# PARTICIPATORY MONITORING AND EVALUATION AND PROJECT PERFORMANCE: A CASE OF AMAKA PROJECT OF INFECTIOUS DISEASE INSTITUTE

**BY**

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## DECLARATION

I, **Elijah Kayemba**, do declare that this is my original work and has never been published or presented, partially or wholly, in any other Institute or University for any award. This dissertation is a result of my own research and where other people's work was used, they have been duly acknowledged.

Date…… Signature.....

## APPROVAL

We certify that **ELIJAH KAYEMBA** developed this dissertation under our supervision. This dissertation has been submitted for examination with our approval as the supervisors.

Signature:……....  Date:.....

DR. MARY.B. MUHENDA

Signature:……....  Date:.....

Ms. MAUDE N.C. MUGISHA

## DEDICATION

To my late mother, Ms. Joyce Nakku Sempala Kyakonye, who tirelessly did all she could within her limited means to further my education.

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## ABBREVIATIONS

| | |
|---|---|
| AIDS | Acquired immunodeficiency Syndrome |
| AMAKA | Adult Male Circumcision in Kampala Project |
| CDC | Centers for Disease Control and Prevention |
| E-AMAKA | Expanded Adult Male Medical Circumcision in Kampala Project |
| HIV | Human Immune Virus |
| IHK | International Hospital Kampala |
| IDI | Infectious Disease Institute |
| KCCA | Kampala Capital City Authority |
| NGO | Non-Governmental Organization |
| MMC | Medical Male Circumcision |
| M&E | Monitoring and Evaluation |
| MOH | Ministry of Health |
| PEPFAR | President's Emergency Plan for AIDS Relief |
| PMT | Project Management Team |
| SMC | Safe Medical Circumcision |
| STI | Sexually Transmitted Infections |
| STD | Sexually Transmitted Diseases |
| UNAIDS | United Nations Programme on HIV/AIDS |
| WHO | World Health Organization |
| VCT | Voluntary Counseling and Testing |

## ABSTRACT

The study explored the relationship between participatory monitoring and evaluation and project performance in community development projects in Uganda with specific reference to Adult Male Medical circumcision in Kampala project (AMAKA). The specific objectives of the study were to establish the relationship between community involvement in participatory monitoring and evaluation; to investigate the relationship between community empowerment in participatory monitoring and evaluation and to find out the relationship between resource use and accountability in participatory monitoring and evaluation, all with project performance at AMAKA project. A descriptive survey research design was used supported with both qualitative and quantitative approaches. A sample size of 336 respondents was used. Triangulation of data collection methods and tools were embedded in the study. The study found a positive correlation between participatory monitoring and evaluation; similarly, community involvement in participatory monitoring and evaluation was significant in enhancing project performance; in addition, community empowerment in participatory monitoring and evaluation was a relevant ingredient for project performance. Further still, study results confirmed that resource use and accountability in participatory monitoring and evaluation provide fertile ground for projects to achieve project performance. This study recommends that AMAKA project puts in place a mechanism of integrating community indicators within project level indicators and strengthen information feedback process between community beneficiaries and the project. It further recommends development of a capacity building strategy for PM&E where learning and ownership is encouraged so that project deliverables are accomplished within project scope of time, generate stakeholder satisfaction and contribute to project relevance. The study proposes that a similar study be undertaken in a larger section of multiple community led projects to produce new or added findings on how participatory monitoring and evaluation contributes to project performance.

# CHAPTER ONE

# INTRODUCTION

## 1.1 Introduction

This study set out to explore the relationship between participatory monitoring and evaluation and project performance. In this case, participatory monitoring and evaluation was the independent variable while project performance was the dependent variable. This chapter presents the background to the study, the statement of the problem, the purpose of the study, the objectives of the study, the research questions, the research hypotheses, the scope of the study, the justification of the study, the conceptual framework and the operational definitions of terms and concepts.

## 1.2 Background to the study

Community driven development (CDD) is an approach that emphasizes community control over planning decisions and investment resources. Over the past decade, it has become a key operational strategy for many national governments- as well as numerous- international aid agencies for the delivery of services. The World Bank currently supports approximately 400 CDD projects in 94 countries valued at almost $ 30 billion. Over the past 10 years, CDD investment has represented between 5 to 10 percent of the overall World Bank lending portfolio (Wong, 2012). Further to note is that the limited success and sustainability of many conventional development initiatives is attributed to failure to involve people in the design and implementation of projects and programmes (FAO, 1990), and yet participation in rural development projects is beneficial in ensuring the sustainability of activities as the beneficiaries assume ownership (Clayton, Oakley & Pratt, 1998).

There is wide divergence of opinions in the understanding of the term project performance. Neither the practitioners nor the academicians seem to agree on what constitutes project performance. Project performance is defined as a degree of achievement of a certain effort or

undertaking which relates to the prescribed goals or objectives that form the project parameters (Chitkara, 2005). There are many elements that determine project performance. The definition of project performance in this study is based on Baccarini (1999) distinction of project success dwelling much on the project management success. This distinct component focuses on the project process and in particular the successful accomplishment of cost, time and quality objectives. It also considers the manner in which the project management process was conducted. According to UNDP (2002), project performance is defined as the achievement of targeted project results. On the other hand Bryde (2003), defines project performance as meeting costs and time objectives while adhering to product specifications.

Over the last years there is a growing demand or interest for more focus on the outcomes and impact of development investments. This has also led to clamoring of forms of monitoring and evaluation that better support management and engages stakeholders in participatory learning processes. Therefore a new approach to monitoring and evaluation is needed that is an integral part of project management, in which stakeholders participate and learning takes place, to create real impact. This new desire for new forms of monitoring and evaluation has resulted into participatory monitoring and evaluation gaining increased prominence over more conventional approaches to monitoring and evaluation in the recent past. Much of the monitoring and evaluation in the past has been judgmental with outsiders determining the state of a project and proposing recommendations from an outsider perspective. Project stakeholders are most often the objects of monitoring or evaluation rather than the key actors of the monitoring and evaluation processes.

### 1.2.1 Historical Background

Monitoring and evaluation is relatively a new concept in the field of participatory appraisal and development. The term "monitoring" was begun by human beings after they learned rearing animals for milk and meat production. In other words, people learnt about monitoring as they

started learning the concept of management for survival. But the formal evaluation system emerged in the UN system in the early 1950s. Consultants began to use monitoring and evaluation differently according to their needs. However, evaluation was undertaken with narrow concept and scope. The concept of monitoring and evaluation was largely focused on the delivery of physical inputs and the expected outputs rather than with the true nature of impact on beneficiaries.

The very first attempts at participatory monitoring and evaluation can be traced back to the 1920s when it was first propagated in education for testing the achievement of learners in schools. Later on, programme evaluation, as an important component in professional practice, emerged as a result of a felt need to assess large-scale developmental programmes and government interventions in the 1960s. This was further used to gauge its success and to ascertain whether to provide further funding or not (Hohenheim, 2002).

Participatory monitoring and evaluation is part of a wider historical process which has emerged over the last twenty years of using participatory research in development. Participatory monitoring and evaluation draws from various participatory research traditions including participatory action research (PAR) spearheaded by the work of Paolo Freire (1972), Fals-Borda (1985) and others; participatory learning and action including rapid rural appraisal (RRA) and later participatory rural appraisal (PRA) drawing on the work of Chambers (1997).

In recent years, the practice rapidly changed with growing understanding among development professionals and the rural people that monitoring and evaluation is an effective tool for objective oriented management projects and programmes in rural development aimed at the poor, women and disadvantaged people. The growth aspects of economic development model had failed to benefit the poor people who live below the poverty line. To ensure that the benefits of development would reach the poor, women and socially disadvantaged groups, hence there was a clear need to reorient development partners to go beyond growth criteria and focus on

socio-economic objectives. Internationally, donors, governments and NGOs were insisting upon participatory approaches in assessing needs and implementing programmes (Estrella & Gaventa, 1998). With increased emphasis on the importance of participation in development, there was also a growing recognition that monitoring and evaluation of development and other community-based initiatives should be participatory.

Numerous authors have researched the subject on project performance but the concept of project performance still remains ambiguously defined. Project success is probably the most frequently discussed topic in the field of project management, yet it is the least agreed upon even though for more than two decades researchers have labored to identify managerial variables critical to success (Shenar, et al., 2002 who cite Pinto & Slevin, 1998). Since the 1950s, a great deal of work on project success has been contributed to the project management theory. Ideas and methods have developed from having a narrow focus on simple measurement of time and cost to multi-dimensional frameworks, focusing not only on the impact on the present but also on the future (Atkinson, 1999). According to Baccarini (1999), the importance of defining and measuring project success was identified earlier in 1986 by the Project Management Institute (PMI). It is in that year that they devoted their annual seminar and symposium to this topic.

From a regional perspective, Uganda was one of the first countries in Sub Saharan Africa to both be ravaged by the horrible impact of HIV and AIDS and to take action on their own to control the spread of the epidemic. Earlier HIV and AIDS prevention initiatives in Uganda, aimed at halting the transmission of HIV, primarily focused on preventing sexual transmission of the disease through behavior change. For a number of years, the ABC approach- Abstinence, Be faithful and Use a condom was used in responses to the growing epidemic in Sub Saharan Africa. Later included another government endorsed initiative called zero grazing. Zero grazing was a nod to the Ugandan tribal culture of polygamous and extra marital relationships. The

initiative, primary directed at men, asked them to try to stick to one partner, but also allowed them to keep their additional wives and mistresses, stressing the importance of not casually engaging in additional sexual activity or having intercourse with prostitutes (AVERT, 2010).

From 1992 until around 2000, HIV and AIDs incidence in Uganda fell drastically from 15% in 1991 to 5% 2001(AVERT, 2012).This sharp decline has been attributed to the program put in place by both the Ugandan government and some groups coming into Uganda to combat the HIV/AIDS epidemic. However, by mid 2000s, it became evident that effective HIV prevention required more than simply ABC and that these interventions needed to take into account underlying socio-cultural, economic, political, legal and other contextual factors.

Over the last decade, there have been numerous studies concerning the link between uncircumcised males and the risk of HIV infection. These studies led to the recommendations that male circumcision be added to the list of effective strategies that should be employed in trying to prevent incidence of HIV. Consequently in 2007, World Health Organization (WHO) and the joint United Nations Programme On HIV/AIDS (UNAIDS) recommended that Medical Male Circumcision (MMC) be recognized as an additional and important strategy for the prevention of hetero sexually acquired HIV infection in men, particularly in countries with hyper endemic or generalized HIV epidemics and low male circumcision (WHO & UNAIDS report, 2007).Three randomized controlled trials undertaken in Kisumu, Kenya, Rakai District, Uganda and Orange farm, south Africa had shown that medical male circumcision reduces the risk of sexual transmission of HIV from women to men by approximately 60% (WHO Fact Sheet, 2012).

Consequently WHO and UNAIDs recommended the intervention be added in countries with high HIV prevalence, generalized heterosexual HIV epidemics and low levels of male circumcision where the intervention is likely to have the greatest public health impact. Fourteen primary countries with this profile are striving to scale up voluntary medical male circumcision

these include; Botswana, Ethiopia, Kenya, Lesotho, Malawi, Mozambique, Namibia, Rwanda, South Africa, Swaziland, Tanzania, Uganda, Zambia and Zimbabwe (WHO Fact Sheet, 2012). Recent modeling studies found that reaching 80% coverage among men 15-49 years old in the priority countries by performing approximately 20 million circumcisions would cost US$ 1.5 billion and would result in net savings of US$ 16.5 billion by 2025 due to averted treatment and care costs. Achieving and maintaining 80% coverage through 2025 and averting 3.4 million new HIV infections (WHO Fact Sheet, 2012).

According to WHO and UNAIDS report of 2009, in support of monitoring and evaluation (M&E) ,WHO and UNAIDS, in collaboration with Presidential Emergency Plan For Aids Relief (PEPFAR) developed a guide to indicators for male circumcision programmes in the formal health care system in 2009 suggesting indicators that should be used by countries. These included; number of male circumcisions performed for HIV prevention and number of percentage of persons seeking male circumcision services who were tested for HIV.

Consequently the Uganda Government through the Ministry of Health launched the Safe Male Circumcision Policy towards January 2010.This was a whole four years since research had found out that medically performed male circumcision reduces the risk of HIV infection in men by an average 60 percent (Hasunira et.al; 2012). It is also argued that the policy did not come with the much needed urgency in implementation. It is also true that the roll out of Safe Male Circumcision (SMC) has so far been driven by PEPFAR and not the Ministry of Health and Government of Uganda as it should be.

### 1.2.2 Theoretical Background

This study was guided by the Stakeholder Theory which conceptualizes relationships between a project and its stakeholders (Scheider, 2012; Mainardes et al., 2011). This theory was advanced by Edward Freeman in his 1984 works. It defines stakeholders as groups who are

critical to the survival and success of an organization. According to Freeman (1984), the theory postulates that an organization will maintain relationships with several groups that affect or are affected by its decisions. Freeman, (1984); Hills & Jones, (1995) as cited by Galbreath, 2006; Mainardes et al., (2011) postulate that basing on this theory; projects are comprised of interdependent relationships which have to be managed strategically in order to meet the project objectives.

The theory was selected because it attempts to explain the relationships of the different stakeholders such as community beneficiaries, project staff and Government and the performance of the AMAKA project. According to Fontain, Haarman & Schid (2006), the theory emerged from the need for organizations to adopt new managerial approaches to maximize profits and benefits. They further argue that non-governmental organizations, projects today have adopted and practiced some aspects of the stakeholder theory to guide their project management functions. It can be rightly argued that participatory monitoring and evaluation entails stakeholder involvement and in this research, the investigator used this theory to explain how participatory monitoring and evaluation contributes to project performance.

### 1.2.3 Conceptual Background

Participatory monitoring and evaluation differs from more conventional approaches to monitoring and evaluation in the sense that it seeks to engage key project stakeholders more actively in reflecting and assessing the progress and in particular the achievement of results (Coupal,2001). Similarly, Campilan et al., (2001) observes that more recently PM&E has emerged as an approach that seeks to involve those that contribute to or are affected by the project (e.g. local communities, collaborating organizations, program field staff) from planning monitoring and evaluation to using its results for learning and change. Supporting this assertion, De Beer & Swanepoel (1998) add that participatory evaluation has its origins in

action research, which used formal organizational settings. They further contend that, social scientists were brought in to do on-the-job research with the help of the members of that organization.

Project success is a vague concept in project management mainly because different stakeholders involved in the project have different needs, expectations and therefore interpret success differently. According to Bacccarini (1999), project success consists of two separate components namely project management success and project product success. Traditionally project management success focuses on the software development process dimensions of 'within time', 'within budget' and according to 'requirements' (quality and functional specifications) of a project. The three dimensions of time, budget and specifications feature in many definitions of project management success (Thomsett, 2003). However, time, budget and specifications are not sufficient to measure project management success as dimensions such as the quality of the project management process and the satisfaction of the project stakeholders' expectations also need to be considered (Bacccarini, 1999). Therefore, extending the traditional triangle to include the quality of the management process and stakeholders satisfaction provides a more complete view of project management success and it is critical to this study.

In this study the assumption is that community involvement, community empowerment and resource use and accountability influences the outcomes of participatory monitoring and evaluation process. The shared vision that is enhanced helps to align interests of major actors in the program thereby facilitating the implementation of a robust participatory monitoring and evaluation framework thereby creating a fertile ground for improved performance in an organization. More so the process is reflective and action oriented, it provides stakeholders, including beneficiaries, with the opportunity to reflect on project progress and generate knowledge results in being able to apply the lessons learned.

### 1.2.4 Contextual Background

The Infectious Disease Institute of Makerere University in Uganda launched the Adult Male Medical Circumcision in Kampala (AMAKA) programme in April 2011 at two static sites in Kampala; one public facility (KCCA's Kisenyi Health Centre) and one private hospital International Hospital Kampala through a public private-partnership. In April 2011, it received PEPFAR funding of USD 300,000 through Centres for Disease Control (CDC).With this funding a new project called Adult Male Circumcision in Kampala (AMAKA) was conceived and started its operations in June 2011. The specific project SMC package included education about SMC and the ABC package. Voluntary counseling and testing (VCT), screening and management of STIs, circumcision surgery, post-operative wound care and management of any adverse effects of circumcision (IDI, 2012).

AMAKA initiative had a goal of contributing to reduction of HIV incidence in Kampala District and this was in line with Goal 1 of the National HIV/AIDS strategic plan 2007/2008-2011/012 which stated that Uganda aims at reducing the incidence rate of HIV by 40% by the year 2012. In the period that ran from April 2011 to March 2012, the Infectious Diseases Institute (IDI) circumcised 11,973 men (IDI Quarterly Report, 2012). To achieve this; a static model was used at the earlier mentioned two service delivery points. The project's future intentions were to scale up across 6 districts in Midwestern Uganda from October 2012 with a target to circumcise over 70,000 men during the period of October 2012 to September 2013 (IDI, 2012).

With a competent project team in place, the project embarked on its cardinal objective of increasing the number of circumcised men in Kampala and also carried out monitoring and evaluation activities to inform the different stakeholders on the progress of the project. However some fundamental bottlenecks have been registered which have made a hitherto performing project to look like it is not achieving its objectives.

### 1.3 Statement of problem

Available literature emphasizes that the contribution of participatory monitoring and evaluation to project performance is unquestionable (Aubel, 2004). Research on participatory monitoring and evaluation in project implementation in community development related projects revealed that it was a precursor and vital ingredient to project success and performance. In view of this assumption, AMAKA project management has relied greatly on beneficiary communities' participation in adult male circumcision, counseling and testing of HIV/AIDS to attain its goals. This is further complimented by putting in place a well functional, project team comprised of a competent monitoring and evaluation team that is involved in series of data collection and analysis to inform different stakeholders on the progress of AMAKA project (E-AMAKA Quarterly progress report Jan-March, 2015).

In spite of these efforts, AMAKA Project has manifested pockets of project failure such as delivery of some of its intended outputs within the set cost, time and relevance objectives as a result of late disbursement of project funds from the funders of the project and supply chain challenges including inadequate and late deliveries of available supplies which have been registered. Furthermore, the quarterly report indicates that there has been recruitment of new health workers; however a significant number of those who reported during that period had not been remunerated thus leading to challenges of lateness, absenteeism and poor attitude towards HIV clinic activities thus affecting the flow of activities as well as the quality of work done (E-AMAKA Quarterly progress report Jan-March, 2015).

This calls into question the extent to which participatory monitoring and evaluation actually contributes to project performance i.e. in relation to project cost, stakeholder satisfaction and project relevance. The cause of this contradiction warranted an investigation to establish the relationship between participatory monitoring and evaluation and AMAKA project performance. This study was critical to appreciate the contribution of participatory monitoring

and evaluation to project performance and highlight the relationship to avoid the project registering less and less results and later deteriorate into a non performing project.

### 1.4 Purpose of the Study

The study sought to explore the relationships between participatory monitoring and evaluation and project performance with specific reference to AMAKA project.

### 1.5 Specific objectives

The objectives of this study were:-

i. To establish the relationship between community involvement in participatory monitoring and evaluation and project performance at AMAKA project.
ii. To investigate the relationship between community empowerment in participatory monitoring and evaluation and project performance at AMAKA project
iii. To find out the relationship between resource use and accountability in participatory monitoring and evaluation and project performance at AMAKA project

### 1.6 Research questions

The study attempted to answer the following questions.

i. How does community involvement in participatory monitoring and evaluation contribute to project performance at AMAKA project?
ii. How does community empowerment in participatory monitoring and evaluation affect project performance at AMAKA project?
iii. How does resource use and accountability in participatory monitoring and evaluation affect project performance at AMAKA project?

### 1.7 Hypothesis of the study

The following hypotheses guided the study:-

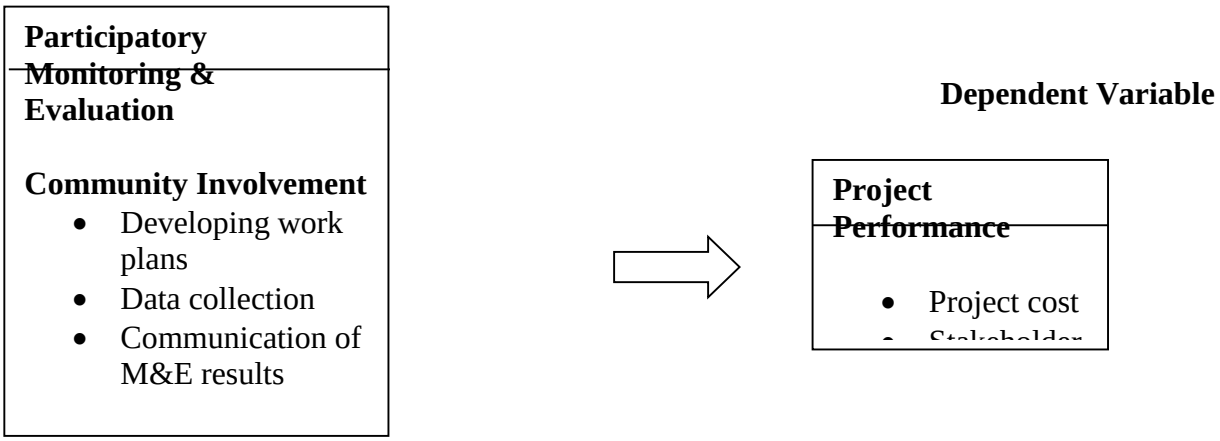
i. Community involvement in participatory monitoring and evaluation positively contributes to project performance.

ii. Community empowerment in participatory monitoring and evaluation positively affects project performance.

iii. Resource use and accountability in participatory monitoring and evaluation positively affects project performance

**1.8 Conceptual framework**

**Independent Variable**




**Source*:* Adopted from Estrella & Gaventa (1998) literature and modified by the researcher**

**Figure 1: Conceptual framework showing the relationship between participatory monitoring and evaluation and project performance**

The conceptual framework above (Figure 1) is informed by Estrella & Gaventa (1998) literature. It attempts to explain that the independent variable (participatory monitoring and evaluation) has a positive contribution on the dependent variable (project performance). Participatory monitoring and evaluation is assumed to nurture a consensus on appropriate and effective strategies for achieving project performance. Finally, Etwop (2000) opines that participation that necessitates and champions commitment, concentration and membership in

planning, implementing, collecting and analyzing data and disseminating information for decision making guarantees performance.

### 1.9 Significance of the study

This study will help policy makers, project managers, monitoring and evaluation practitioners and specialists to appreciate the contribution of participatory monitoring and evaluation to project performance especially in community based projects. It attempts to provide meaningful understandings of the extent to which participatory monitoring and evaluation should be applied as a management tool in projects. This research will help strategic managers decide if they should or should not promote participatory monitoring and evaluation as an essential managerial tool for their organization. The study will form a basis for scholarly works and its contribution together with recommended areas for further research will offer foundational basis for student research.

### 1.10 Justification of the Study

Evidence in literature on participatory monitoring and evaluation and successful execution of development projects is available (Estrella & Gaventa 1998), however most of the works only focuses on the processes and little work has been done to show how it influences project performance. The researcher was curious to ascertain whether participatory monitoring and evaluation contributed to project performance so as to make recommendations for more appreciation of the relationship. Additionally the desire to contribute to the ongoing academic on micro and macro views of project performance motivated the researcher to undertake this study of the contribution of participatory monitoring and evaluation to project performance in health related projects in Kampala District.

### 1.11 Scope of study

The study considered content scope, geographical scope and lastly time scope.

### 1.11.1 Content scope

The study focused on the contribution of participatory monitoring and evaluation to project performance with specific reference to the AMAKA project. During research, emphasis was put on the stages at which stakeholders participate in M&E and methods of stakeholder participation. Participatory monitoring and evaluation was limited to three levels at which a project operates. These stages included community level, project team level and to some extent national level.

### 1.11.2 Geographical scope

Further than the content scope, the research covered AMAKA project in Kampala's central business district with specific emphasis on KCCA- Kisenyi Health Centre circumcision site. This geographical area was selected because it is the pioneer site for the project and it was relatively cheaper to conduct research in Kampala compared with upcountry sites.

### 1.11.3 Time scope

The study focused on Adult Male Circumcision in Kampala (AMAKA) project financial year October 2013 to March 2015. This time scope was considered since it is this period's quarterly term evaluation report that highlighted the concerns of this study. Secondly the earlier implementation period April 2011-July 2012 was excluded for manageability of the study.

## 1.12 Operational definitions of key terms and concepts

**Participatory Monitoring & Evaluation:** Is a process of self-assessment, knowledge generation, and collective action in which stakeholders in a program or intervention collaboratively define the evaluation issues, collect and analyze data, and take action as a result of what they learn through this process (Jackson &Kassam, 1998).

**Project Performance**: In this study will refer to the level to which the project has achieved its relevance, attained its project cost agenda and stakeholder satisfaction levels.

**Participation:** Defined as the process through which stakeholders are involved in and influence decision making, resource allocation, implementation and control of development initiatives

**Monitoring:** This is the continuous or periodic review and surveillance by management at every level of the hierarchy of the implementation of an activity to ensure input deliveries, work schedules, targeted outputs and other required actions are proceeding according to plan.

**Evaluation:-**is a process for determining systematically and objectively the relevance, efficiency, effectiveness and impact of activities in the light of their objectives.

# CHAPTER TWO

# LITERATURE REVIEW

## 2.1 Introduction

This chapter examines existing theories, concepts and observations of past and current researchers. Literature on the concepts of participatory monitoring and evaluation and project performance, the relationship between community involvement, community empowerment, resource use and accountability and project performance is examined. Gaps in literature were also identified to justify current research.

## 2.2 Theoretical Review

This study was guided by the Stakeholders Theory by Freeman (1984). This theory was popularized by Edward Freedman in 1984 in his book titled Strategic Management: A Stakeholder Approach (Fountain et. al., 2006). According to Freeman, a stakeholder refers to a group or individual who can affect or can be affected by the achievement of an organization's objectives. Since the publication of Freeman's landmark book, hundreds of articles have been written about stakeholder theory. In one of the most influential articles, Donaldson & Preston (1995) present three interrelated approaches to the stakeholder theory which are widely used today. These include; the descriptive approach which seeks to describe the methods and ways in the stakeholder management process, the instrumental approach that considers the impact of stakeholder management in achieving project performance or the connection between practices of stakeholder management and the achievement of project objectives and the normative approach which rests upon the moral point of view or ethical principles in management (Yang et al., 2009; Fontaine et al., 2006; Ven,2005; Psequeux & Damak-Ayadi 2005; Maindares et al., 2011; Lerro, 2011; Donaldson & Preston, 1995).

Central to this research is the instrumental approach. In support of this approach Donaldson & Preston (1995), argue that enterprises will be more effective if they are responsive to their

environments. If the enterprise is in the hands of the owners and stockholders, then their goals remain central to defining the behavior of the enterprise. They may choose to take the interests of stakeholders into account, to negotiate with them, even put them on board because they conclude that it will enhance performance. According to Donaldson & Preston (1995) stakeholders are defined by their legitimate interests in an organization. This implies that claimants are groups with legitimate interests which are known and have been identified.

This study borrows from the stakeholder theory, key stakeholders that include beneficiary communities, staff of AMAKA project and Ministry of Health official. These groups of stakeholders from the theory form the dimensions of participatory monitoring and evaluation in the conceptual framework of this research. This theory informs the study on how stakeholder involvement in participatory monitoring and evaluation and the project as a whole contribute to project performance. Whereas some authors like Freeman (1999) and Kaler (2003), have criticized separation of these three aspects into distinct parts, it seems fair to argue that the taxonomy has been highly influential in shaping subsequent research into stakeholder theory, Hendry (2001) as cited by Zanden & Sandberg (2009).

### 2.3 Conceptual Review

According to UNDP (2002), project performance is defined as the achievement of targeted project results. The main objective of each project is to be successful. The field of project management is directly related with project success. For almost five decades, project evaluation was determined by meeting three criteria (time, cost, quality). Many researchers suggest that success cannot be assessed only through the three criteria, since project success is more complex. The success criteria vary from project to project since there are different types with different people.

In Prabhakar's (2008) literature review of the project success term, one can distinguish the work of Baccarini (1999) in differentiating success factors that facilitate success from success

criteria that evaluate it, and are composed of two components, i.e. 1) Project management success (time, quality, stakeholder satisfaction) and 2) Product success (meeting strategic organizational objectives-goal, satisfaction of user needs-purpose, satisfy stakeholders related to product-customers/users).On another hand Barker, Murphy & Fisher (1983) note that what is really important is whether project stakeholders are fully satisfied by its results. They contend that good schedules and correctly utilized budgets will not matter if the final project outcomes do not meet the expectations and goals. However Baccarini (1999) cautions that judgment of whether a project has successfully met the objectives of time, cost and quality is a short measure made on the completion of the project. Judgment of whether a project has been conducted in a quality manner and has successfully met the needs of the project team occurs throughout the project.

Similarly, research by Hartman & Ashrafi (1996) found that time and cost are the most important priorities during the project definition to execution phase; however client satisfaction becomes the most important priority and "project" criteria at project completion.

Participatory monitoring and evaluation is a social process that uses new ways to bring people together, it is a cultural process that helps people to understand different views and it is a political process of sharing decisions (Gujit, Arevalo & Salodores, 1998). Participatory monitoring and evaluation supports active involvement within the monitoring and evaluation process for those who have a vested interest in a program or research project. Ideally, participation happens during all phases of the evaluation, from the planning and design to preparing an action plan to improve the performance of program.

Community-driven participatory monitoring and evaluation offers new ways of promoting learning and change. These processes have emerged as important tools for enhancing the participation of local people in planning, decision making and managing their activities. Local people are involved in the design and implementation of mechanisms for observing,

systematizing, analyzing and reflecting on their project activities and goals as a basis for joint decision-making. Research findings both qualitative and quantitative agree with the above assertion as it is clear project staff of AMAKA project and some members of the Village Health Teams were involved in some planning activities although they were not directly involved in writing and dissemination of the findings.

### 2.3.1 The contribution of PM&E to project performance

One common function of participatory monitoring and evaluation is to evaluate the impact of a given programme and the changes that have occurred as a result of programme initiative (PRIA, 1995). The emphasis is on the comparison between programme objectives and actual achievement. Assessing project impact can help distinguish whether or not project interventions are in fact achieving their identified objectives, whether or not programme objectives remain relevant over time and also whether the best action strategies have been pursued. Camps & Coupal (1996) as cited by Estrella & Gaventa (1998), on the other hand argue that that one of the main functions of participatory evaluation is to provide stakeholders and programme managers with information to assess whether project objectives have been met and how resources have been used in order to help improve programme implementation and make critical decisions about project funding.

Estrella & Gaventa (1998), contend that traditionally, monitoring and evaluation have been used by donor and government agencies to hold beneficiaries and programme recipients accountable to agreed goals and performance targets. Participatory monitoring and evaluation is regarded not only as a means of holding project beneficiaries and programme recipients accountable, but also as a way for project participants and local citizens themselves to monitor and evaluate the performance of the programme/project. Furthermore it is widely argued that participatory evaluation is reflective and action oriented. It provides stakeholders with the opportunity to reflect on project progress and generate knowledge that results in being able to

apply the lessons learned. Hence it provides opportunities for groups to take corrective action and make mid-course improvement. However opponents of this argument are quick to point out that this exercise is time consuming and expensive. Consequently research findings revealed that to a great extent beneficiaries' feedback was utilized to improve performance however there was minimal evidence of project beneficiaries holding the project team accountable to performance targets.

### 2.3.2 Community involvement in PM&E and Project performance

The definition of "participation" is a matter on which there is considerable disagreement among development scholars and practitioners. The term is sometimes used to mean active participation in political decision making. For certain activist groups, participation has no meaning unless the people involved have significant control over the decisions concerning the organization to which they belong. Development economists tend to define participation by the poor in terms of the equitable sharing of the benefits of projects. Yet others view participation as an instrument to enhance the efficiency of projects or as the co-production of services. Some would regard participation as an end in itself, whereas others see it as a means to achieve other goals. These diverse perspectives truly reflect the differences in the objectives for which participation might be advocated by different groups. While the debate goes on, for purposes of this review, we defined community participation/involvement as an active process by which beneficiary/client groups influence the direction and execution of a development project with a view to enhancing their well-being in terms of income, personal growth, self-reliance or other values they cherish.

Similar research conducted by the World Bank in the field of project success demonstrated the failures of top-down approaches to development. The studies suggest that not only does the provision of public goods remain low in developing nations; most projects suffer from a lack of sustainability. A possible reason for these failures is attributed to the lack of local

participation. Since the 1980s the new development slogan has been “participatory or community-led development” and there has been a rush to jump on the participatory bandwagon. This assertion warranted to be tested in reference to the AMAKA project.

World Bank (2004), defines participatory monitoring and evaluation as the active involvement of key stakeholders in the monitoring and evaluation process in order for them to learn about and effect the process and impact of a development project. This argument is further supported by Rihter (2009) who contends that the participation of various stakeholders in the working group enables them to present their opinions and suggestions and that this process improves the accountability and responsibility of the policy.

Ownership is critical for effectively carrying out planned monitoring and evaluation and linking the information generated from monitoring and evaluation process to future programme improvements and learning. While it is important to have the systems, it is more important that people understand and appreciate why they are doing things they are doing and adopt results-oriented approaches in their general behavior and work. Emphasizing the concept of stakeholder participation and project performance, UNDP (2009) argues that inadequate stakeholder involvement in the monitoring and evaluation process is one of the most common reasons programmes and projects fail. The report further suggests that every effort should be made to encourage broad and active stakeholder engagement in the planning, monitoring and evaluation process. However little is mentioned on how the stakeholders should be engaged in the process especially putting in consideration their limited technical abilities and skills. The researcher was motivated to carry out an investigation to find out whether this was the case in AMAKA project.

The UNICEF report as cited by Kisitu (2001) further points out that there is a strong relationship between stakeholder participation and monitoring and evaluation. They argue that increasing primary stakeholder participation in a monitoring and evaluation activity contributes

to the quality of the results. Where primary stakeholders are not involved in design; the monitoring and evaluation activity could be biased missing important issues for the stakeholders. However the report was not so clear on how beneficiary participation was initiated and how the rules of participation should be determined, thus a gap worth exploring.

Adams &Garbutt (2008) further concurs that if key stakeholders valued the purpose and outcomes of the project then an important element of this (as well as an indicator) would be a value in owning the process of assessing the degree to which progress was being made towards achieving the programme objectives and input into making adjustments and changes where needed.

Family Health International (2004) as cited by Kisitu (2011), affirms that projects at all levels, whether single interventions or multiple integrated projects, should have a monitoring and evaluation work plan in place to assess the project's progress toward achieving its goals and objectives and to inform key stakeholders and program designers about monitoring and evaluation results. Such work plans guide the design of monitoring and evaluation, highlight what information remains to be collected and how best to collect it and suggest how to use the results to achieve greater effectiveness and efficiency. Comprehensive monitoring and evaluation work plans should describe the overall goals and objectives of the project, the specific monitoring and evaluation question method and designs to be used; what data will be collected and how, the required resources; who will implement the various components of the M&E plan. Involving stakeholders in this process helps ensure that the results obtained from a monitoring and evaluation effort will be used in an ongoing manner. Planning in monitoring and evaluation enables those that are involved to know what should be done and when. Without proper planning, projects may be implemented at the wrong times or in the wrong manner and result in poor outcomes. These views had to be examined to establish their validity and practicability in relation to the AMAKA project performance story.

A strong participatory monitoring and evaluation process aims to engage stakeholders in thinking as openly and creatively as possible about what they want to achieve and encourage them to organize themselves to achieve what they have agreed on, including putting in place a process to monitor and evaluate progress and use the information to improve performance (UNDP, 2009). The participation of a wider range of stakeholders in developing work plans, data collection, analysis of information, reflection and learning contributes to a better understanding of the poor people's reality and it can encourage civil society actors to engage them in policy process. For most participatory monitoring and evaluation activities, at least collecting data from primary stakeholders is considered necessary to ensure accurate, complete and fair results. Greater participation of primary stakeholders in actual collecting data can lead to efficient implementation of the project. Participation of primary stakeholders in validation of findings allows an opportunity to correct and clarify perspectives as well as provide contextual analysis from their perspective.

However, it is worth noting that despite the fact that information from participatory monitoring and evaluation is essential in supporting project performance, the authors did not delve into the connection between community involvement and how it contributes to the performance of projects and specifically community based projects. This intrigued the researcher to find out the contribution of community involvement to project performance. Research findings revealed that were as some project beneficiaries were involved in the project activities such as performing circumcision procedures and mobilizing potential circumcision candidates , the development of work plans, actual monitoring and evaluation and setting of indicators was a preserve to the technical wing of the project.

### 2.3.3 Community empowerment in PM&E and Project performance

A host of authors (Ukaga & Maser, 2004; UNDP, 2004; Vernooy et.al., 2003; World Bank, 2002) have pointed out that participatory monitoring and evaluation is an integral part of

community empowerment that allows communities themselves to set their own goals, strategies and indicators and to actively monitor and evaluate whether they are moving towards achieving them. They further contend that community involvement in monitoring and evaluation will enhance transparency and accountability in resource use. These variables were investigated further in this study in relation to their contribution to project performance.

Available literature suggests that participatory monitoring and evaluation involves the assessment of change through processes that involve many people or groups, each of whom is affecting or affected by the impacts being assessed. Negotiation leads to agreement on how progress should be measured and the findings acted upon. Kaaria (2005) in consensus with the above argument asserts that community driven participatory monitoring and evaluation systems enhance local learning, management capacity and skills in assessing the quality of service delivery. Besides tracking and monitoring decision-making, the system involves communities in research and builds their capacity to bring about significant change and facilitates in-depth learning by large numbers of people on pertinent issues. This assertion was intriguing and therefore necessitated this study to find out the importance of community empowerment in participatory monitoring and evaluation to project performance in the case of a community led development intervention.

According to Davids et al., (2005), the importance of empowerment as a building block of people-centered development is illustrated by the fact that development is not about the delivery of goods to a passive citizenry. It is about active involvement and growing in confidence and capacity of such citizenry. That empowerment is a process where you are able to stimulate others (stakeholders) and raise their morale to the extent that they are able to achieve what they are capable of. However what was not clear from this argument is how this process of stimulating stakeholders is done in community- led development initiatives thus necessitating this study.

Embedded as a major function of participatory monitoring and evaluation is the ability to create a learning process to strengthen organizational and institutional learning. In this context, self-evaluation as one approach to participatory monitoring and evaluation is undertaken for people to evaluate the very objectives of the project themselves and assess their own organizational capacities; "were objectives too limited (or overly ambitious)? Did they reflect the felt needs (or real needs) of members of the community?' (Rugh, 1992).On the other hand one of the main objectives of self-evaluation is to enhance the sustainability, replicability and effectiveness of development efforts through the strengthening of people's organizational capacities. It aims to enable people to keep track of their progress by identifying and solving problems themselves and by building on and expanding areas of activity where success is recognized (CONCERN, 1996). It is the eagerness to find how practical these arguments were, that warranted this investigation.

Ward, (1997) supports this argument by introducing us to the research findings in Zambia. In the Livingstone Food Security Project (LFSP) CARE Zambia staff established and trained community based teams known as village management committees (VMCs) to design, implement and monitor community driven development activities. In the LFSP project, local participants identified different levels of wealth and different categories for ranking wealth in each village. The information provided staff and VMCs a basis for tracking changes experienced by individual households in each wealth or well-being category over time, hence capacity building and institutional learning did not only take place at the project level among field staff, but also at the community level. These views formed a subject of interest to the researcher and therefore necessitated this research to find out whether this was practical with the AMAKA project. Following the study, the researcher found out that AMAKA relied on information from Village Health Teams to track changes and progress of the project.

Parachini & Mott (1997), as cited by Estrella & Gaventa (1998), postulates that participatory monitoring and evaluation may also be used as a process which allows different stakeholders to articulate and present their needs, interests and expectations. This process can be shaped in ways that enable people to understand "The views and values they share and work through their differences with others, develop longer term strategies, take carefully researched and planned actions which fits their contexts. On the other hand, Mozammel & Schechter (2005), as well as Kaaria (2005), contend that participatory community–based planning monitoring and evaluation is critical for the community to collectively understand, learn from and reflect upon the design, management and implementation activities related to the local development plan. However, Guijt (1999) cautions that participatory monitoring and evaluation is not just a matter of using participatory techniques within a conventional monitoring and evaluation setting. It is about radically rethinking who undertakes and carries out the process, and who learns or benefits from the findings. Findings from the field were in consensus with Gujit's assertion as it was reported that beneficiaries were not involved in technical aspects of the project such as setting of project objectives and performance but instead were more involved in simple tasks like encouraging and mobilizing other fellow men for circumcision procedure.

In contrast, participatory monitoring and evaluation seeks to involve all key stakeholders in the process of developing a framework for measuring results and reflecting on the projects achievements and proposing solutions based on local realities. Coupal (2001), contends that stakeholders are involved in defining what will be evaluated, who will be involved, when it will take place, the participatory methods of collecting information and analysis to be used and how findings are consolidated. He further asserts that participatory monitoring and evaluation offers development organizations a host of opportunities for improving performance and building the management capacity of local partners.

Estrella &Gaventa (1998), on the other hand through the principle of negotiation, argues that when multiple stakeholders are involved in the monitoring and evaluation process, negotiation is perceived as contributing towards the building of trust and changing perceptions, behaviors and attitudes among stakeholders, which affect the way they contribute to the project. This study set out to probe how participation in different aspects of participatory monitoring and evaluation considerably empowered attainment of project performance.

### 2.3.4 Resource use and accountability in PM&E and Project performance

Traditionally, projects rely on the goodwill and generosity of others to cover the costs of their activities through grants and donations. Similarly monitoring and evaluation have been used by donor and government agencies to hold beneficiaries and program recipients accountable to agreed goals and performance targets (Estrella & Gaventa, 1998). Increasingly, as a more decisive base of participants learn the skills of evaluation and monitoring, conventional approaches to monitoring and evaluation are being challenged. Participatory monitoring and evaluation is regarded not only as a means of holding the project team accountable but also as a vehicle of prudent resource use and allocation. The validity of this assertion, in AMAKA's case, had to be investigated.

Ngeri (2002), calls attention to the fact that very little can be done to operationalise an NGO/Project without resources, particularly financial, human and other resources. Similarly, Viravaidya & Hayssen (2001) and Hudock (1999) observe that uncertainty of funds makes it difficult for Non-Governmental Organizations to do long term planning, improve their service or reach their full potential. The difficulty of NGOs to plan for the long term, improve their service delivery and reach their full potential is a result of the stiff competition from traditional resources as the number of civil society organizations seeking financial support has soared (Edes, 2004). Sharp, Register & Grimes (2003) on the other hand suggest that the greater the availability of resources, the greater the opportunity of an organization to produce and grow.

However little is mentioned about the utilization and apportioning of the meager resources that might be available to the project hence forming a research gap in this study which had to be investigated.

In trying to understand the concept of resource use and accountability more, Hilhorst & Guijt, (2006) postulates that a participatory monitoring and evaluation process may facilitate local resources mobilization, this argument is further supported by Woodwill (2006) who contends that accountability, including impact evaluation entails demonstrating to donors, beneficiaries and implementing partners that expenditure, actions and results are as agreed or are as reasonably be expected in a given situation. This argument is central to the research to be undertaken as it attempts to explain why certain projects are successful and why others fail to meet the stakeholders' objectives. Research findings from the field supported this argument as issues of accountability were treated with utmost urgency and priority. Both quantitative and qualitative findings supported the above argument as periodic accountabilities are prepared and shared with the funders of the project. The accountabilities form the next course of action.

### 2.4 Summary of Literature review

The social, cultural and political processes that are presented within participatory monitoring and evaluation all play a major role in its definition. Participatory monitoring and evaluation has a way of bringing people together to help them understand one another and share in decision making. It deviates from more traditional approaches in that its focus is centered on the project stakeholders and their input, instead of an agency that was sent out to do the evaluation. Stakeholders are able to negotiate to reach a consensus about what to do with the evaluation findings, how to solve problems and how to improve program's effectiveness.

Though there has been growth in the use of participatory monitoring and evaluation approaches in a variety of settings and contexts, the available literature is however over generalized and there has been limited work that has been studied or documented the relationship between

participatory monitoring and evaluation and project performance especially in new health related initiatives in developing countries where the beneficiary communities are believed to be lacking sufficient technical ability to track the project progress. This research was, therefore, relevant and necessary to make a contribution to these knowledge gaps. Further still the knowledge gaps in the literature give rise to the findings in chapter four and recommendations in chapter five.

# CHAPTER THREE

# METHODOLOGY

## 3.1 Introduction

This chapter discusses the methods and procedures that were followed to achieve the study objectives. It outlines the research design, the study area and location, the study populations and sample design. It also describes the instruments used and the methods of data collection and analysis used to make meaningful interpretation of the study results. Measures that were taken to enhance reliability and validity are also discussed.

## 3.2 Research design

The study used a descriptive survey research design as supported by (Glass & Hopkins, 1984) employing both qualitative and quantitative approaches. The justification for the choice was that this study sought to do an in-depth investigation on only the AMAKA project in limited time period. The research design was further chosen because it provides an in-depth study approach in investigating a specific research problem. During research, a qualitative approach was used to seek research participants' perceptions of how participatory monitoring and evaluation resulted into AMAKA's success. On the other hand quantitative approach was utilized in the study to help establish the actual level (extent) to which the respondent's participation was essential to AMAKA's success through quantification. Both of these approaches were used corroboratively and were, thus, very appropriate for this study.

## 3.3 Study population

The study targeted 8 project core staff including Head of Outreach Department, Project Manager, M&E specialist, Data Manager, Project Administrator, Logistics officer, Regional project coordinator and mobilization officer and 1 Ministry of Health official. These were believed to be sufficiently informed about the issues considered in the study as well as being accessible. Furthermore 16 other project staff were also covered as they are involved in the day

to day activities and implementation of the project. A population of 311 beneficiaries was also covered. All study population members engaged in the study were active participants in AMAKA project activities and, therefore, provided reliable data on the study variables.

### 3.4 Sample size determination and Selection criteria

A sample size of 336 respondents was used in this study. The research employed the (Krejcie & Morgan 1970) table to arrive at sample sizes of the different categories of respondents from the accessible population. See table 3 below. The researcher employed both random and non-random sampling techniques to select the elements. The researcher selected a sample size of 336 respondents following guidelines by Krejcie & Morgan (1970) Table.

**Table 1: Sample Size for the study**

| Category of Respondents | Target Population | Sample Size | Sampling Technique |
|---|---|---|---|
| Ministry of Health Officials | 4 | 1 | Purposive sampling |
| Project Core Team (Head of Department, Project Manager, M&E Specialist, Data Manager, Administrator, Logistics officer, Regional Project Coordinator and Mobilization Officer | 12 | 8 | Purposive sampling |
| Other Project Staff (Site team leader, Data entrants, Counselors, Nurses, SMC Surgeons, Mobilisers. | 16 | 16 | Full coverage |
| Beneficiaries/ Other stakeholders | 7,843 | 311 | Consecutive sampling |
| Total | **7875** | **336** | |

**Source: Based on Krejcie &Morgan (1970) Table**

### 3.5 Sampling techniques and procedure

Non-probability techniques were used for sampling the elements in the different categories of the population that was targeted for this study. Head of Outreach department at IDI, Ministry of Health official and some staff on the project team were selected purposively in consideration of their expert knowledge on issues under investigation as recommended by Mugenda & Mugenda (2003) and Amin (2005) as they are highly involved in implementing AMAKA activities. Their vital information helped to enrich the study.

The other project staff category had 16 respondents and were all selected. This was the case because the population was small and respondents' views were expected to be similar.

The 311 respondents were selected using consecutive sampling as respondents were consecutively picked after undergoing circumcision procedure. This type of sampling was appropriate considering the time frame, population and cost implications.

**3.6 Data collection methods**

This investigative study relied on varied methods for collection of data from both the primary and secondary sources. Data from primary sources was gathered using 327 questionnaires and nine (9) key informants' in-depth interviews. Semi structured questionnaires; both self and researcher administered were used. These tools were useful as they eased generation of quantifiable data from many study subjects quickly. In depth interviews were done with key informants who included 1 Ministry of Health official (National Coordinator of Circumcision), 8 project core staff. Through these interviews, the researcher was able to collect vital information on the study variables from knowledgeable people. Unstructured observation was continuously done, throughout the study to corroborate the qualitative and quantitative findings.

On the other hand, data from secondary sources was collected through review of relevant documents such as the AMAKA's proposal to the funders, periodic reports, meeting minutes, audits, journals, reference books and other relevant scholarly material posted on the World Wide Web. This method enabled the researcher collect valid information from sources that were easily accessible for reference.

**3.7 Data collection instruments**

In this study, multiple research instruments were employed. Data collection tools used in the study included a multi variable semi structured questionnaires (see Appendix 2) of this report). This instrument enabled the researcher to obtain rich data as it permitted respondents freedom

to express their opinions about the issues under investigation. The instrument was administered to AMAKA project staff and project beneficiaries. The questionnaires divided into two one for the project staff and one for the beneficiaries. Some of the questions were directed to particularly project staff as they were specific and technical to the project while the beneficiaries were asked to respond to the less technical questions. The researcher also administered interview guides (see Appendix 3) this guide enabled the researcher unearth critical and useful information in an organized and systematic way from key informants referred to here as the project core staff and Ministry of Health official. Furthermore the researcher employed the document analysis checklist to review AMAKA existing write ups, reports, minutes of the meeting, period reports, baseline reports, quarterly and annual reports plus evaluation reports. The information obtained using this tool was useful in corroborating the primary data.

**3.8 Quality of data**

To test data quality, validity and reliability were used. Content validity of the quantitative research tools was ensured through expert judgment. The questionnaire was presented to 5 experts, that is, one of my supervisors, two independent assessors and two AMAKA project staff to identify valid items, check the tool for correct language, clarity and relevance. Modifications were made on the basis of expert opinion. A content validity index (CVI) was calculated for each item in the instrument. The CVI was calculated using the formula:

$$\text{CVI} = \frac{\text{Number of items considered relevant by all judges}}{\text{Total number of items in questionnaire}}$$

Calculation yielded a CVI of 0.9 for the beneficiaries questionnaire and 0.93 for other project staff questionnaire. These two figures were > 0.5 that Amin (2005) advised was a sufficient validity index. This technique was employed by the researcher because it has been tested scientifically and found dependable. The CVI attained boosted the researcher's confidence that

the results to be obtained from the study were likely to correlate well with other results. To ensure consistency and accuracy of data, research assistants were trained by the researcher on data quality control. This guaranteed quality responses from the respondents.

On the other hand, for the reliability of quantitative tool, the researcher performed a pre-test data collection exercise to ascertain the quality of the data collection tools. This exercise initially informed the study of the accuracy and consistency with which the questions were answered. This attribute showed stability of the instrument hence a high stability showed high reliability. For quantitative data, a Cronbach's alpha was computed using SPSS 20.0 software 16.0 for scale data to determine reliability. The Cronbach'salpha value attained from the data set of Beneficiaries tool was 0.922 while the value attained for other project staff tool was 0.907. The researcher considered data to be reliable since Cronbach's alpha was above 0.5.

For qualitative data collection instruments, validity and reliability were guaranteed through a number of ways. Firstly, the researcher triangulated both qualitative and quantitative tools. This facilitated corroboration of findings and thus increased data reliability. Secondly, the purpose and objectives of the study were clarified to all respondents and research assistants. This encouraged study subjects to give valid information on the variables under study. This resulted in increased validity, reliability and consistency of the data gathered by the researcher using varied tools.

### 3.9 Data Analysis

Quantitative data collected were edited, cleaned, validated and analyzed using different techniques depending on its type. Nominal variables were measured using descriptive statistics that included mainly percentages. These techniques enabled the researcher sufficiently describe and present such data in a tabular format. The factors that were perceived to influence AMAKA project performance were divided into community involvement, community empowerment and resource use and accountability. In analyzing the objectives under study, the researcher

assigned scores to responses for respondents to indicate the level of agreement with statements in a structured questionnaire using a likert scale. During the analysis responses that took the form of “agree”/ “Strongly agree” and “disagree” “strongly disagree” were merged together because of the small frequencies and for uniformity with other publications. The idea behind this was to draw meaningful conclusions from the data. Since our dependent variables and independent variables were measured on an ordinal/ranked scale, the Spearman’s correlation test was used. Quantitative responses are corroborated by qualitative ones in this section.

The investigator found these inferential statistics helpful in making deductions from data collected. In addition these statistics simplify hypotheses testing and drawing relationships between findings. Qualitative data was; on the other hand, thematically analyzed. This method enabled the researcher to organize, retrieve and organize and establish relationships between the data collected on the study problem with relative ease.

### 3.10 Measurement of Variables

In this study, variables were measured using a 5 point Likert scale. The scale ranged from 1 which denoted the strongly disagree opinion to 5 which represented the strongly agree view. This choice of measurements made it simple for respondents to express their opinions by just checking a value between 1 and 5 that best represented their opinions on level of participation.

### 3.11 Chapter Summary

In summary the methodology chapter presented, the research design, the population of the study, sample size determination and selection techniques, data collection methods and instruments, data quality control and analysis methods and measurement of variables. Results of the study were presented in the subsequent chapter.

# CHAPTER FOUR

# PRESENTATION, ANALYSIS AND INTERPRETATION OF FINDINGS

## 4.1 Introduction

This chapter presents the results of the study in relation to the study objectives and research hypotheses. The researcher set out to explore the relationship between participatory monitoring and evaluation and project performance with specific reference to AMAKA project case. Data presentation was guided by the study objectives namely; (a) to establish the relationship between community involvement in participatory monitoring and evaluation and project performance at AMAKA project, (b) to investigate the relationship between community empowerment in participatory monitoring and evaluation and project performance at AMAKA project and (c) to find out the relationship between resource use and accountability in participatory monitoring and evaluation and project performance at AMAKA project. Data is presented under different themes and sub themes beginning with response rate, background characteristics of the respondents, descriptive statistics for both the dependent and independent variables and lastly the in-depth empirical findings. An analytical data procedure such as correlation analysis using the spearman's correlation was applied to determine the relationship between key variables.

## 4.2 Response rate

The collected data for the study included 327 questionnaire responses from safe male circumcision beneficiaries, other project staff and nine (9) key informant interviews with National Coordinator for adult male circumcision under Ministry of Health, Head of Outreach department IDI, Project Manager AMAKA Project, M&E specialist, Data Manager, Project Administrator, Regional coordinator EMAKA project Kampala and mobilization officer. 327 questionnaires were issued out by the researcher and were all filled and returned. This gave a response rate of 100%. The responses were considered representative given that 100% response

rate falls above the 50% minimum acceptable rate (Amin, 2005). Nine key informant interviews were proposed and all were completed, signifying a response rate of 100% for interviews. The overall average response rate for the questionnaires and interviews was computed and revealed a value of 100%. This response rate of 100% was ensured through early engagement of all the stakeholders that had been selected for the interviews and also through preparatory trainings of the research assistant on how to administer the questionnaire.

**Table 2: Summary table of questionnaire respondents**

| **Respondents** | **Sample Size** | **Responses received** | **Percentage response** |
|---|---|---|---|
| Beneficiaries | 311 | 311 | 100% |
| Other Project Staff | 16 | 16 | 100% |

**Source: Primary data**

Data in table 2 above reveals that 327 questionnaires were issued, responded and returned giving a response rate of 100%. This indicates that the data received was sufficiently representative of the sampled population and could, therefore, be relied on to draw conclusions on the key variables under study.

### 4.3 Background information of respondents

This section presents respondents' bio-data. Critical background information is presented in order beginning with respondents' gender, age and education levels attained. The demographic characteristics of the respondents are graphically presented in the proceeding subsections for easy discernment.

### 4.3.1 Gender of the respondents

**Table 3: Distribution of respondents by gender**

| | Beneficiaries | | Other Project Staff | |
|---|---|---|---|---|
| **Gender** | **Frequency** | **Percentage** | **Frequency** | **Percentage** |
| Male | 308 | 99.0% | 3 | 18.8% |
| Female | 3 | 1% | 13 | 81.3% |
| **Total** | **311** | **100%** | **16** | **100%** |

**Source:** Primary data

Data in table 3 above shows that out of 311 respondents in the beneficiaries' category, 99% were male while the remaining 1% was female. This huge variation in number of respondents in the beneficiaries category is explained by the fact that AMAKA being a circumcision project, there were more male respondents among the beneficiaries category while the few women respondents had accompanied their young children above the age of ten (10) for circumcision. On the other hand out of the 16 respondents in the other project staff category 81.3% were female, while 18.8% were male. The project administrator confirmed that although there was no deliberate effort to employ more women than men, women naturally are better care takers compared to their male counterparts as regards to healthcare.

### 4.3.2 Age group of respondents

Table 4 below shows a number of respondents in each age group and percentage of the study sample it represents. This was aimed at finding out respondents' age in years.

**Table 4: Age group of respondents**

| | Beneficiaries | | Other project staff | |
|---|---|---|---|---|
| **Age group** | **Frequency** | **Percentage** | **Frequency** | **Percentage** |
| 10-14 years | 7 | 2.3% | 0 | 0 |
| 15-19 years | 60 | 19.3% | 0 | 0 |
| 20-24 years | 179 | 57.6% | 0 | 0 |
| 25-49 years | 65 | 20.9% | 16 | 100% |
| Above 50 years | 0 | 0 | 0 | 0 |
| **Total** | **311** | **100** | **16** | **100%** |

From table 4 above, it is clear that out of 311 respondents in the beneficiaries' category the majority were middle aged since the 20-24 years and 25-30 years' age groups constituted 57.6% and 20.9% of the respondents respectively. On the other hand, whereas respondents in the 15- 19 age group comprised of only 19.3% of the respondents, the 10-14 age group individually made just 2.3% of the study subjects in the beneficiaries' category. This implies that young people are largely involved and benefit from AMAKA project services and partly contributes to the project's performance.

According the project manager and head of Outreach department at IDI, the use of the transport model to transport youth from deep down the villages for circumcision partly explains why the youth have largely embraced the exercise. Similarly the advertisements going out to the public have been well packaged to target the youth. During a key informant interview with the National Safe Male Circumcision coordinator in Ministry of Health, she recognizes the fact that amidst the ultimate objective of preventing HIV/AIDs, circumcision is viewed as "stylish" among young partners with most of them shunning away from uncircumcised partners hence increasing the number of young circumcised men. When she was asked about the country's progress on circumcision she had this to say;

> *"As far as this exercise is concerned ...am very happy with the progress we have made in terms of circumcision especially among the youth at the country level...what is more interesting is the fact that we have packaged the message to entice young men especially students in secondary schools, tertiary institutions and Universities. They are convinced by their adolescent girl friends that getting cut is "stylish". These young girls tell the boys that they will not have sex with them if they are not cut, prompting them to go for the procedure. They also see it as a sign of body cleanliness."*

The low representation of the 50+ age group is probably indicative of the fact that, the age group is yet to appreciate the benefits attributed to circumcision. This view is also shared by the national coordinator and project manager who conquers that;

> *"There has been slow progress as far adult male* circumcision *among adult male above 45+ is concerned...one of the reasons being advanced for the adult men's low response is that their wives claim if they get circumcised they would become promiscuous."*

**4.3.3 Education levels of respondents**

Table 5, below shows the highest education levels attained by the respondents. Respondents' level of education ranges from no formal education to tertiary.

**Table 5: Education levels of respondents**

| **Education Level** | **Beneficiaries** | | **Other project staff** | |
|---|---|---|---|---|
| | **Frequency** | **Percentage** | **Frequency** | **Percentage** |
| None | 11 | 3.5% | 0 | 0 |
| Primary Level | 98 | 31.5% | 0 | 0 |
| Certificate | 166 | 53.4% | 1 | 6.3% |
| Diploma | 25 | 8% | 7 | 43.7% |
| Above Diploma | 11 | 3.5% | 8 | 50% |
| **Total** | **311** | **100%** | **16** | **100%** |

**Source**: Primary data

Table 5 above shows the different levels of education attained by study subjects. It reveals that out of 311 respondents in the beneficiaries category, 53.4% achieved certificate education (both ordinary and advanced level), 3.5% had not attained any formal education while 31.5% had attained primary education. 8% of the respondents had achieved education at diploma level while 3.5% had qualifications above diploma level. On the other hand, out of the 16respondents in the other project staff category, 43.7% and 50% had attained education above diploma level as shown in the table above.

This data reveals that the project staff were slightly more educated than the beneficiaries and were comfortable and able to respond to some technical questions relating to participatory monitoring and evaluation compared to their counterparts in the beneficiaries' category since most of them had attained education above diploma level.

### 4.3.4 Category of respondents

**Table 6: Category of respondents**

| Category of Respondents | Population | Sample Size |
|---|---|---|
| Ministry of Health Officials | 4 | 1 |
| Project core team (Head of Department, Project Manager, M&E specialist, Data manager, Administrator, logistics officer, Regional project coordinator and mobilization officer. | 12 | 8 |
| Other project staff(Site team leader, Data entrants, counselors, Nurses, SMC surgeons, Mobilisers | 16 | 16 |
| Beneficiaries/ other stakeholders | 7,843 | 311 |
| **Total** | **7875** | **336** |

**Source:** Primary data

Table 6 above shows that out of 336 respondents, 311 were community beneficiaries forming the majority of respondents followed by the other project staff with 16 respondents. Respondents among the project core team were 8 while the national safe male circumcision coordinator represented the Ministry of Health officials. The study integrated both the responses from the technical wing of the project that really understood the concept of participatory monitoring and evaluation and also put into account the views of the beneficiaries of the AMAKA project.

## 4.4 Descriptive findings of the relationship between PM&E and project performance

This study was set out to explore the relationship between participatory monitoring and evaluation and project performance in the case of AMAKA project in Kampala District. This section presents the findings on the study objectives namely;(a) to establish the relationship between community involvement in participatory monitoring and evaluation to project performance at AMAKA project, (b) to investigate the relationship between community

empowerment in participatory monitoring and evaluation and project performance at AMAKA project and (c) to find out the relationship between resource use and accountability in participatory monitoring and evaluation and project performance at AMAKA project.

### 4.4.1 Community involvement in PM&E and Project performance

The study aimed at establishing the relationship between community involvement in participatory monitoring and evaluation and project performance at AMAKA Project. Using constructs from indicators of community involvement along a 5 Likert scale questionnaire, respondents were tasked to give responses that best suited their involvement in participatory monitoring and evaluation in AMAKA project.

**Table 7: Responses on community involvement by beneficiaries**

| Community Involvement | Disagree | Not sure | Agree |
|---|---|---|---|
| Views are represented | 16.4% | 23.2% | 60.5% |
| Feedback is shared with the beneficiaries | 6.1% | 37.6% | 56.3% |
| I am involved in circumcision activities in my area | 37.3% | 4.8% | 57.9% |
| Circumcision team visits clients | 27% | 30.2% | 42.8% |
| Village health teams always inform us about circumcision. | 31.8% | 19.3% | 48.9% |
| My background information is shared | 1% | 4.2% | 94.9% |
| Findings from physical examination and HIV tests are shared and discussed | 1% | 2.6% | 96.5% |
| Pre-health talk circumcision is done | 0.3% | 3.5% | 96.1% |
| After circumcision am given relevant information | 1.3% | 2.9% | 95.8% |

**Source:** Primary data

As regards to community involvement in circumcision activities in the area out of 311 respondents in the beneficiaries' category, 57.9% agreed, 37.3% disagreed while 4.8% were not sure. It is also observed that with regard to whether the views of the beneficiaries are represented, 60.5% of respondents agreed, 16.4% disagreed while 23.2% were not sure. When it came to finding out whether village health teams always inform the community about circumcision, 48.9% of the respondents agreed that they were, 31.8% disagreed and 19.3% were not sure. More so with regards to whether feedback is shared with the beneficiaries 56.3%

of respondents agreed, 6.1% while 37.6% were not sure. It is also observable, from the results above that a good number of respondents at 95.8% were in agreement about the fact that after circumcision the beneficiaries were given relevant information about the procedure and safe living, 1.3% disagreed with this statement while 2.9% were not sure about it. However we note that there is some improvement required as far as village health teams sensitizing communities about circumcision and circumcision teams visiting or follow up of the beneficiaries after circumcision.

**Table 8: Responses on Community Involvement by other project staff**

| Community Involvement | Disagree | Not sure | Agree |
|---|---|---|---|
| Developing Work Plans | | | |
| There is joint development of work plans for the activities | 6.3% | 18.8% | 75% |
| Work plans of activities are clear to stakeholders | 25% | 6.3% | 68.8% |
| Work plans of activities are relevant to stakeholders | 6.3% | 12.5% | 81.3% |
| Stakeholders are informed right from project inception what their participation in M&E would entail | 12.5% | 31.3% | 56.3% |
| Stakeholders are involved in needs or problem identification | 25% | 25% | 50% |
| Stakeholders participate in setting of priorities for M&E | 31.3% | 37.5% | 31.3% |
| Stakeholders participate in setting of targets for M&E | 43.8% | 18.8% | 37.5% |
| Stakeholders are jointly involved in setting indicators of progress | 43.8% | 31.3% | 25% |
| Data Collection | | | |
| There is joint participation in field visits to gather and collect information | 0 | 12.5% | 87.5% |
| Stakeholders are involved in annual surveys | 43.8% | 31.3% | 25% |
| Stakeholders are involved in the process of determining on how to collect data | 25% | 37.5% | 37.5% |
| Stakeholders determine the tools to be used in collection of data | 43.8% | 25% | 31.3% |
| Stakeholders determine the techniques to be used in collection of data | 62.5% | 12.5% | 25% |
| There is joint measurement of project progress. | 25% | 0 | 75% |
| Communication of M&E results | | | |
| Findings from monitoring and evaluation activities are discussed with stakeholders | 12.5% | 6.3% | 81.3% |
| Stakeholders are free to request for any information necessary from the AMAKA project for decision making | 56.3% | 12.5% | 31.3% |
| Stakeholders are involved in the process of determining who owns the information and findings. | 25% | 43.8% | 31.3% |
| Stakeholders are involved in the process of determining the use of the information and findings | 31.3% | 31.3% | 37.5% |
| Stakeholders are fully involved during dissemination of M&E findings. | 25% | 18.8% | 56.3% |

**Source:** Primary data

Regarding developing work plans jointly, 75% out of 16 respondents in the other project staff category agreed, 6.3% disagreed while 18.8% were not sure. When it came to finding out whether work plans of activities were clear to stakeholders 68.8% were in agreement, 25 % disagreed with the statement while 6.3% were not sure. It is also observable, from the results above that a good number of respondents at 56.3% were in agreement about the fact that there was information to key stakeholders from the inception of the project on what their participation in M& E would entail, 12.5% disagreed with this statement while 31.3% were not sure about it. With regards to whether project stakeholders jointly participate in field visits to gather and collect information, 87.5% agreed with the statement that indeed it happens; no one disagreed while 12.5 % were not sure.

It is also observed that with regard to whether the project beneficiaries are involved in determining the techniques to be used in collection of data 25% out of 16 respondents agreed while 62.5% disagreed with this statement and 12.5% were not sure. 81.3% agreed with that findings from M&E activities are discussed with stakeholders, 12.5% disagreed while 6.3% were not sure whether this happens or not. Further still, it is observable from the results above that 56.3% of respondents agreed with the fact that stakeholders are fully involved during dissemination of M&E findings, 25% disagreed with the statement while 18.8% were not sure about it.

Lastly, however we note that the element of monitoring and evaluation process is lacking, this could be explained by the fact that team is not fully involved in the M&E process and had limited technical skills in that field. All in all, the majority of the respondents agreed that they are involved in the monitoring and evaluation of the project in one way or another. What is left to be understood is their effectiveness in the monitoring and evaluation of the AMAKA project activities.

#### 4.4.1.1 Correlation results for community involvement in PM&E and Project performance

A spearman's coefficient was computed to determine the relationship between community involvement and project performance among both project beneficiaries and other project staff. The choice of Spearman correlation was because the dependent and independent variables were ordinal/ ranked. The table below shows values attained:

**Table 9: Correlation results for community involvement and project performance**

| Independent variables | | Performance |
|---|---|---|
| Community involvement among beneficiaries | Correlation Coefficient | .572** |
| | Sig. (2-tailed) | .000 |
| | N | 311 |
| | | |
| Community involvement among other project staff | Correlation Coefficient | .101 |
| | Sig. (2-tailed) | .711 |
| | N | 16 |
| **.Correlation is significant at the 0.01(2 tailed) | | |

Source: Primary data

The table above shows the spearman's correlation value among beneficiaries category is 0.572. This indicates that there is a moderate positive relationship between community involvement in participatory monitoring and evaluation and project performance among project beneficiaries (rs= 0.572; P < 0.01), On the other hand a spearman's correlation value among other project staff category is 0.101, implying that the relationship is not significant (rs= 0.101; P > 0.05). The above concurs with the hypothesis that community involvement in P&ME positively contributes to project performance.

### 4.4.2 Community empowerment in PM&E and Project performance

This section focused on investigating the relationship between community empowerment in participatory monitoring and evaluation and project performance at AMAKA project. Respondents were requested to provide responses that best represented their views on

community empowerment at AMAKA project and how it contributed to project performance along a 5 likert scale questionnaire. Below is a summary of their responses.

**Table 10: Responses on community empowerment by beneficiaries**

| Community Empowerment | Disagree | Not sure | Agree |
|---|---|---|---|
| We are always trained on the benefits of Circumcision | 2.3% | 3.2% | 94.5% |
| Feedback from stakeholders is routinely utilized to improve performance. | 3.2% | 38.9% | 57.9% |
| Beneficiaries are made to aware of their responsibilities in regards to circumcision | 0.6% | 5.8% | 93.6% |

**Source:** Primary data

From the above table, out of 311 respondents in the beneficiaries' category, 94.5% of the project beneficiaries agreed that they had been trained on the benefits of adult safe male circumcision, 2.3% disagreed while 3.2% were not sure about it. When it came to finding out whether feedback from stakeholders is routinely utilized to improve performance, 57.9% of 311 project beneficiaries agreed with the statement, 3.2% disagreed while 38.9% were not sure. Furthermore 93.6% agreed that they were made aware of their responsibilities in regards to circumcision, whereas 0.6% disagreed while 5.8% were not sure. We note that the majority of the beneficiaries agreed that they were being trained and made aware of their responsibilities; however more needs to be done in regards to strengthening the sharing of feedback and information between the beneficiaries and the project core team i.e. from bottom to up and from up to bottom.

**Table 11: Responses on community empowerment among other project staff**

| Community Empowerment | Disagree | Not sure | Agree |
|---|---|---|---|
| **Capacity building** | | | |
| Stakeholders are able to improve on their skills to implement the project goals | 0 | 12.5% | 87.5% |
| Project beneficiaries use their knowledge to propose corrective actions in the program management | 6.3% | 50% | 43.8% |
| Key stakeholders also involved in the tracking of progress of the project | 6.3% | 6.3% | 87.5% |
| Training is conducted for key stakeholders involved in the implementation and monitoring of AMAKA project activities | 0 | 0 | 100% |
| There is capacity building, refresher training for stakeholders who may not have understood clearly the first time of training | 6.3 | 6.3 | 87.5 |
| **Collective learning** | | | |
| There is learning on how to assess the extent to which the project is successful or not | 12.5% | 12.5% | 75% |
| The current structure of the project supports stakeholder participation and involvement in the collective learning process | 6.3% | 25% | 68.8% |
| Project beneficiaries are all involved in meetings to review project performance | 18.8% | 12.5% | 68.8% |
| Feedback from stakeholders is routinely utilized to improve performance | 6.3% | 31.3% | 62.5% |
| **Allocation of roles and responsibilities** | | | |
| Areas of responsibility/roles played by stakeholders are clearly defined. | 6.3% | 6.3% | 87.5% |
| Key stakeholder roles in M&E do not interfere with other's roles | 12.5% | 31.3% | 56.3% |
| Reports are jointly written | 31.3% | 43.8% | 25% |
| Clear roles and responsibilities lead to project performance | 6.3% | 0 | 93.8% |

**Source: Primary data**

The findings in Table 11 above reveal that out of 16 respondents in the other project staff category, there was 100% agreement that training is conducted for key stakeholders involved in the implementation and monitoring of AMAKA project activities. It is also observable, from the results above that a good number of respondents at 87.5% agreed that stakeholders were able to improve on their skills to implement the project goals, none disagreed while 12.5% were not sure. With regards to key stakeholders getting involved in the tracking of progress of the project, 87.5% were in agreement with the statement, 6.3% disagreed and 6.3% was not

sure. When it came to finding out whether there is capacity building refresher training for stakeholders who may not have understood clearly the first time of training, 87.5% agreed, 6.3% disagreed whereas 6.3% were not sure. In addition, 75% of the respondents in this category agreed that there is learning on how to assess the extent to which the project is successful or not, 12.5% disagreed with the statement while 12.5% were not sure.

On whether feedback from stakeholders is routinely utilized to improve performance, 62.5% agreed, 6.3% disagreed while 31.3% were not sure about this statement. Qualitative data findings corroborated the above findings. For example the project administrator when asked to comment about feedback and how it has been useful to the project reported that;

> *"Feedback is key to this project because this project is reliant on the feedback of the stakeholders for example staff and village health teams make suggestions on how improve the project through monthly and quarterly meetings... it is this feedback that is used to form the next course of action."*

Furthermore when I put the project manager to task to explain what they do with the feedback attained, he had this to say, *"Positive feedback is celebrated, and negative feedback on the other is reviewed, analyzed, discussed in appropriate forum and actions plans generated to inform the next course of action."*

Finally, on whether clear roles and responsibilities lead to project performance, 93.8% out of the 16 respondents in the project staff category agreed, 6.3% disagreed. Key to note here is that both qualitative and quantitative indicate that the project staff is empowered although there is need to involve them more in writing some sections of the reports so that there is joint input in the reports that are generated for performance improvement.

#### 4.4.2.1 Correlation results between community empowerment and project performance

A spearman's coefficient was computed to determine the relationship between community empowerment and project performance among both project beneficiaries and other project

staff. The choice of Spearman correlation was because the dependent and independent variables were ordinal/ ranked. The table 12 below shows values attained:

**Table 12: correlation results for community empowerment and project performance**

| **Independent variables** | | **Performance** |
|---|---|---|
| Community Empowerment among Beneficiaries | Correlation Coefficient | .528** |
| | Sig. (2-tailed) | .000 |
| | N | 311 |
| | | |
| Community Empowerment among other project staff | Correlation Coefficient | .170 |
| | Sig. (2-tailed) | .530 |
| | N | 16 |
| **. Correlation is significant at the 0.01 level (2-tailed). | | |

**Source:** Primary data

Table 12 above shows the spearman's correlation value among beneficiaries' category is 0.528. This implies that there is a moderate positive relationship between community empowerment in participatory monitoring and evaluation and project performance among project beneficiaries (rs= 0.528; P < 0.01). On the other hand a spearman's correlation value among other project staff category is 0.170, implying that the relationship is not significant (rs= 0.170; P > 0.05). The results from above table agree with the hypothesis that community empowerment in participatory monitoring and evaluation positively affects project performance.

### 4.4.3 Resource use and accountability in PM&E and Project performance

The third objective of this study was to find out the relationship between resource use and accountability in participatory monitoring and evaluation and project performance at AMAKA project. In the conceptual framework (Figure 1) this objective took the three dimensions of; resource budgeting, resource allocation and resource sharing. The table below shows the responses on these aspects.

**Table 13: Responses on resource use and accountability by beneficiaries**

| **Community involvement** | **Disagree** | **Not sure** | **Agree** |
|---|---|---|---|

| | | | |
|---|---|---|---|
| Clear roles and responsibilities lead to project performance. | 3.5% | 27.3% | 69.1% |

**Source:** Primary data

From the table above, it is observable that 69.1% out of 311 respondents in the beneficiaries' category were in agreement with the statement that clear roles and responsibilities lead to project performance whereas on the other hand 3.5% disagreed with the statement while 27.3% were not sure. However the respondents were quick to point that they are not really aware of how much the project costs, how it receives funding and how it accounts for these funds. They were quick to add that in case they are approached for resource mobilization, they will be willing to support the cause since the project has good intentions.

**Table 14: Responses on resource use and accountability by other project staff**

| Resource Use and Accountability | Disagree | Not sure | Agree |
|---|---|---|---|
| **Resource Budgeting** | | | |
| There is joint budgeting of project activities | 43.8% | 18.8% | 37.5% |
| Finances are prioritized for M&E activities | 31.3% | 43.8% | 25% |
| Key stakeholders are given forum to question irregularities on budget and accountability in the implementation of the project | 43.8% | 25% | 31.3% |
| **Resource Allocation** | | | |
| Stakeholders are involved in making decisions on budget and resource use in the project | 31.3% | 37.5% | 31.3% |
| Stakeholders ensure funds of the project are used correctly | 31.3% | 18.8% | 50% |
| Financial resources are planned for and allocated properly | 6.3% | 31.3% | 62.5% |
| Resources are used for what they have been budgeted for | 6.3% | 43.8% | 50% |
| **Resource Sharing** | | | |
| Stakeholders of the AMAKA project receive tools and logistics to carry out their activities. | 0 | 6.3% | 93.8% |
| There is joint accountability of resources used | 6.3% | 43.8% | 50% |
| AMAKA project staff coordinate with community leaders and beneficiaries on the use of resources for activities | 50% | 6.3% | 43.8% |
| Resource sharing is done to the satisfaction of all stakeholders. | 12.5% | 43.8% | 43.8% |

**Source**: Primary data

From the findings above, out of 16 respondents in the other project staff category, 37.5% agreed that budgeting for activities of the project is done together between project staff and key stakeholders, 43.8% disagreed and 18.8% were not sure. When asked whether finances are prioritized for M&E activities, 25% out of the 16 respondents agreed, 31.3% disagreed while the majority 43.8% were not sure. When it came to finding out whether key stakeholders are

given forum to question irregularities on budget and accountability in the implementation of the project, majority of 43.8% revealed that this was not the case, 31.3% however on the other hand agreed that this happens while 25% were not sure.

Regarding whether stakeholders are involved in making decisions on budget and resource use in the project, 31.3% agreed that this was the case, 31.3% disagreed while 37.5% were not sure. 62.5% agreed that financial resources are planned for and allocated properly, 6.3% disagreed with this statement where as 31.3% were not sure. When it came to finding out whether stakeholders and beneficiaries of AMAKA project receive tools and logistics to carry out their activities, 93.8% agreed that indeed this happen, none disagreed while 6.3% was not sure. When asked whether there is joint accountability of resources used 50% agreed, 6.3% disagreed while 43.8% were not sure whether this happens. Finally 43.8% in the other project staff category agreed that resource sharing was done to the satisfaction of all stakeholders, 12.5% disagreed while 43.8% were not sure.

The implication of the above findings is that beneficiaries and other project staff are not largely involved in the matters of resource allocation and decision making. It is therefore recommended that the project should ensure that sufficient resources and funds are set aside for monitoring and evaluation activities and create a structure where irregularities on budget and accountabilities are questioned and addressed. This will encourage transparency which will in return contribute to the project's performance in terms of time, quality and relevance parameters.

#### 4.4.3.1 Correlation results for resource use and accountability and project performance

A spearman's coefficient was computed to determine the relationship between resource use and accountability and project performance among both project beneficiaries and other project staff. The choice of Spearman correlation was because the dependent and independent variables were ordinal/ ranked. The table 15 below shows values attained:

**Table 15: Correlation results for resource use and accountability and project performance**

| Independent variables | | Performance |
|---|---|---|
| Resource use and accountability among project beneficiaries | Correlation Coefficient | .433** |
| | Sig. (2-tailed) | .000 |
| | N | 311 |
| Resource use and accountability among Other project staff | Correlation Coefficient | .274 |
| | Sig. (2-tailed) | .305 |
| | N | 16 |
| **. Correlation is significant at the 0.01 level (2-tailed). | | |

**Source:** Primary data

The table above shows the spearman's correlation value among beneficiaries category is 0.433. This implies that there is a moderate positive relationship between resource use and accountability in participatory monitoring and evaluation and project performance(rs= 0.433; P < 0.01), On the other hand a spearman's correlation value among other project staff category was 0.274 implying that the relationship is not significant (rs= 0.274; P > 0.05). Findings in the table above support the hypothesis that resource use and accountability in PM&E positively affects project performance.

### 4.5 Project performance

**Table 16: Responses on project performance by beneficiaries**

| Project Performance | Disagree | Not sure | Agree |
|---|---|---|---|
| **Project cost** | | | |
| Projects are accomplished within the stipulated budget. | 25.7% | 19.3% | 55% |
| Projects that are not completed within the stipulated budget have poor quality outputs. | 10% | 24.1% | 65.9% |
| PM&E improves adherence to the project schedule | 2.9% | 19.3% | 77.8% |
| The cost of PM&E is worth the demand for M&E | 1.6% | 37.3% | 61.1% |
| Project finances are always enough and adequate | 10.9% | 19.3% | 69.8% |
| **Stakeholder Satisfaction** | | | |
| Stakeholders interest can best be demonstrated when all stakeholders jointly monitor project progress | 1.3% | 4.5% | 94.2% |
| Understanding stakeholder needs is vital in the success of this program | 1.3% | 28% | 70.7% |
| Stakeholders are satisfied with the level of involvement in the project | 6.1% | 29.6% | 64.3% |
| Stakeholders are treated with respect & always consulted when making decisions | 5.8% | 13.2% | 81% |
| The project status reports are clear, concise and contain enough information to determine project progress | 3.9% | 55.9% | 40.2% |
| Stakeholders measure the performance of the project as per their expectations | 2.6% | 22.5% | 74.9% |
| AMAKA project produces outputs that match the needs of the stakeholders. | 2.3% | 14.5% | 83.3% |
| AMAKA project's performance is viewed by stakeholders as successful | 1% | 7.1% | 92% |
| **Project relevance** | | | |
| The objectives of the AMAKA project are still valid. | 1.6% | 8% | 90.4% |
| The activities and outputs generated by AMAKA project are consistent with the overall goal. | 1% | 55.3% | 43.7% |
| The activities and outputs generated by AMAKA project are consistent with the intended impact | 0.3% | 21.2% | 78.5% |
| Project objectives are clearly understood by all stakeholders. | 1.3% | 19% | 79.7% |

**Source**: Primary data

From the table above, out of 311 respondents in the beneficiaries' category, 55 % agreed that projects accomplished within the stipulated budget are successful, 25.7 % disagreed whereas

19.3% were not sure. When it came to finding out whether the projects that are not completed within the stipulated budget have poor quality outputs, 65.9% out of 311 respondents were in agreement, 10% disagreed while 24.1 %were not sure. When it came to finding out whether stakeholders interests are best demonstrated when all stakeholders jointly monitor project progress, 94.2% agreed with the statement, 1.3 % disagreed where as 4.5% were not sure. There was 100 % agreement with the view that understanding stakeholders' needs was vital in the success of the program. More still, 75% agreed with the statement that stakeholders measure the performance of the project as per their expectations; no one disagreed with the statement where as 25% were not sure. When asked whether AMAKA project's performance is viewed by stakeholders as successful 100% agreed with the statement.

Lastly, regarding whether the activities and outputs generated by AMAKA project are consistent with the overall goal 75% agreed, none disagreed well as 25% were not sure. In addition, 93.8% agreed that the activities and outputs generated by AMAKA project were consistent with the intended impact, none disagreed whereas 6.3% were not sure. Finally, with regards to whether the objectives of the AMAKA project were still valid 93.8% agreed, whereas none disagreed, 6.3% were not sure. Results from the table above indicate that beneficiaries view AMAKA project as performing and successful project. However there is a general feeling among the beneficiaries that the activities and outputs of the project should be further strengthened in line with the overall goal of the project.

**Table 17: Responses on project performance by other project staff**

| Project Performance | Disagree | Not sure | Agree |
|---|---|---|---|
| **Project Cost** | | | |
| Projects are accomplished within the stipulated budget. | 0 | 12.5% | 87.5% |
| Projects that are not completed within the stipulated budget have poor quality outputs. | 0 | 12.5% | 87.5% |
| PM&E improves adherence to the project schedule | 0 | 6.3% | 93.8% |
| The cost of PM&E is worth the demand for M&E | 6.3% | 18.8% | 75% |
| Project finances are always enough and adequate | 12.5% | 12.5% | 75% |
| **Stakeholder Satisfaction** | | | |
| Stakeholders interest can best be demonstrated when all stakeholders jointly monitor project progress | 0 | 6.3% | 93.8% |
| Understanding stakeholder needs is vital in the success of this program | 0 | 0 | 100% |
| Stakeholders are satisfied with the level of involvement in the project | 0 | 50% | 50% |
| Stakeholders are treated with respect & always consulted when making decisions | 0 | 6.3% | 93.8% |
| Stakeholders measure the performance of the project as per their expectations | 0 | 25% | 75% |
| AMAKA project produces outputs that match the needs of the stakeholders. | 0 | 25% | 75% |
| AMAKA project's performance is viewed by stakeholders as successful | 0 | 0 | 100% |
| **Project Relevance** | | | |
| The objectives of the AMAKA project are still valid | 0 | 6.3% | 93.8% |
| The activities and outputs generated by AMAKA project are consistent with the overall goal. | 0 | 25% | 75% |
| The activities and outputs generated by AMAKA project are consistent with the intended impact | 0 | 6.3% | 93.8% |
| Project objectives are clearly understood by all stakeholders. | 0 | 0 | 100% |

**Source**: Primary data

From the table above, it is observable that 87.5% out of 16 respondents in the other project staff category were in agreement with the statement that projects accomplished within the stipulated budget are successful; no one disagreed where as 12.5% were not so sure. When asked about the view that projects that are not completed within the stipulated budget have poor quality outputs, 87.5% out of the 16 respondents agreed, none disagreed while 12.5%

were not sure. These views are further echoed by the project manager when asked to comment about the costs and budget he had this to say;-

> *"From a project perspective the project is doing very well as far as the budget is concerned in fact we are doing very well on costs parameter, referencing the unit cost of $ 44 per circumcision prescribed by the donors; the project is currently doing $ 40 per circumcision hence maintaining some cost saves of $ 4 per circumcision."*

When it came to finding out whether stakeholders interests are best demonstrated when all stakeholders jointly monitor project progress, 93.8% out of the 16 respondents in this category agreed with the statement, none disagreed well as 6.3% was not sure. There was 100% agreement with the view that understanding stakeholders' needs was vital in the success of the program. This explains the project is such popular in the targeted area.

In addition, 75% agreed with the statement that stakeholders measure the performance of the project as per their expectations, no one disagreed with the statement where as 25% were not sure. When asked whether AMAKA project's performance is viewed by stakeholders as successful, 100% agreed with the statement.

Regarding whether the activities and outputs generated by AMAKA project are consistent with the overall goal 75% agreed, none disagreed well as 25% were not sure. Similarly, 93.8% out of the 16 respondents agreed that the activities and outputs generated by AMAKA project were consistent with the intended impact; none disagreed whereas 6.3% were not sure. With regards to whether the objectives of the AMAKA project were still valid 93.8% agreed, whereas none disagreed, 6.3% were not sure. These views are very consistent with the Head of Outreach department views on the performance of the project;

*"In terms of performance circumcision programme remains very successful, comprehensive and relevant. Objectives are still valid 3-4 years when the project started; it's not surprising that we are still attracting more donor funding a testament that both the donors and stakeholders are happy."*

The findings in this chapter reveal that there is moderate positive relationship between participatory monitoring and evaluation and project performance thus enhancing the assertion that participatory monitoring and evaluation is an essential ingredient to project performance. The findings further explain why the AMAKA project has continued to register good progress in terms of cost, stakeholder satisfaction and project relevance.

# CHAPTER FIVE

# SUMMARY, DISCUSSION, CONCLUSIONS AND RECOMMENDATIONS

## 5.1 Introduction

This chapter summary of findings, discussions on the study and provides major discussions and recommendations on the basis of the key findings are presented. Furthermore it highlights proposed areas for further research.

## 5.2 Summary of findings

This study focused on participatory monitoring and evaluation and project performance. The purpose of the study was to explore the relationship between participatory monitoring and evaluation and project performance with specific reference to AMAKA Project case. The specific objectives of the study were; (a) to establish the relationship between community involvement in participatory monitoring and evaluation and project performance at AMAKA project, (b) to investigate the relationship between community empowerment in participatory monitoring and evaluation and project performance at AMAKA project and (c) to find out the relationship between resource use and accountability in participatory monitoring and evaluation and project performance at AMAKA project.

A descriptive survey research design was adopted for in depth investigation of the problem. A total of 336 respondents including project staff, beneficiaries and Ministry of Health official was covered in this study. Qualitative and quantitative data were collected using key informant interviews, documentary analysis and semi structured questionnaires. Qualitative data was thematically analyzed while the quantitative one was analyzed using descriptive and inferential methods. Data was interpreted for meaning. The findings are summarized, objective by objective below.

### 5.2.1 Community involvement in PM&E and Project performance

The study established that AMAKA project beneficiaries/stakeholders participated in participatory monitoring and evaluation. Most respondents /beneficiaries' category reported involvement in simpler tasks like sharing their background information before circumcision, discussion and sharing of findings from physical examination and HIV tests as well as getting involved in pre- health talks before circumcision. However, noticeably fewer study subjects reportedly participated in complex aspects of the project like identification of project resources, needs assessment and setting of indicators while very many denied participation in actual monitoring and evaluation. Qualitative data corroborated these findings.

On the other hand respondents in the other project staff category reported involvement in making work plans of activities, jointly participate in field visits to gather and collect information as well as jointly measuring of project progress and fully getting involved in the dissemination of monitoring and evaluation findings. However they reported less involvement in setting indicators of project progress, setting of priorities of monitoring and evaluation and less involvement in the process of determining how to collect data and determine the techniques to be used in the collection of data. Nonetheless, among beneficiaries category the researcher found a moderate positive relationship between community involvement in participatory monitoring and evaluation and project performance

### 5.2.2 Community empowerment in PM&E and Project performance

From the findings of the study it showed that community empowerment in PM&E was high, quantitative findings showed that the beneficiaries were always trained on the benefits of circumcision and that their feedback is routinely utilized to improve performance. On the other hand, findings from other project staff category confirmed that stakeholders were able to improve their skills through trainings to implement the project goals. The findings further confirmed that stakeholders were greatly involved in the tracking of progress of the project.

Respondents agreed to the larger extent that training was conducted for key stakeholders involved in the implementation and monitoring of AMAKA project activities. It was also reported that there was capacity building, refresher training for stakeholders who may not have understood clearly the first time of training. Findings also revealed that to a larger extent there was learning on how to assess the extent to which the project is successful or not. This coupled with project stakeholders confirmation of getting involved in meetings to review project performance confirmed the investigators earlier preposition that when the stakeholders are empowered with the necessary skills, project performance is guaranteed. Statistical analysis of the findings among the beneficiaries category indicated a moderate positive relationship between community empowerment in participatory monitoring and evaluation and AMAKA's project performance.

### 5.2.3 Resource use and accountability in PM&E and Project performance

Results of the study revealed that to a larger extent respondents agreed that clear roles and responsibilities lead to project performance. Further findings from the other project staff category confirmed that stakeholders and beneficiaries of AMAKA project received tools and logistics to carry out their activities and those resources are used for what they are budgeted for. Similarly the findings revealed that financial resources had been planned for and allocated properly. The findings further revealed that there was joint accountability of the resources used both quantitative and qualitative findings confirmed these findings.

On the other hand, study findings from the other project staff category revealed that stakeholders were far less involved in the making of decisions on budget and resource use in the project. Similarly findings indicated that there was less involvement of stakeholders in the questioning of irregularities on budget and accountability in the implementation of the project. Finally fewer study subjects under the other project staff category agreed that finances were prioritized for M& E activities. Statistical analysis among the beneficiaries category revealed

a moderate positive relationship between resource use and accountability and accountability in PM&E and project performance

### 5.3 Discussion of Findings

Both quantitative and qualitative evidence revealed that just as Estrella & Gaventa (1998) found elsewhere, participatory monitoring and evaluation in AMAKA did not only have a moderate positive relationship but also influenced project performance. Below the findings of this study are discussed following the objectives.

#### 5.3.1 Community involvement in PM&E and Project performance

The success of any community led development project largely depends on the involvement and contribution of the community beneficiaries. Study findings showed that there was a moderate positive relationship between community involvement in participatory monitoring and evaluation and project performance. Qualitative evidence corroborated these quantitative results in confirmation with Estrella & Gaventa (1998) and Aubel (2004) views that community participation in planning is critical to project performance as it elicits involvement of local program stakeholders, allowing them to reflect on their own experiences and learn from them. Further analysis and interpretation of both qualitative and quantitative findings revealed differences in the planning activities carried out by staff and beneficiary communities. Apparently, whereas community members participated in simple planning tasks, such as identifying as assessing community needs and initiating solutions to them, the complicated planning activities like identifying project resources plus setting goals, objectives and indicators are a preserve of the technical project core team**.**

Many respondents agreed to the statement that their views were represented. This is in line scholarly WB (2004) which stresses the active involvement of key stakeholders in the M&E in order for them to learn about and effect the process of the development project. In addition,

UNDP (2009) supports the argument that inadequate stakeholder involvement in the M&E process is one of the common why programs and projects fail. To the researcher the active involvement of community beneficiaries is critical to the project performance as it gaps closes the knowledge gap and communities own up the project. On the hand, a portion of respondents disagree to the statement. The disagreement can be linked to the fact that, fewer of them are actively involved in attributed to the guidelines of choosing who to involve in the M&E process hence a gap.

Lastly, it was found out that there was joint participation in field visits to gather and collect information. Similarly, respondents agreed that there was a joint development of work plans for the activities. These key findings concur with Bourne & Walker (2006), argue that the performance of a project is beyond completing a project on time, schedule and budget but integrating local interests and concerns at an early stage may increase the likelihood that their needs and priorities will be met hence achieving the project objectives. The beauty with joint participation in field visits to gather and collect information is that it helps the project identify its strength and weaknesses for correction and sustainability of the project. However, we note that some of the respondents were not in agreement when it came to setting targets for M&E and determine the techniques to be used in the collection of data hence two gaps.

### 5.3.2 Community empowerment in PM&E and Project performance

Based on the key findings, it was found out that beneficiary communities were trained in the implementation and tracking of AMAKA project activities. The findings have a linkage with Aubel (2004) who contends that participatory monitoring and evaluation can increase the capacity and confidence of local program staff and community beneficiaries to analyze their own needs and program and to undertake action planning based on the conclusions of such analysis, study findings concurred with this assertion. However, the criterion that was used to

select the individuals to train were not clear. Secondly, training was largely tuned to project staff other than the circumcision candidates hence a gap.

Similarly one of the main objectives of self-evaluation is to enhance the sustainability, replicability and effectiveness of development effort through strengthening people's organizational capacities. It aims at enabling people to keep track of their progress, by identifying and solving problems themselves and by building on and expanding areas of activity where success is recognized (CONCERN, 1996). The research findings revealed that the beneficiaries were always trained on the benefits of circumcision and that their feedback was routinely utilized to improve performance. Furthermore the program staff confirmed that stakeholders were able to improve their skills through trainings to implement the project goals. The findings further confirmed that stakeholders were greatly involved in the tracking of progress of the project. Both qualitative and quantitative results revealed that there was a positive correlation between community empowerment in PM&E and AMAKA project performance. Much as the feedback was obtained, from bottom to top, however, there was minimal evidence of feedback following from top to bottom especially among the circumcision candidates thus an area of weakness in the study.

### 5.3.3 Resource use and accountability in PM&E and Project performance

Both quantitative and qualitative findings presented in the previous chapter revealed that whereas the community beneficiaries and other project staff category respondents were not directly involved in the process of resource allocation and budgeting as this is a preserve of the senior project management team, stakeholders and beneficiaries of AMAKA project confirmed to have received tools and logistics to carry out their activities and those resources were used for what they were budgeted for. Similarly the findings revealed that financial resources had been planned for and allocated properly. Central to this research was the ability of AMAKA project's to depend on local mobilized resources from the beneficiary communities a fact that

ties in with Hilhorst & Guijt (2006), argument that a participatory monitoring and evaluation process may facilitate local resources mobilization**.** Through the Village Health Mobilization Teams, AMAKA team enjoy a number of benefits on its cost line which enables the project to have cost save of $ 4 per male circumcision.

Lastly,Woodwill (2006), contends that accountability that includes impact evaluation involves demonstrating to donors, beneficiaries and implementing partners that expenditure, actions and results are as agreed  or are as can reasonably be given situation. Research findings revealed that AMAKA project had consistently shown this attribute. This explains why donors have continued supporting and funding the project. However there were some pockets of delay as far as accountability reporting were concerned.

### 5.4 Conclusions

This section of the report presents conclusions of the salient findings of this study. This culmination of the study is presented as per research questions as derived from the research objectives.

#### 5.4.1 Community involvement in PM&E and Project performance

The findings of this study affirmed the investigator's preposition that community involvement in PM&E contributed to project performance. Both qualitative and quantitative results of the study confirmed varied levels of community involvement in PM&E by the beneficiaries and other project staff. Stakeholder's participation in planning and designing stages of AMAKA project was found inadequate especially among the beneficiaries category. This exclusive involvement may have compromised the performance of the project as stakeholders do not own the project. Results from the findings also revealed minimal involvement of project beneficiaries in the monitoring and evaluation of the project activities but revealed maximum involvement in the mobilization of circumcision candidates' process. Incorporation of

stakeholder's opinions and interests in the project objectives was considered to have a significant influence on the performance of the project. Key to note from the findings is that project beneficiaries/ stakeholders should be involved from the onset of the project and in all stages. The findings substantiated the hypothesis that community involvement in participatory monitoring and evaluation positively contributes to project performance.

### 5.4.2 Community empowerment in PM&E and Project performance

Qualitative and quantitative outcomes of this research apparently confirmed the researcher's earlier assumption that when you empower the project stakeholders and beneficiaries with the necessary skills and create an environment of learning this contributes to project performance directly. The integration of the Village Health Teams in the project activities not only empowered them to carry out the project's activities but it is considered to have a significant contribution on the performance of the project. It is believed that the employing of the Village Health Teams model, AMAKA project has been able to save a lot of the resources especially on the mobilization and advertisement budget.

### 5.4.3 Resource use and accountability in PM&E and Project performance

Further still the findings of this investigation acknowledged the researcher's earlier assumption that resource use and accountability in participatory monitoring and evaluation contributed to project performance. Quantitative data corroborated by qualitative results revealed that when stakeholders and beneficiaries are provided with the tools and logistics to carry out the project activities and that when resources are used for what they have been budgeted for, cost overruns will be minimized and thus this will contribute to project performance. However on the other hand, findings from the field revealed that budgeting for activities of the project is not jointly done by all stakeholders. Further still there is less involvement in decision making as far as budget and resource use are concerned especially on the part of other project staff category.

This exclusive involvement may have compromised the performance of the project as stakeholders might feel that they do not own the project.

### 5.5 Recommendations

In line of the findings, discussions and conclusions drawn above, the following recommendations are made to enhance the study; they are presented objective by objective.

#### 5.5.1 Community involvement in PM&E and Project performance

From the findings it was established that there were low levels of stakeholder participation in AMAKA monitoring evaluation activities. Beneficiary communities are not largely involved in developing performance indicators and setting of performance targets. It is therefore recommended that the project should put in place a mechanism of integrating community indicators within project level indicators providing a more holistic view of the project benefits and strengthen information feedback process between community beneficiaries and project. However caution should be exercised in finding out who should get involved, in what and at what level/stage.

It is also recommended that project progress indicators should be negotiated. Information should only be collected on the indicators that are relevant from the perspective of the different project beneficiaries/ stakeholders.

There is a need to strengthen the PM&E system to include a communication system that allows information to be exchanged between the stakeholders and be interpreted so that it forms a basis for taking appropriate decisions and act as an early warning system to facilitate corrective action.

#### 5.5.2 Community empowerment in PM&E and Project performance

One way to help beneficiary communities appreciate their recognition and to receive feedback from monitoring exercise is to facilitate the organization of performance evaluation forum

occasionally by the client monitoring team. It is believed that each client will be able to assess the growth performance as a feedback to monitoring exercise. This will also serve as a forum to share information on business growth development and capacity building for beneficiary clients.

It is further recommended that the Project should develop a capacity building strategy for participatory monitoring and evaluation. This should include applying diverse tools and methods that can encourage active participation of all project stakeholders such as role plays, stories and identifying local vocabulary for the technical terms.

### 5.5.3 Resource use and accountability in PM&E and Project performance

From the findings, one of the challenges affecting the implementation of a robust participatory monitoring and evaluation was resources needed for a proper implementation, particularly financial resources. It is recommended that every intervention should have a sufficient resources allocated within the budget for participatory monitoring and evaluation activities. This provision needs to be included as part of the proposal rather than treating PM&E as part of regular administrative expenses.

## 5.6 Contributions of the study

The results of this study added new knowledge about participatory monitoring and evaluation and project performance, specifically; the contributions of the study included the following;

The study contributes that engaging project teams in routine monitoring and evaluation activities empowers them with the necessary skills to implement and track their efforts on the projects. It becomes more beneficial to the project especially when they are involved in the project identification, setting of project objectives and performance indicators.

The study revealed that for community led projects to be successful, the project beneficiaries should be at the fore front not only in the participation of the project activities but also in the

tracking of the project progress. The study highlights that adequate mobilization and the promptness of AMAKA project to solicit ideas from communities and sharing of information surmounted to communities overwhelmingly being more engaged and involved in the project activities. AMAKA's adoption of the transport model where circumcision candidates are provided with transport to and from their villages was a result of information sharing between the project hierarchy and feedback from the communities.

The findings of the study further revealed that community beneficiaries were keen to track project performance through taking self-led initiatives to organize and hold routine meetings to discuss project performance as a result of the cohesion created by enabling them participate in the project activities. The work of Village Health Teams in the AMAKA project vividly illustrates this argument.

Additionally, the findings demonstrated that if participatory monitoring and evaluation is deliberately and properly employed and deliberately integrated in the project planning process, it becomes cheaper and cost effective since the communities are given a chance track the progress of their activities. This view is contrary to what the opponents of PM&E opine that it is an expensive and time consuming activity. The AMAKA project revelation of cost saves of $ 4 per circumcision is testimony to the contrary.

## 5.7 Areas for further research

This section suggests areas for further research based on the objectives of the study

### 5.7.1 Community involvement in PM&E and Project performance

A comparative study is recommended to be conducted between projects that do not involve communities in the PM&E process and those that involve them in the process to establish the extent to which projects attain project performance.

More so a further study on how views and feedback from community beneficiaries can be harnessed to improve project performance in public health related projects that require technical skills is recommended to establish whether this improves project performance.

### 5.7.2 Community empowerment in PM&E and Project performance

A comparative study is recommended to be conducted between projects that do not empower community beneficiaries in the PM&E process and those that empower them in the process to establish the extent to which projects attain project performance.

Since this study was conducted in an urban setting, it would be good to carry out a comparative study to ascertain the effect of rural communities' participation in participatory monitoring and evaluation and how it affects project performance. Findings of such a study could enlighten practitioners on best practices of rural communities' involvement.

### 5.7.3 Resource use and accountability in PM&E and Project performance

A similar research may be conducted to ascertain why some projects and project managers are reluctant to employ participatory monitoring and evaluation as a management tool. A thorough examination of the limitations and challenges would inform project managers how to overcome them.

Due to traditional limitations of research, this study was restricted to examining participatory monitoring and evaluation's contribution to project performance; it is therefore, encouraged for other researchers to conduct investigations into other factors that can contribute to project performance to support prudent project management.

## 5.8 Chapter Summary

In this section of the report, the summary of key findings, a discussion of results, conclusions and recommendations made on the basis of salient findings were discussed and presented.

Additionally contributions of the study and proposed areas of further research were presented in this chapter as well.

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# APPENDICES

## APPENDIX I: Questionnaire Guide

**TOPIC:** **PARTICIPATORY MONITORING & EVALUATION AND PROJECT PERFORMANCE.A CASE STUDY OF AMAKA PROJECT OF INFECTIOUS DISEASE INSTITUTE**

**Dear Respondent;**

I am …….. a candidate from Uganda Management Institute (UMI) conducting academic research on "Participatory Monitoring & Evaluation and Project Performance, a case study AMAKA Project Of Infectious Disease Institute". This research is a part of the requirements for the award of Master in Management Studies (Project Planning and Management, of the Uganda Management Institute. The data derived from this study will entirely be kept confidential as well as only used for academic purposes and no personal information will be disclosed.

**Instructions: Please tick appropriately in the boxes provided**

**SECTION A. Background Information**

**A.1 Gender** **Male** ☐ **Female** ☐

| A.2 Category of respondent | Tick | Section description |
|---|---|---|
| Community beneficiary | | Village name…… |
| AMAKA Project employee | | Department…….. |
| Ministry of Health official | | Department…….. |

**A3. Age group (tick appropriate group)**

| 10-14 | 15-19 | 20-24 | 25-49 | Above 50 |
|---|---|---|---|---|
| | | | | |

**A4. Education level (tick appropriate group)**

| None | Primary level | Certificate | Diploma | Above Diploma |
|---|---|---|---|---|
| | | | | |

For the following sections, please tick the appropriate box corresponding to a particular question. The abbreviations to the right hand corner of the questionnaire mean; SD-Strongly D-Disagree, N-Not Sure, A- Agree and SA-Strongly Agree.

| Scale | 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|---|
| | Strongly Disagree | Disagree | Not Sure | Agree | Strongly Agree |

**SECTION B: COMMUNITY INVOLVEMENT IN PARTICIPATORY MONITORING AND EVALUATION AND PROJECT PERFORMANCE**

| **B1.Developing work plans** | **SD** | **D** | **N** | **A** | **SA** |
|---|---|---|---|---|---|
| 1. Stakeholders participate in making work plans for the activities of the AMAKA project. | | | | | |
| 2. Work plans of activities are clear to stakeholders | | | | | |
| 3.Work plans of activities are relevant to stakeholders | | | | | |
| 4.Key stakeholders are informed right from project inception what their participation in M&E would entail | | | | | |
| 5.Stakeholders are involved in needs or problem identification | | | | | |
| 6. Stakeholders participate in setting of priorities for M&E | | | | | |
| 7. Stakeholders participate in setting of targets for M&E | | | | | |
| 8.Stakeholders are jointly involved in setting indicators of progress | | | | | |
| **B2. Data Collection** | **SD** | **D** | **N** | **A** | **SA** |
| 9. Project stakeholders jointly participate in field visits to gather and collect information | | | | | |
| 10. Project stakeholders are involved in annual surveys | | | | | |

| | | | | | |
|---|---|---|---|---|---|
| 11. Project stakeholders are involved in the process of determining on how to collect data | | | | | |
| 12.Project stakeholders determine the tools to be used in collection of data | | | | | |
| 13. Project stakeholders determine the techniques to be used in collection of data | | | | | |
| 14. There is joint measurement of project progress. | | | | | |
| **B3. Communication of M&E results** | **SD** | **D** | **N** | **A** | **SA** |
| 15. Findings from monitoring and evaluation activities are discussed with stakeholders | | | | | |
| 16. Stakeholders are free to request for any information necessary from the AMAKA project for decision making | | | | | |
| 17. Stakeholders are involved in the process of determining who owns the information and findings. | | | | | |
| 18. Stakeholders are involved in the process of determining the use of the information and findings | | | | | |
| 19. Stakeholders are fully involved during dissemination of M&E findings. | | | | | |

**SECTION C: COMMUNITY EMPOWERMENT IN PARTICIPATORY MONITORING AND EVALUATION AND PROJECT PERFORMANCE**

| **C1.Capacity building** | **SD** | **D** | **N** | **A** | **SA** |
|---|---|---|---|---|---|
| 20.Stakeholders are able to improve on their skills to implement the project goals | | | | | |
| 21. Project beneficiaries use their knowledge to propose corrective actions in the program management | | | | | |
| 22. Key stakeholders also involved in the tracking of progress of the project. | | | | | |
| 23. Training is conducted for key stakeholders involved in the implementation and monitoring of AMAKA project activities. | | | | | |
| 24. There is capacity building refresher training for stakeholders who may not have understood clearly the first time of training. | | | | | |
| **C2. Collective learning** | **SD** | **D** | **N** | **A** | **SA** |
| 25. There is learning on how to assess the extent to which the project is successful or not | | | | | |
| 26. The current structure of the project supports stakeholder participation and involvement in the collective learning process. | | | | | |
| 27.Project beneficiaries are all involved in meetings to review project performance | | | | | |
| 28. Feedback from stakeholders is routinely utilized to improve performance. | | | | | |
| **C3. Allocation of roles and responsibilities** | **SD** | **D** | **N** | **A** | **SA** |
| 29. Areas of responsibility/roles played by stakeholders are clearly defined. | | | | | |
| 30. Key stakeholder roles in M&E do not interfere with other's roles | | | | | |
| 31. Reports are jointly written | | | | | |
| 32. Clear roles and responsibilities lead to project performance. | | | | | |

**SECTION D: RESOURCE USE AND ACCOUNTABILTY IN PARTICIPATORY MONITORING AND EVALUATION AND PROJECT PERFORMANCE**

| **D1.Resource budgeting** | **SD** | **D** | **N** | **A** | **SA** |
|---|---|---|---|---|---|
| 33. Budgeting for activities of the project is done together between project staff and key stakeholders. | | | | | |
| 34. Finances are prioritized for M&E activities | | | | | |
| 35. Key stakeholders are given forum to question irregularities on budget and accountability in the implementation of the project. | | | | | |
| **D2. Resource allocation** | **SD** | **D** | **N** | **A** | **SA** |
| 36. Stakeholders are involved in making decisions on budget and resource use in the project. | | | | | |
| 37. Stakeholders ensure funds of the project are used correctly. | | | | | |
| 38. Financial resources are planned for and allocated properly. | | | | | |
| 39. Resources are used for what they have been budgeted for. | | | | | |
| **D3. Resource sharing** | **SD** | **D** | **N** | **A** | **SA** |
| 40. Stakeholders and beneficiaries of the AMAKA project receive tools and logistics to carry out their activities. | | | | | |
| 41.There is joint accountability of resources used | | | | | |
| 42. AMAKA project staff coordinate with community leaders and beneficiaries on the use of resources for activities in the communities | | | | | |
| 43. Resource sharing is done to the satisfaction of all stakeholders. | | | | | |

**SECTION E: PROJECT PERFORMANCE**

| **E1.Project cost** | **SD** | **D** | **N** | **A** | **SA** |
|---|---|---|---|---|---|
| 44. Projects are accomplished within the stipulated budget. | | | | | |
| 45. Projects that are not completed within the stipulated budget have poor quality outputs. | | | | | |
| 46. PM&E improves adherence to the project schedule | | | | | |
| 47.The cost of PM&E is worth the demand for M&E | | | | | |
| 48. Project finances are always enough and adequate | | | | | |
| **E2. Stakeholder satisfaction** | **SD** | **D** | **N** | **A** | **SA** |
| 49. Stakeholders interest can best be demonstrated when all stakeholders jointly monitor project progress | | | | | |
| 50.Understanding stakeholder needs is vital in the success of this program | | | | | |
| 51.Stakeholders are satisfied with the level of involvement in the project | | | | | |
| 52. Stakeholders are treated with respect & always consulted when making decisions | | | | | |
| 53.Stakeholders measure the performance of the project as per their expectations | | | | | |
| 54. AMAKA project produces outputs that match the needs of the stakeholders. | | | | | |
| 55. AMAKA project's performance is viewed by stakeholders as successful | | | | | |
| **E3. Project relevance** | **SD** | **D** | **N** | **A** | **SA** |
| 56. The objectives of the AMAKA project are still valid. | | | | | |
| 57. The activities and outputs generated by AMAKA project are consistent with the overall goal. | | | | | |
| 58. The activities and outputs generated by AMAKA project are consistent with the intended impact | | | | | |
| 59. Project objectives are clearly understood by all stakeholders. | | | | | |

## APPENDIX II: Interview Schedule for Project Core Team

Participatory monitoring and evaluation and project performance

Code……

Date of interview……

Respondents Particulars

Gender: Male ☐ Female ☐

1. Do you have work plans of activities? Yes ☐ No ☐

2. Who do you plan your work with?

3. Are there clear standards which need to be followed? For each task, how are they given?

4. How do you select the stakeholders to involve in M&E?

5. The project status reports are clear, concise and contain enough information to determine project progress

5. What type of reports do you submit after fulfilling your tasks?

6. How do you receive feedback on your performance?

7. What do you do with the feedback you get?

8. Do you make evaluations for the work that you do? Yes ☐ No ☐

9. In your view are project results obtained

   a) Within the expected timelines?

   b) Within the financial budget?

   c) With the expected quality?

10. Why is community participation important in monitoring and evaluation?

11. To what extent are the objectives of the project still valid?

12. In your opinion do you think that the activities and outputs of the project are consistent with the overall goal?

13. Are the activities and outputs of the project consistent with the intended impact?

## APPENDIX III: Questionanire for Selected Beneficiaries and Stakeholders

Participatory monitoring and evaluation and project performance

Code……

Date of interview……

**<u>Instructions</u>: Please tick appropriately in the boxes provided**

**<u>SECTION A. Background Information</u>**

**A.1 Gender Male ☐ Female ☐**

| **A.2 Category of respondent** | **Tick** | **Section description** |
|---|---|---|
| **Community beneficiary** | | **Village name……** |
| **Local leader** | | **Village name……** |

**A3. Age group (tick appropriate group)**

| **10-14** | **15-19** | **201-24** | **25-49** | **Above 50** |
|---|---|---|---|---|
| | | | | |

**A4. Education level (tick appropriate group)**

| **None** | **Primary level** | **Certificate** | **Diploma** | **Above Diploma** |
|---|---|---|---|---|
| | | | | |

For the following sections, please tick the appropriate box corresponding to a particular question. The abbreviations to the right hand corner of the questionnaire mean; SD-Strongly D-Disagree, N-Not Sure, A- Agree and SA-Strongly Agree.

| Scale | 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|---|
| | Strongly Disagree | Disagree | Not Sure | Agree | Strongly Agree |

| | SD | D | N | A | SA |
|---|---|---|---|---|---|
| 1.My views are represented at the higher level | | | | | |
| 2. Feedback is shared with the beneficiaries | | | | | |
| 3.Iam involved in Circumcision activities in my area | | | | | |
| 4.Circumcision team visits clients after Circumcision | | | | | |
| 5. Village health teams always inform us about Circumcision. | | | | | |
| 6.We are always trained on the benefits of Circumcision | | | | | |
| 7. Feedback from stakeholders is routinely utilized to improve performance. | | | | | |
| 8. Beneficiaries are made to aware of their responsibilities in regards to circumcision. | | | | | |
| 9. My background information is shared with the health team before Circumcision. | | | | | |
| 10. Findings from physical examination and HIV tests are shared and discussed with stakeholders | | | | | |
| 11. Pre-health talk Circumcision is done | | | | | |
| 12. After Circumcision am given relevant information for future reference | | | | | |
| 13. Clear roles and responsibilities lead to project performance. | | | | | |

**SECTION B: PROJECT PERFORMANCE**

| **B1.Project cost** | **SD** | **D** | **N** | **A** | **SA** |
|---|---|---|---|---|---|
| 14. Projects are accomplished within the stipulated budget. | | | | | |
| 15. Projects that are not completed within the stipulated budget have poor quality outputs. | | | | | |
| 16. PM&E improves adherence to the project schedule | | | | | |
| 17. The cost of PM&E is worth the demand for M&E | | | | | |
| 18. Project finances are always enough and adequate | | | | | |
| **B2. Stakeholder satisfaction** | **SD** | **D** | **N** | **A** | **SA** |
| 19. Stakeholders interest can best be demonstrated when all stakeholders jointly monitor project progress | | | | | |
| 20.Understanding stakeholder needs is vital in the success of this program | | | | | |
| 21.Stakeholders are satisfied with the level of involvement in the project | | | | | |
| 22. Stakeholders are treated with respect & always consulted when making decisions | | | | | |
| 23. The project status reports are clear, concise and contain enough information to determine project progress | | | | | |
| 24.Stakeholders measure the performance of the project as per their expectations | | | | | |
| 25. AMAKA project produces outputs that match the needs of the stakeholders. | | | | | |
| 26. AMAKA project's performance is viewed by stakeholders as successful | | | | | |
| **B3. Project relevance** | **SD** | **D** | **N** | **A** | **SA** |
| 27. The objectives of the AMAKA project are still valid. | | | | | |
| 28. The activities and outputs generated by AMAKA project are consistent with the overall goal. | | | | | |
| 29. The activities and outputs generated by AMAKA project are consistent with the intended impact | | | | | |
| 30. Project objectives are clearly understood by all stakeholders. | | | | | |

## APPENDIX IV: Documentary Review Check-List

| Category | Tick |
|---|---|
| Reports | |
| Minutes of the meetings | |
| Evaluations findings | |
| M&E manual | |
| Budgets | |
| Strategic plans | |
| Work Plans | |
| Training manuals | |

**Analysis criteria:**

1. Check for relevance of contents of document for this study

2. Verify authenticity

3. Check for issues on PM&E and performance

4. Identify salient issues

5. Extract relevant information.

## APPENDIX V: Authority Letter from UMI

## APPENDIX VI: Krejcie & Morgan (1970)

| N | S | N | S | N | S | N | S | N | S |
|---|---|---|---|---|---|---|---|---|---|
| 10 | 10 | 100 | 80 | 280 | 162 | 800 | 260 | 2800 | 338 |
| 15 | 14 | 110 | 86 | 290 | 165 | 850 | 265 | 3000 | 341 |
| 20 | 19 | 120 | 92 | 300 | 169 | 900 | 269 | 3500 | 246 |
| 25 | 24 | 130 | 97 | 320 | 175 | 950 | 274 | 4000 | 351 |
| 30 | 28 | 140 | 103 | 340 | 181 | 1000 | 278 | 4500 | 351 |
| 35 | 32 | 150 | 108 | 360 | 186 | 1100 | 285 | 5000 | 357 |
| 40 | 36 | 160 | 113 | 380 | 181 | 1200 | 291 | 6000 | 361 |
| 45 | 40 | 180 | 118 | 400 | 196 | 1300 | 297 | 7000 | 364 |
| 50 | 44 | 190 | 123 | 420 | 201 | 1400 | 302 | 8000 | 367 |
| 55 | 48 | 200 | 127 | 440 | 205 | 1500 | 306 | 9000 | 368 |
| 60 | 52 | 210 | 132 | 460 | 210 | 1600 | 310 | 10000 | 373 |
| 65 | 56 | 220 | 136 | 480 | 214 | 1700 | 313 | 15000 | 375 |
| 70 | 59 | 230 | 140 | 500 | 217 | 1800 | 317 | 20000 | 377 |
| 75 | 63 | 240 | 144 | 550 | 225 | 1900 | 320 | 30000 | 379 |
| 80 | 66 | 250 | 148 | 600 | 234 | 2000 | 322 | 40000 | 380 |
| 85 | 70 | 260 | 152 | 650 | 242 | 2200 | 327 | 50000 | 381 |
| 90 | 73 | 270 | 155 | 700 | 248 | 2400 | 331 | 75000 | 382 |
| 95 | 76 | 270 | 159 | 750 | 256 | 2600 | 335 | 100000 | 384 |