budget without the knowledge of the project manager and hence inability to have any timely remedy action.
Monitoring the project schedule

Question 3.2 sought to determine how often the respondents managed their project activity schedule on the projects they implemented.

Figure 4.8 showing monitoring the project schedule

Figure 4.8 shows that 38% of the respondents monitored the project schedule at the end of the project and 62% monitored the schedule every after 3 months, this indicates a good practice as corrective measure can be effected within the three months of implementation rather than at the end of the project.
Data Collecting Methods

The respondents were probed for the data collecting methods they used to collect monitoring and evaluation data. Table 4.9 shows the findings to this question.

<table>
<thead>
<tr>
<th>Method</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attendance forms</td>
<td>6</td>
<td>85%</td>
</tr>
<tr>
<td>Participant observation</td>
<td>4</td>
<td>42%</td>
</tr>
<tr>
<td>In-depth interviews</td>
<td>3</td>
<td>42%</td>
</tr>
<tr>
<td>Material distribution registers</td>
<td>5</td>
<td>71%</td>
</tr>
<tr>
<td>Focus group interviews</td>
<td>2</td>
<td>28%</td>
</tr>
</tbody>
</table>

Source: Primary Data Analysis

Attendance Forms

Table 4.9 shows that the use of attendance forms on projects to collect monitoring and evaluation data was 85% implying consistent use of this method by the respondents. This enables project managers to determine the reach of the project activities in terms of number of people accessing the project services. This information is very vital in evaluating the project at end to determine the total number of people reached by the project services. Since this method was used by most of the NGOs, the project managers were in position to determine coverage of their services in terms of numbers of people reached.

Participant Observation

The score for this was 42%, this implied that this method was inconsistently used by the NGOs. This means that the full picture on how the project activities transpired was not fully captured on the projects. Just recording the attendance does not give the full information on how the project activity such as training transpired.
In-depth Interviews

The score for the use of in-depth interviews as a method of data collection was 42%. This implies that the interviewing of project beneficiaries, wider community and staff which would have given the project managers the broader pictures and in-depth understanding of the project implementation was not fully utilized and therefore missed important information.

Material distribution registers

The percentage for the use of material distribution register was 71% implying that the method was used by most of the respondents. This method is very vital in collecting data of materials distributed during the implementation of project activities such as condoms, supplies, food supplements, mosquito nets and gloves. This helps the managers to keep track of how many items were distributed to beneficiaries and monitor whether there are any changes.

Focus Group Discussion

The use of focus group discussion / interviews as a monitoring and evaluation data collecting method had a low percentage of 28 % interpreted to mean this method was rarely used by the most of the respondents. Focus group discussion is a qualitative data collecting method that enables the project managers to have an in-depth understanding of the issues pertaining to the implementation of the projects. The low percentage implies a gap in monitoring and evaluation.

Use of Computers

The respondents were probed for whether they used computers to aid monitoring and evaluation of the projects they implemented and what they used the computers for. 86% of the respondents used computers for monitoring and evaluation.
Table 4.10 shows the responses to what monitoring and evaluation function they used computers for.

<table>
<thead>
<tr>
<th>Method</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report writing</td>
<td>7</td>
<td>100%</td>
</tr>
<tr>
<td>Data storage</td>
<td>6</td>
<td>85%</td>
</tr>
<tr>
<td>Emailing of findings</td>
<td>5</td>
<td>71%</td>
</tr>
<tr>
<td>Analysis of data</td>
<td>5</td>
<td>71%</td>
</tr>
<tr>
<td>Collection of data</td>
<td>22</td>
<td>28%</td>
</tr>
</tbody>
</table>

**Source: Primary Data Analysis**

Table 4.10 shows that 100% of the respondents that used computers for monitoring and evaluation for report writing. The least used function by the respondents was collection of data, only 28% of the respondents used computers for the function. It is evident that majority of the respondents used computers.

Computers for monitoring and evaluation of their projects. Computers can be of immense value in the monitoring and evaluation process. Computes make the task of managing monitoring and evaluation data and information more effective and efficient.
Table 4.11 shows the response to questions related to how evaluation of projects was carried out on the projects implemented by the respondents.

<table>
<thead>
<tr>
<th>Practice</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mid-term evaluations</td>
<td>3</td>
<td>42%</td>
</tr>
<tr>
<td>Summation evaluations</td>
<td>6</td>
<td>85%</td>
</tr>
<tr>
<td>External facilitator</td>
<td>3</td>
<td>42%</td>
</tr>
<tr>
<td>Documentation of lesson learnt</td>
<td>4</td>
<td>57%</td>
</tr>
</tbody>
</table>

Source: Primary Data Analysis

Midterm Evaluation

Question 3.7(a) sought to determine whether respondents carried out midterm evaluation of the projects they implemented. A percentage of 42% indicates that the practice was not done by all the respondents. Midterm evaluations enable the project manager to assess the performance of the projects’ mid-stream before its completion. It may seek to determine whether the project will achieve its objectives and therefore projects were not assessed mid-way before completion to enable the project managers to determine issues as continued relevance, probability of achieving project objectives.

Summation Evaluations

Questions 3.7(b) sought to determine whether the respondent carried out summation evaluations. This had 85% implying that this type of evaluation was done by most of NGOs on the projects they implemented. This helps to assess how the project progressed, what went right and what went wrong capture any lesson learnt and also determine the impact of and succession achieving the objectives of the project. The respondents consistently carried out these evaluations on the
projects giving than an opportunity to capture any lessons learnt to benefit future projects.

**External Facilitators**

This showed a percentage of 42% and reflects that this is not done by most of the NGOs while carrying out monitoring and evaluation on their projects. The involvement of external facilitators would benefit the project as it introduces an objective perspective to the evaluation and hence identify issues that may not be captured by the other stakeholders.

**Documentation of Lessons Learned**

Table 4.11 shows the findings to question 3.9 (a) it sought to determine whether respondents documented lessons learnt on their projects. It scored 57% implying that the practice was done by some NGOs and 43% neglected this practice. This enables the project manager and staff to learn from the project and incorporate the same into subsequent projects.

57% of the respondents gave the following reasons among others for the documenting of lessons learnt.

i) Share experience with others.

ii) Improve future performance

iii) Learning purposes

iv) Review strength and weakness
CHAPTER 5: CONCLUSIONS AND RECOMMENDATIONS

5.0 Introduction

This chapter presents the recommendations and conclusions of the study and then makes recommendations for further study.

5.1 Recommendations of the study

The following were the research findings of this study.

The NGOs were heavily reliant on donors in terms of financing the projects they implemented, the mostly frequently implemented projects were Behavioral Change Communication projects and Care and Support of the Sick. The Human Rights and Advocacy projects are least frequently implemented projects although ensuring the basic human rights of these vulnerable groups is very critical in fight against the pandemic. The monitoring and evaluation practices of the NGOs were found wanting in comparison with the recommended best practices.

Most of the best practices were not fully practiced by all the NGOs. Some of the best practices such as use of qualitative indicators were generally not used by majority of the NGOs.

The researcher makes the following recommendations to address some of the key findings of the study.

□ Generation of own income

It is imperative that the NGOs start or involve themselves more in income generating activities in order to reduce their over reliance on the donors for funding for their activities as means of ensuring future sustainability of their activities in event that the donors cease funding.

The findings of the research also highlight the fact that there is not much involvement of PLWHA in the activities of the NGOs particularly M&E. As a means of fostering sustainability
and letting people own these projects, the PLWHA should be more involved in activities of the NGOs, particularly setting the agenda.

- **More funding to NGOs**

  Much as there are a lot of funds being invested in the fight against HIV/AIDS, very little goes down to the grass root NGOs that are at the forefront of combating HIV/AIDS. There is need for the donors to provide more resources to the NGOs, so that their activities can have impact. With insufficient funds, monitoring and evaluation is looked at as a luxury and hence the projects do not benefit from it. With more funds the NGOs can train and retain the critical skills that they are lacking especially in monitoring and evaluation.

- **Training**

  The findings found an inadequacy for individuals to carry out monitoring and evaluation of projects implemented by the NGOs. There is need for hiring and training of competent staffs in this aspect of monitoring and evaluation. Donors in conjunction with government should institute programs to impart HIV/AIDS projects monitoring and evaluation skills amongst the local NGOs. It is imperative that these NGOs have adequate and skilled individuals capable of monitoring and evaluating them.

- **Need for a more participatory approach**

  There is need for the NGOs to involve all the stakeholders in the design of the HIV/AIDS projects. The beneficiaries should not be passive recipients of the services the project is offering. An active involvement of the beneficiaries such as PLWHA will mitigate the challenges of collecting monitoring and evaluation data from them. It has got an added advantage of demonstrating accountability to them and also ensuring sustainability of the project when the donors withdraw funding.
5.2 Recommendations for future Studies

The research study was limited to comparing the monitoring and evaluation practices of local NGOs with the best practices in order to determine how effectively the HIV/AIDS projects were monitored and evaluated.

Further research would be required to determine empirically the actual impact on the performance of the projects and hence the fight against HIV/AIDS by the inadequacies identified in the monitoring and evaluation practices of the NGOs.

Since monitoring, controlling projects and evaluating them should be integrated with project planning and design. Further research should try investigating the project design and planning practices of the NGOs.

5.3 Conclusions

The study investigated the monitoring and evaluation practices and challenges faced by the NGOs implementing HIV/AIDS projects in Nakaseke and Luwero District. The study findings showed that the projects implemented by the NGO were not effectively monitored and evaluated.

The study also unearthed the lack of funding faced by the NGOs in this area of HIV/AIDS. This was mainly as a result of lack of expertise in this area.

Recommendations were made in order to improve the monitoring and evaluation of projects implemented by the NGOs.
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Appendix 1

QUESTIONNAIRE

As assessment of monitoring and evaluation practices of local NGOs implementing HIV/AIDS projects in Luwero and Nakaseke district.

1.0 Activities and Resources

1.1 What is the coverage of your services?

☐ District
☐ Sub-county
☐ County
☐ Parish
☐ Village

1.2 Is your organization founded or associated to any religious body?

Yes ☐ No ☐

1.3 If the answer to 1.2 is yes please state the religious body?

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1.4 Is your organization registered with the relevant authorities

Yes ☐ No ☐

1.5 If the answer to the above is Yes, with which authority and when

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1.6 Which type of HIV/AIDS projects does your organization implement?
- Behavioral communication change projects
- Care and support for the sick
- Social-economic mitigation (care of orphans and widows)
- Human Rights and advocacy

1.7 For how long (in years) has your organization been carrying out these projects?
- 0-3
- 4-6
- 7-9
- Over 9

1.8 What was the total budget in shillings that you spent on HIV/AIDS projects in 2011/2012?
- Less than 5,000,000
- 5,000,000-14,999,999
- 15,000,000-24,999,000
- 25,000,000-34,999,999
- 35,000,000 and above

1.9 The organization that fund your HIV/AIDS projects include the following:
- International Donor agencies (e.g. UNDP, Global fund, USAID etc)
- Government bodies (e.g. Parliament, UAC etc)
- Corporate companies
- Private individuals

Please mention any other source if not included

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(If you do not receive any donor funding go to section 2, otherwise continue with question 1.10)
1.9 What was the contribution in percentage of donors to the total budget you spent on HIV/AIDS projects in 2011/2012?

- 0% - 25%
- 26% - 50%
- 16% - 100%
- 51-75%

1.10 Which of the following equipment / asset do you own for implementing your projects?

- Computers
- Agricultural land
- Cars
- Motorcycles
- Video equipment
- HIV testing equipment
- Public Address System

Please mention any other assets / equipment if not included

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1.11 What is the total number of staff that your organization has?

<table>
<thead>
<tr>
<th>Permanent staff</th>
<th>Less than 7</th>
<th>7-12</th>
<th>13-18</th>
<th>Over 18</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
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</tbody>
</table>

Volunteer staff

2. Monitoring and evaluation plan

2.9 Before embarking on HIV/AIDS project do you normally conduct a study to establish baseline data or condition of the community?

Yes □  No □

2.10 Do you normally have a plan that guides monitoring and evaluation when implementing the HIV/AIDS projects that you carry out?

Yes □  No □

2.11 If your response above is never what is the reason that prompts you not to have the plan?

Projects are too small □

We do not know how to design one □

Please mention any other reason if not included

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2.12 Which of the following stakeholders are involved in planning the monitoring and evaluation of the projects?

Donors □

Project implementation staff □

Community □

Project beneficiaries e.g. orphans □
We do not involve any stakeholders
2.13 Which of the aspects are normally specified in the plan that guides monitoring and evaluation (M&E)
Data to be collected
Frequency of data collection
An individual in charge of M & E
Schedule of M & E activities
Plan for dissemination of findings
Individual for specific M & E authorities

2.14 Monitoring and Evaluation activities have
A separate budget with a special vote
No special vote arrangement

2.15 Monitoring and evaluation are normally allocated a percentage of the total project budget.
   This is in the region of:
Less than 5%       
6-9%               
10%                
More than 10%     
No specific %    

2.16 a)We normally use the logical framework approach (log frame) in aiding the monitoring and evaluation of projects we carry out
For all projects           For some projects
Very few projects           Never
b) If you do not use the log frame please mention any other framework you use


2.17 Monitoring and evaluation activities are part of the project schedule

<p>| | |</p>
<table>
<thead>
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<th></th>
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</thead>
<tbody>
<tr>
<td>For all projects</td>
<td></td>
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<tr>
<td>For some projects</td>
<td></td>
</tr>
<tr>
<td>For a few projects</td>
<td></td>
</tr>
<tr>
<td>Never</td>
<td></td>
</tr>
</tbody>
</table>

2.18 How do you disseminate monitoring and evaluation findings?
(Please tick more than one if you have more than one way of dissemination)

<table>
<thead>
<tr>
<th>Dissemination Method</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>No dissemination</td>
<td></td>
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<tr>
<td>Report to donor</td>
<td></td>
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<tr>
<td>On the notice board</td>
<td></td>
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<tr>
<td>Newsletter</td>
<td></td>
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<tr>
<td>Report to field staff</td>
<td></td>
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<tr>
<td>Community meeting</td>
<td></td>
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<tr>
<td>Report to beneficiaries</td>
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</tbody>
</table>

3 Project monitoring and evaluation process implementation

3.9 How often are the project finances monitored? (i.e. comparing the planned budget expenditure against actual expenditure)

<table>
<thead>
<tr>
<th>Frequency</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Every month</td>
<td></td>
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<tr>
<td>Every 3 months</td>
<td></td>
</tr>
<tr>
<td>Every 6 Months</td>
<td></td>
</tr>
<tr>
<td>Every 12 months</td>
<td></td>
</tr>
<tr>
<td>Never</td>
<td></td>
</tr>
</tbody>
</table>
3.10 How often do you compare planned project activities schedule in order to determine project schedule performance

- Every week
- Every 1 month
- Every 3 months
- Project end

3.11 How often do you compare planned project activities schedule against actual schedule in order to determine project schedule performance?

- Every week
- Every 1 month
- Every 3 months
- Project end

3.12 We normally monitor the use of organization equipment employed on the project

- For all projects
- For some projects
- For a few projects
- Never

3.13 The following methods are used in collecting monitoring and evaluation data

- Attendance forms
- Questionnaires
- Participant observation
- In-depth interviews
- Material distribution registers
- Focus group interviews
Please mention any other data collecting methods you use that is not mentioned

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3.14 We use computers for monitoring and evaluation activities in the following ways

We do not use computers in M&E

Report writing

Analysis of data

Storage of monitoring and evaluation data

Communication of findings through email

Collection data

Please mention any other uses if not included

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3.15 Which type of evaluation do you normally carry out on the projects you implement?

Mid-term (interim) evaluations

Summation evaluation (End of projects)

3.16 While carrying out evaluation of your projects, do you involve an external facilitator

Yes  □  No  □

3.17 a) Do you document lessons learned on the project implementation?

Yes  □  No  □

b) If you document the lessons learned on the project briefly explain why
c) How often is this done?

- 3 Months
- 6 Months
- over 12
- End of project

4. The monitoring and evaluation environment of HIV/AIDS projects

4.9 The finances to carry out monitoring and evaluation activities are:

- Always adequate
- Adequate
- Rarely adequate
- Never adequate

4.10 Different donors have different reporting equipments

- Strongly agree
- Agree
- Disagree
- Strongly disagree

4.11 Monitoring and evaluation reporting requirements from donors are

- Very strict
- Strict
- Lenient
- Very lenient

4.12 Demonstrating the long – term of the projects to donors is

- Very straight forward
- Straight forward
- 104
Rarely straight forward never straight forward

4.13 Collecting monitoring and evaluation data from people affected by HIV/AIDS is not easy due to stigma attached to the disease

Strongly agree □ Agree □ Disagree □ Strongly disagree □

4.14 This organization has the necessary monitoring and evaluation exercise?

Strongly agree □ Agree □ Disagree □ Strongly disagree □

4.15 Please mention any other monitoring and evaluation issues that may not have been covered above

Issue 1 .............................................

Issue 2 .............................................

Issue 3 .............................................

Issue 4 .............................................

Thank you for your cooperation.