Addis Ababa University College of Business and Economics School of Commerce Department of Business Administration and Information System (BAIS)

Assessing Project Monitoring & Evaluation practices in Addis Ababa City Administration Health Bureau the case of Centre for Diseases Control (CDC) project.

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Advisor: - Teklegiorgis Assefa (Asst.Professor)

June, 2018

Addis Ababa, Ethiopia

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A Project Work Submitted to Addis Ababa University School of Graduate studies, In Partial Fulfilment of the Requirements for the Award of Master of Arts Degree in Project Management

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CERTIFICATION

ADDIS ABABA UNIVERSITY, SCHOOL OF GRADUATE STUDIES

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External Examiner Signature

DECLARATION

I declare that this research based project work on Assessing Project M&E practice in Addis Ababa City Administration Health Bureau the case of CDC project: Strengthening Local Ownership for the Sustainable Provision of HIV/AIDS Services is my own original work with assistance and guidance from my Advisor and not submitted before for any institution and any purpose. I further declare that all the sources used in this research report have been properly recognized and acknowledged as in-text- citation and reference list.

Declared by:	**Confirmed by:**
Sintayehu Ayele	Teklegiorgis Assefa (Asst. Professor)
Candidate	*Advisor*
Signature: _____	Signature: _____
Date: _____	Date: _____

Addis Ababa University

June, 2018

ACKNOWLEDGEMENTS

First and for most I would like to thank the Almighty God Who raised me up from the scratch to this level and always lighten my way forward by His Blessings. This project work is realized through the background knowledge acquired from the university and I would like to thank all the instructors for providing me the necessary skill and knowledge to accomplish this task. Special thank goes to Teklegiorgis Assefa(Asst. Professor), my course instructor and advisor who had great contribution in motivating and advising me during this research project work.

This project work wouldn't have been conducted without the support of many others. In this regard, the researcher would like to express deep appreciation for the AACAHB CDC project M&E team at bureau and sub city level, for their valuable inputs, sharing experience and vital supports for this study to come to completion.

I am grateful to my dear classmates "the cohesive team" members Ataklti, Bereket, Esayas, G/Wahid, Tibebu & Yewdalem for all our togetherness and brotherhood care we have shared.

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Acronyms

M&E	Monitoring & Evaluation
CDC	Centre for Diseases Control
PEPFAR	US- Presidents Emergency Fund for AIDS Relief
HMIS	Health Management Information System
HIV	Human Immunity Virus
AIDS	Acquired Immune Deficiency Syndrome
TB	Tuberculosis Bacillus
DQA	Data quality Assurance
RDQA	Routine Data Quality Assurance
LQAS	Lot Quality Assurance Sampling
PRM	Performance Review Meeting
RBM	Result Based Management
AACAHB	Addis Ababa City Administration Health Bureau
SMART	Specific Measurable Attainable Result oriented Time bound
PMU	Project Management Unit
ANC	Antenatal Care
PMTCT	Prevention of Mother to Child Transmission of HIV
STI	Sexually Transmitted Disease
MoFED	Ministry of Finance & Economic Development
UNFPA	United Nations Population Fund
UNAIDS	The Joint United Nations Program on HIV/AIDS
MERG	Monitoring, Evaluation & Reporting Guide
IFRCS	International Federation of Red Cross Red Crescent Societies
FMoE	Federal Ministry of Education
.HCT	HIV Counselling & Testing

ART Anti-Retroviral Therapy

FHI Family Health International

USAID United Sates Agency for International Development

NGOs Non-Governmental Organizations

FMoH Ethiopian Federal Ministry of Health

ICAP International Centre for HIV/AIDS Prevention

ABSTRACT

This study is aimed to assess the project M&E practice of AACAHB in implementing CDC/PEPFAR funded project on local capacity building with a particular focus on strengthening monitoring and evaluation of HIV/AIDS services within the Addis Ababa city health system. The current practice has been assessed in lights of the best project M&E practices as acknowledge in many literatures. The study adopted a descriptive research design and utilizes a qualitative method to collect and analyse data on project M&E practices. Semi structured and open ended interview questions as primary sources and document review as secondary source are used. The responses of study participants are organized for analysis in the form of narratives by doing possible triangulation. The findings show that project M&E is not consistently practiced and the role of M&E is narrowly understood to the level of data collection quality assurance than the broader strategic project issues. The key factors that affect effective M&E practice are lack of project management knowledge and skill from top management, technical skill gap in M&E team, non-institutionalized M&E system and the project structure being functional. Innovative project M&E practices recommended for overall project success by considering M&E beyond data collection to the strategic project issues. The project team has to be organized under separate project management unit that the existing organizational functional structure. Capacity building for top management and M&E team on project management and M&E practices respectively. The M&E system should be institutionalized at all level of the health sector to ensure local ownership and sustainability after donor fund cease out.

Keywords: *M&E practice, Capacity Building, Sustainability, HIV/AIDS, Functional Structure*

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CHAPTER ONE

INTRODUCTION

1.1 Background of the Study

According to PMBOK guide (PMI, 2013) a project is a temporary endeavour undertaken to create a unique product, service, or result. Projects are unique undertaking with specified human and financial resources and time allocated to get something of value. In order to get what organizations intend to have as a result of the intervention, they have to manage well all the project activities and the inputs. So understanding the unique characteristics of a project and the need to manage these, there is a need to apply project management knowledge, tools and techniques to reap the desired result of the intervention. Project monitoring and evaluation is a component of the three core management functions namely planning, implementation and controlling. Under the controlling section we have the monitoring and evaluation components. So project monitoring and evaluation practice is ideal for effective and efficient project management and implementation success. Project monitoring and evaluation practice helps to learn and correct from what is happened by measuring changes over time and how to sustain these positive changes to remain as organizational cultures. As Berhanu et al, (2010) a well-functioning monitoring and evaluation system is a critical part of good project management and accountability.

Project control is made up of Monitoring and evaluation (M&E), which is a crucial component of any successful management activity. Managers need the information generated to improve their management, and donors and stakeholders need results to guarantee accountability (S, Cicmil, and D, Hodgson, 2006).

Monitoring and evaluation of development interventions provides government officials, funders, and civil society with better means for learning from past experience, improving service delivery, planning and allocating resources, and demonstrating results as part of accountability to key stakeholders. Monitoring and evaluation helps to bridge the past, present and future knowledge about a specific intervention. Monitoring and evaluation is a critical and donors often required means of determining whether or not development assistance programs are achieving their planned targets (USAID, 2012).

1.2 Background of the study project

AACAHB (Addis Ababa City Administration Health Bureau) is implementing a project called strengthening local ownership for the sustainable provision of HIV/AIDS services in partnership with CDC-PEPFAR (Centre for Diseases Control-US President's Emergency

Plan for AIDS Relief) since 2012 in the city administration. The project is part of the UNAIDS plan to end new HIV infection by the year 2030. So HIV testing (prevention), ART (Anti-Retroviral Treatment) initiation, adherence to treatment (health improvement of patients taking ART), capacity buildings and strengthening the health management information system for informed decision making are the main concerns of the project. To meet these objectives the bureau hired seconded project staffs under the existing organizational functional structure these includes health professionals, IT professionals, M&E professionals and many other administrative staffs at different hierarchical levels of the health sector .

The Ethiopian national responses to the HIV /AIDS epidemics have been guided by national strategic plans the current one being the Strategic Plan II for intensifying multi sectorial HIV and AIDS response in Ethiopia. In Addis Ababa city, addressing particularly the issues under SPM II thematic area creating enabling environment such as capacity building, leadership and governance and coordination and partnership and those issues under the thematic area monitoring and evaluation of the multi-sectorial response to HIV/AIDS focusing on response in inputs, processes, outputs, outcomes, and impacts plus other health service delivery related issues that fall under the jurisdiction of AACAHB. Such huge responsibility obviously requires availability of adequate expertise and resources to independently, efficiently and effectively execute the tasks leading to the achievement of program goals. Hence, leveraging the capacity of the AACAHB so as to enable it achieve the desired regional objectives of the SPM II with the help of the current CDC_ PEPFAR project is justified.
The overarching goal of the project is to leverage local ownership and capacity building for planning, managing, coordinating, and implementing HIV prevention, treatment, and care and support activities in Addis Ababa region, Ethiopia (*AACAHB sept.2017 final performance report*).

The focus of this study is on the thematic area of the project's strengthening the health management information system to generate and use strategic information for project success and ensuring local ownership by assessing the project M&E practice currently in use.

1.3 Statement of the problem

M&E is an old concept but a new profession, that has been practiced more in developed countries than developing countries & in non-government organizations than government organizations. But currently rapid move from conventional to RBM approach by development actors makes M&E very important. In Ethiopia, most of the government organizations do not use M&E system in appropriate manner for their projects (ECPE 2010).

Even though the Ethiopian health sector is the highest recipient of donors fund it face challenges in producing data of sufficient quality to permit the regular tracking of progress in up scaling health interventions and strengthening health systems. The Ethiopian MoH, HMIS strategic plan (2008) in the health sector identified the following weakness of the M&E to supply reliable data:

- Incomplete institutionalization
- Unstandardized data collection
- Weak information use and
- Limited resource for M&E

The reality in AACAHB is not a different and an intervention under the thematic area of capacity buildings and strengthening the health management information system for informed decision making have been implemented by the help of CDC project fund as a part.

Project management incorporates having a defined start and end point from the beginning that can help to make correction back to track and to measure changes as well as to learn from. This justifies the need to have a monitoring and evaluation plan as an integral part of the project management plan. The need to link project management practice with the knowledge areas and with PM process groups will be the centre of thought. The need to understand the unique character of a project helps to differentiate project activities from the existing routine activities and demands execution in the sense of urgency, quality and efficiency. The need to have a project management team from all functional units that is capable of analysing the progress of the project, challenges faced and present to the high level decision makers for immediate action. According to (PMI, 2013) project activities are different from the existing routine activities of organization and needs some sort of urgency to meet the requirements of schedule, quality and cost constraints in doing so effective resource utilization can be assured.

A failure to distinguish project activities from routine organizational activities and schedule slippage leads the bureau to poor utilization of financial resources at the end of each budget

year and for unnecessary rush for liquidation at the end. So is the bureau leading the project in the real sense of project management practice in general and specifically are the M&E practice in place is in a position to contribute for the success of project goals are worth assessment. Hence, Sound M&E system for donor funded projects is important to create accountability, effective resources utilization, quality data for decision, sustainability and ownership in the long run, the main focus of the study is to assess the M&E practice of the project.

1.4 Basic Research Questions

The study is guided by the following research questions:

- What looks like the current project M&E practice of the bureau for the CDC project to end up the project to accomplish its goals?
- What key factors contribute for effective Project M&E practice?
- What are the underlying factors that hinder the project not to implement the real sense of project management and M&E practices in particular?

1.5 Objectives of the Study

The general objective of the study is to assess the project M&E practice of AACAHB with respect to CDC project in light of the best project M&E practices.

1.5.1 Specific objectives

- To identify the current project monitoring and evaluation practices of AACAHB CDC project.
- To explore key factors those contribute for effective project M&E activities in implementing the project under the Bureau.
- To identify the major gaps and forward alternative recommendations on M&E practice in line with the knowledge areas and process groups of project management that can result in efficiency, effectiveness and insure sustainability.

1.6 Significance of the study

The significance of this study is to relate the theoretical knowledge of project monitoring and evaluation with the real practice in donor funded development project under government organizations. The findings and discussion presented in this study will benefit the project team and the project implementing organization to get lesson on how to manage projects in

functional structure. In addition to that the reflection created by this work will call researchers to conduct further investigation on project management in general and monitoring and evaluation practices in particular of donor funded development project under government organizations.

1.7 Scope of the study

The scope or delimitation of this study will only be assessing the project monitoring and evaluation practice of AACAHB with respect to CDC_PEPFAR funded project called Strengthening Local Ownership for the Sustainable provision of HIV/AIDS Services. So the main focus is on M&E practice since the start of the project from 2012 but what we monitor & evaluate are the components of activities, inputs, outputs, outcomes may allow the study to touch the other knowledge areas of PM like human resources management and finance.

1.8 Limitations of the study

The limitations of the study due to huge time constraints are taking a single project of the bureau, small sample size of few project personnel working on the project at M&E position. Unpublished internal reference materials will be used to triangulate the accuracy of those small sample interview responses.

1.9 Definitions & concepts

Monitoring: Monitoring is the continuous checking of the main elements of project such as: inputs, activities and outputs, through regular reporting and supervision. Checking the planned implementation against the actual implementation, in order to be able to report on how the project is progressing and if there is need for corrective action and to facilitate decision making.

Evaluation: Evaluation is the periodic assessment that could be end term or midterm to decide whether the project goal and objectives met or not.

Project*:* is a temporary endeavor undertaken to create a unique product or service. Temporary means the project has a definite ending point and unique means that the product or service differs in some distinguishing way from all similar products or services (PMI, 1996, p.4).

Project management: is the application of knowledge, skills, tools, and techniques to project activities to meet the project requirements. Project management is accomplished through the appropriate application and integration of the project management processes identified for the project. According to PMBOK Guide, Project management enables organizations to execute projects effectively and efficiently (PMI, 2013).

Practice: Practice is the actual application or use of monitoring and evaluation system within the AACAHB in general & the project in particular.

1.10 Organization of the Study

This project work has been organized under five chapters. The first chapter consists of components of the research proposal namely the background, the problem statement, objectives, the research questions, significance of the study, the scope, the limitation and definition of concepts. Chapter two and three comprises the literature review and the research methodology parts. Results and discussions will be presented and discussed in chapter four. The last chapter contains summary of findings, conclusion and recommendation that are drawn from the results and discussion part.

CHAPTER TWO

LITERATURE REVIEW

This chapter presents the related literatures on the study so as to have an insight in to the research topic and briefly expose the readers to some of the major areas of the subject matter under consideration. The chapter is presented under the following sections.

2.1 Theoretical Literature Review

2.1.1 Overview

Project monitoring and evaluation is the controlling process group of project management tools for informed decision making and enhancing accountability. Despite their resemblance, monitoring and evaluation are different. This section deals with the review of related literature gathered from different secondary sources such as published and unpublished articles, books and related websites. In this regard, efforts were exerted to include as much significantly related literatures as possible by reviewing available documents that clearly exhibits points, targeting at the attainment of the research objectives. To this end, core concept like project monitoring, project evaluation, methods and techniques of project monitoring and evaluation, importance of monitoring and evaluation, historical point of view of monitoring and evaluation system, emergence of monitoring and evaluation worldwide, drivers of monitoring and evaluation worldwide, monitoring and evaluation practices, the need for capacity building on HIV project M&E, purpose of HIV project M&E and levels of HIV project M&E were presented and analysed; and much effort has also been made to include available empirical literature review.

2.1.2 What is Project Monitoring

Monitoring is the routine collection and analysis of information to track progress against set plans and check compliance to established standards. It helps identify trends and patterns, adapt strategies and inform decisions for project/programme management (IFRCS M&E guide, 2010)

Monitoring is the routine tracking and reporting of priority information about a project, its inputs and intended outputs, outcomes and impacts (UNAIDS MERG, 2008a).

Program Monitoring is the systematic documentation of aspects of program performance that are indicative of whether the program is functioning as intended or according to some appropriate standard. It may be related to program processes, program outcomes or both (Rossi, et al., 2004).

Monitoring continuously tracks performance against what was planned by collecting and analysing data on the indicators established for monitoring and evaluation purposes. It provides continuous information on whether progress is being made toward achieving results (outputs, outcomes, and goals) through record keeping and regular reporting systems. Monitoring looks at both program processes and changes in conditions of target groups and institutions brought about by program activities (UNFPA, 2010)

Common concepts in definitions of monitoring

The above definitions though differ in the way they are stated, share some very important concepts that lay grounds for the design and implementation of program monitoring activities for different social programs including the prevention and control of HIV.

Monitoring is a systematic process

Monitoring programs requires a set of predetermined methods. Program implementers need to develop procedures on how data will be captured, collected, analysed and used while developing their monitoring and evaluation plan. Haphazardly conducted observations to program components won't allow organizations to meet the general purpose of program monitoring.

Monitoring is a continuous process

A typical feature of program monitoring is "follow-up" of program performance over a period of time. Monitoring requires repeated observations of aspects of a program by following comparable methods of measurement. A onetime survey or any other method of data collection on a program cannot be meaningfully interpreted to serve a purpose of program monitoring.

Monitoring involves collection, analysis, interpretation and use of data

Program monitoring goes beyond simple collection of program related data. The data has to be analysed and interpreted, preferably starting from its point of collection, and get used to inform decision making. A common pitfall in M&E systems of social programs is focusing only on collection and reporting of data. The return from investments on M&E activities comes only after the use of information for action; data that is not used at the end is a simple wastage of limited M&E resources.

Monitoring involves the comparison of performance with a set of expectations

Tracking "progress" is an essential concept in definitions of program monitoring. This requires comparison between what is actually achieved, performance, with a certain set of expectations. Expectations are commonly stated as program goals, objectives, targets and other related descriptions of the desired future. Standards are also used as references for

program monitoring. The presence of well described program objectives and service related standards is therefore a requirement for an effective program monitoring.

Monitoring is a systematic and continual collection, analysis, interpretation and use of data on key aspects of an intervention and/or its expected results to inform decision making.

2.1.3 What is project evaluation

According to MoFED (2008) and Berhanu et al., (2010) project evaluation can be defined as a process that attempts to determine, as systematically and objectively as possible, the achievement of result in light of relevance, efficiency, effectiveness, impacts and sustainability of project activities. It is the process of determining the worth or significance of a development activity, policy or program to determine the relevance of objectives, the efficiency of design and implementation, the efficiency of resource use, and the sustainability of results. An evaluation should incorporate lessons learned into the decision-making process of both partner and donor.

Like project monitoring, project evaluation is also defined in many different ways by different scholars and organizations. Some of these definitions are presented below to provide a good insight of how the M&E community defines the word, before introducing a working definition for this manual.

Project evaluation is a time-bound exercise that attempts to assess systematically and objectively the relevance, performance and success of on-going and completed programs and projects. Evaluation is undertaken selectively to answer specific questions to guide decision-makers and/or program managers, and to provide information on whether underlying theories and assumptions used in project development were valid, what worked and what did not work and why (UNFPA, 2010).

Project evaluation is the application of social research methods to systematically investigate the effectiveness of social intervention programs in ways that are adapted to their political and organizational environments and are designed to inform social action in ways that improve social conditions (Rossi, et al., 2004).

To evaluate consists fundamentally in making a value judgment regarding an intervention, a service or regarding any one of their components, purposing to help in decision making (Contandriopoulos et al., 1997).

The working definition of evaluation is a systematic process of data collection and analysis, about activities and /or effects of a program /project, looking to provide explanations for

observed level of program implementation or changes in social conditions under intervention with the purpose of informing decisions.

2.1.4 Relationship between monitoring and evaluation

The concepts monitoring and evaluation are interrelated to each other in different ways.

In most instants, the words are used together rather than one at a time. The relationship between the two concepts is mainly related to three attributes: purpose, methods and Complementarity.

Table 1: Relationship between Monitoring and Evaluation.

Characteristic	Relationship between M&E
Purpose	Both monitoring and evaluation have a primary purpose of improving the quality of decisions at different levels by furnishing relevant information in a timely manner.
Methods	In both cases, there is a process of collecting, analysing, interpreting and using program related data.
Complementarity	In practice, monitoring and evaluation activities are implemented in an integrated manner. Activities commonly referred as "Monitoring" usually include some explanatory components which are theoretically features of evaluation. Evidences from program monitoring describe situations and evaluations explain observed patterns, together providing the full picture of how a program is functioning. Program evaluations also use most of the data generated through routine monitoring

Source: Adopted from FMoE planning monitoring & evaluation training manual, June, 2013.

2.1.5 Differences between monitoring and evaluation

Despite the relationship there exists between monitoring and evaluation, the two concepts are distinct. Table 2 summarizes the differences between the two concepts.

Table 2: Differences between Monitoring& Evaluation**.**

Attributes	Monitoring	Evaluation
Frequency	Continuous	Episodic
Objective	Describing	Explaining
Method	Follows trends, compare actual performance with targets	compare achievements with counterfactual
Performed by	Mostly internal	Internal & external
Uses	Alerts when to take action	Provides detailed information on what types of actions to take

Source: Adopted from FMoE planning monitoring & evaluation training manual, June, 2013

2.1.6 Commonly Used Terms in Monitoring and Evaluation

The most frequently discussed terms in M&E arise from the application of concepts of monitoring and evaluation to different components of programs/projects. There are five elements commonly considered as components of a program's logic model or simply a program. These are inputs, activities, outputs, outcomes and impacts. The application of monitoring and evaluation to these different components of a program makes up the different categories of M&E activities. In this section definitions of these commonly discussed concepts will be provided.

Table 3: Project M&E components, definition and example.

Program Components	Definition	Examples
Inputs	Resources dedicated to executing program activities including human, technical, financial & other material resources.	.Adherence counsellors, M&E officers, HCT counsellors, HIV test kits, Condoms...etc.
Activities	Program procedures that are executed to obtain desired effects.	Providing HIV counselling and Testing, Distributing condoms, providing ART
Outputs	Automatic consequences of activities performed and resources utilized	Number of people tested for HIV, Number of condoms distributed, Number of people initiated ART
Outcomes	Effects (intermediate) expected among target populations as a result of receiving interventions in a program	Change in attitude, Condom utilization
Impacts	Ultimate effect expected among target populations as a result of receiving interventions in a program	Reduced incidence of HIV, Reduced rate of unwanted pregnancy & HIV related death

Source: Adopted from FMoE planning monitoring & evaluation training manual, June, 2013.

2.1.7 Methods and techniques of project monitoring and evaluation

According to Hunter (2009) and MoFED (2008) project monitoring and evaluation methods include keeping project records, formal surveys, interviews, direct observation, focus-group discussions and mapping. The project evaluation and review technique organize schedules and coordinates all project events in the form of a network chart.

2.1.8 Steps to conduct project monitoring and evaluation

According to Hunter (2009) there are six major steps to be followed in project monitoring and evaluation process. These include identifying the purpose and scope of the monitoring and evaluation system, plan for data collection and management, plan for data analysis, plan for information reporting and utilization, plan for monitoring and evaluation of human resources and capacity building and prepare the monitoring and evaluation budget. Berhanu et al., (2010) added that select indicators at different level of performance chain, set baselines and targets, collect data on indicators about inputs, activities and results, analyse and compare progress against baseline and targets, identify deviations from work plans, explain causes of deviations and share results with others.

2.1.9 Monitoring and evaluation practices

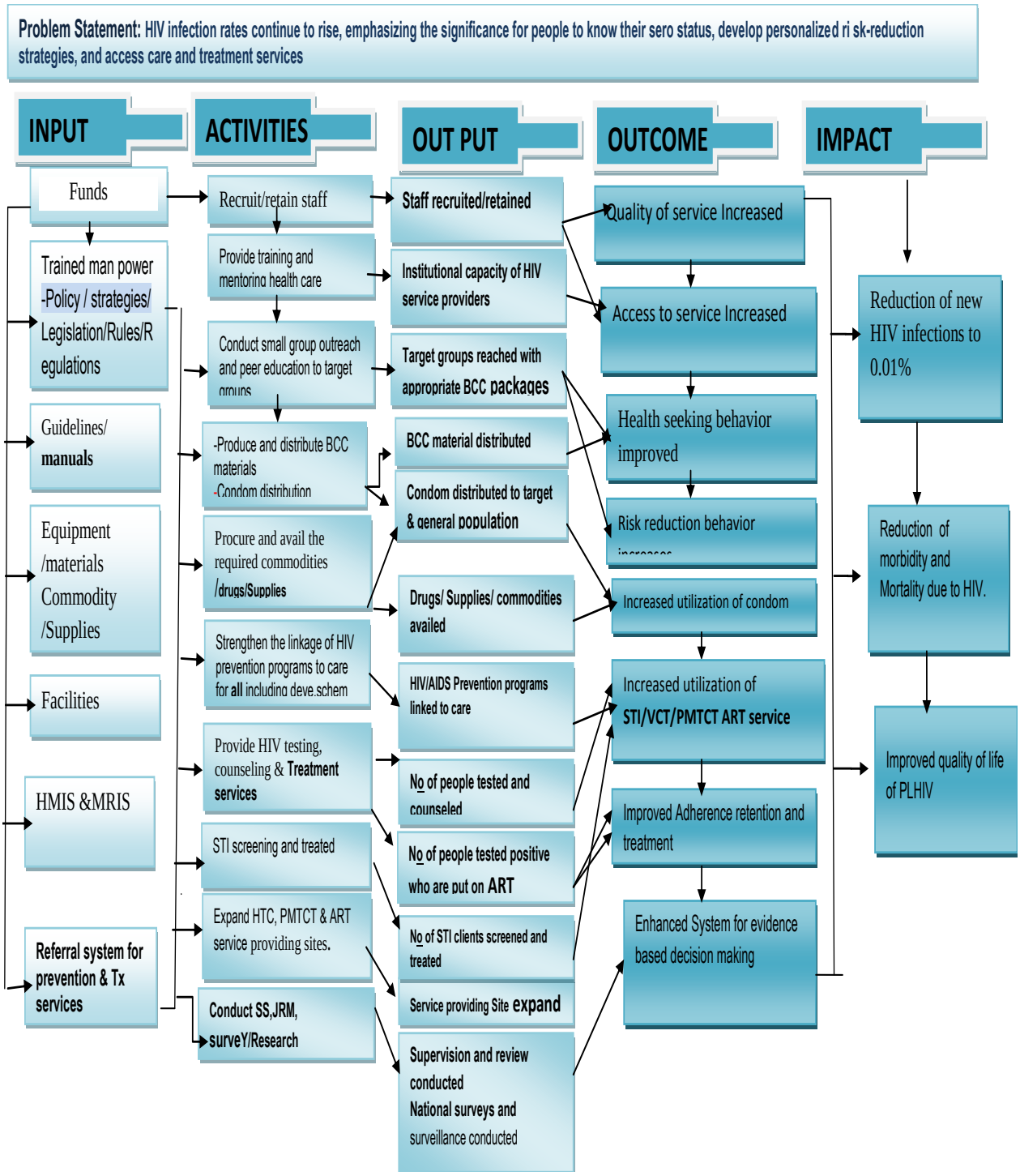
Monitoring and evaluation programs have become a big industry within the development sector, but practices seem less developed with regard to government sector interventions (Joitske et al., 2009). Joitske et al. (2009) describe terms such as—impact, performance, results and accountability have assumed a new prominence in M&E in recent years. Non-government organizations (NGOs) have a good practice and experience on M&E system as compared to government organizations (Ermias, 2007).

How to implement M&E system? Norman (2005) describe the experience of how to implement M&E system, with the framework for the M&E system developed, and if an indicator matrix has been drafted, the first have been taken towards implementing a M&E system for a project. Often in the routine administrative systems, for example the financial system, many of the elements needed for monitoring are in less as well. But each project is specific, and almost certainly, training for staff is necessary if the M&E system is to be successfully implemented. Norman (2005) makes clear that resources are needed for implementing M&E activities. These are both human resources and financial resources. And some other material resources are also necessary, although many of these things are likely to be available in a project for use in other activities as well as in M&E. Generally, the following are the best practices associated with monitoring and evaluations.

I. Monitoring and evaluation plan: The project should have a monitoring and evaluation plan. The plan should be prepared as an integral part of project plan and design (Palestinian Academic Society for the Study of International Affairs [PASSIA], 2004 and McCoy, Ngari and Krumpe, 2005). The integration is for clear identification of project objectives for which performance can be measured.

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

Fig. 1 Typical Logical Frame work of national HIV/AIDS Project M&E



Source: FMoH National HIV /AIDS M&E logical framework 2015.

III. Monitoring and evaluation budget: The project budget should provide a clear and adequate provision for monitoring and evaluation activities. A monitoring and evaluation budget can be clearly delineated within the overall project budget to give the monitoring and evaluation function the due recognition it plays in project management success (McCoy et al., 2005). Some authors argue for a monitoring and evaluation budget to be about 5 to 10 % of

the total budget (Kelly and Magongo, 2004). The intention with this practice is not to be prescriptive of the percentage that is adequate, but to come up with sufficient funds to facilitate the monitoring and evaluation activities. Provision of a budget for monitoring and evaluation ensures that the monitoring and evaluation activities take place when they are due. It also ensures that monitoring and evaluation are not treated as peripheral function.

IV. Schedule of monitoring and evaluation: The monitoring and evaluation activities of the project should be included in the project schedule so that they are given the due importance they require, not only done at the whims of the project manager (Handmer and Dovers, 2007; and McCoy et al., 2005).

V. Individuals for monitoring and evaluation activities: There should also be an individual who is directly in charge of the monitoring and evaluation as a main function (Kelly and Magongo, 2004) and an identification of different personnel for the different activities of the monitoring and evaluation such as data collection, analysis, report writing, dissemination of the monitoring and evaluation findings (AusAID, 2006 and McCoy et al., 2005).

VI. Specification of the frequency of data collection: There should be a clear specification of how often monitoring and evaluation data is to be collected and from whom. There should also be a specification of a schedule for monitoring and evaluation reports to be written (Walter, 2014). The monitoring should be done regularly in order to be able to track the project and identify problems early enough before they go out of hand. The regularity of monitoring could be a function of the size of the project, but a monthly frequency would be adequate, monitoring every 3 months would still be acceptable (AusAID, 2006). The monitoring would involve collecting data, analysing and writing a report at the specified frequency.

VII. Stakeholder involvement: Involvement of all stakeholders (beneficiaries, implementation staff, donors, wider communities) in the monitoring and evaluation process of the project is very important. Participatory approach to monitoring and evaluation is viewed as an empowerment tool for the beneficiaries and other stakeholders of project who in most cases are not consulted in this function. It is also demonstration of downward accountability i.e. accountability to the beneficiaries. There is a lot of emphasis on upward accountability (Aune, 2000). This obsession with upward accountability creates a barrier between the project and other stakeholders in terms of monitoring and evaluation, this result in the process being geared towards satisfying the demands of the donor at the expense of the

other stakeholders. Involvement of the beneficiaries in monitoring and evaluation gives them a sense of ownership and contributes to long term sustainability long after the project donor has ceased financing the project and also increases the chance of more beneficiaries to take up the services of the project. Other key neglected stakeholders are the field staff involved in implementing the project.

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

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

Norman (2005) gives details about the financial resources M&E should have a separate budget. Some projects have a specific budget for M&E activities, in others a specified percentage of total budget might be set aside, whilst in others nothings is provided and all activities must be funded from regular budget. A number of items that should be included in a budget are: field data collection–fees and per diems for enumerators; incentive payments for informal data collectors/informants; travel expenses for project staff engaged in M&E activates; fees, per diems and expenses for midterm review; materials; and fees, per diems and expenses for ex-post evaluation.

B) Human resources: Human resources on the project should be given clear job allocation and designation is suitable to their expertise, if they are inadequate then training for the requisite skills should be arranged. For projects with staff that are sent out in the field to carry out project activities on their own there is need for constant and intensive on-site support to the outfield staff (Reijeret, Chalimba and Nakwagala, 2002).

Norman (2005) explains about the human resources experiences that are required: it is important to identify a person in the project office who serves as the coordinator for all M&E activities.

IX. Activities: There are activates which are very important for the practicality of monitoring and evaluation system. Processes or activities to be done on the project are tracked with aid of a project schedule or project timeline. At regular intervals actual schedule of activities

done is compared with the planned schedule to determine whether the project is within schedule or over schedule (Crawford and Bryce, 2003).

X. Outputs: For monitoring outputs of the project, it is important to use a mix of both qualitative and quantitative indicators. **Indicators** are quantitative and qualitative criteria that provide a simple and reliable means to measure achievement, to reflect the changes connected to an intervention or to help assess the performance of a development actor. Indicators do not have to be many, a few good indicators are better than having many indicators. Indicators can be expressed in quantitative terms-where numbers are used to measure changes (such as Count, percentage, rate, and ratio) and in qualitative terms-where words are used to describe changes for example, perception on well-being, quality of life and quality of diet.

A) Quantitative indicators: Quantitative indicators look at outputs in terms of numbers, such as number of people reached, number of trainings carried out, number of materials distributed (Hugesd‟ Aeth, 2002). Quantitative information such as attendances, people served, is best captured by a standardized form then information is aggregated at regular intervals (Gyorko, 2002). These actual outputs at specified periods such as monthly are then compared with planned or targeted outputs as illustrated in the project plan.

B) Qualitative Indicators: Qualitative indicators describe situations and give an in-depth understanding of issues of the outputs. Methods such as focus groups discussions, observation, interviews are used with qualitative methods of monitoring. For evaluation of both the outcomes and goals, both qualitative and quantitative methods are recommended in order to get clear in-depth understanding into the success of the project (Hughes-d‟ Aeth, 2002)

XI. Outcomes and goals: Outcomes and goals are best evaluated with both qualitative and quantitative data. Data from project records is very vital and should be kept securely up to the end of the project and even longer (Muzinda, 2007). This helps in getting the whole picture of the project and is cost effective.

XII. Capture and Documentation of Lessons Learned: Lessons learned from the implementation should be captured and documented for incorporation into the subsequent projects and sharing with other stakeholders. The lessons would include what went right in implementation and what went wrong and why so that the mistakes are not repeated in the subsequent projects (Reijeret et al., 2002). These lessons should be shared with the implementing staff. Sustainability of the project should be determined. It is not easy to

determine sustainability, but the level of the communities' involvement can give an indication of the continuation of the project activities even at the end of funding period.

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

XIV. Reporting and follow up of monitoring and evaluation: As MoFED (2008) justifies, once project monitoring and evaluation are planned and implemented, thoroughly analysed findings must be reported. Based on provided recommendations, follow up activity is very crucial to take corrective measures, to take lesson and re-planning.

2.1.10 Historical Point of View of Monitoring and Evaluation System

The historical expansion of evaluation is not easy to explain, to describe due to its informal utilization by humans for thousands of years, the main problem is M&E is different for different people, Scriven (1996) noted that evaluation is a very young discipline - although it is a very old practice. Jody and Ray (2004) explained that some country like Egypt regularly monitored their country's outputs in grain and livestock production more than 5,000 years ago. In this sense, monitoring and evaluation is certainly not a new phenomenon. Modern governments have engaged in some form of traditional monitoring and evaluation over the past decades. They have sought to track over time their expenditures, revenues, staffing levels, resources, program and project activities, goods and services produced, and so forth (Jody and Ray, 2004). Jody and Ray (2004) explained over the last several years, there has been an evaluation in the field of monitoring and evaluation involving a movement away from traditional implementation based approaches towards new results based approaches. According to the United Nations Development Program [UNDP] (2009), now a day an organization like UNDP are already introduce result-based management (RBM) which leads us managing for development results (MfDR), it aims to bring real change in people's lives.

2.1.11 Emergence of monitoring and evaluation worldwide

According to Bowden (1988), M&E are not recent administrative developments since they are an inherent part of any organized human activity. Bowden (1988) clarified what is perhaps new is the incorporation of M&E into the political and administrative systems of national governments and organizations on a regular administrative basis. Segone (2006)

divided the emergence of M&E into three stages. The first stage began in the 1950s-70s where M&E started to be implemented in US-based organizations (e.g.: World Bank, UN, USAID), focusing on appraisal rather than evaluation. Organizations were trying to design projects according to a logical model and to establish mechanisms and indicators to measure projects' outputs. In the second stage, during the 1980s, there was an expansion of interest in M&E. International agencies started institutionalizing M&E. M&E departments were set up, not only in the United States, but also in Europe, mainly as an accountability tool to satisfy public opinion and government's demands to know how public aids funds were being used. At this stage, international organizations became more professional in carrying out evaluations focused on the long-term impact of aid assistance (Segone, 2006). In the third phase, during the 1990s, international agencies have internalized the meaning of, and the need for, M&E systems within an organization. Organizations, at this stage, are focusing on M&E as a strategic tool for knowledge acquisition, decision making and organizational learning. During this period, international agencies are aware of the relevance and importance of M&E, but resources allocated to evaluation units are still insufficient to allow them meet their objectives satisfactorily (Segone, 2006).

Nowadays, the whole international development assistance worldwide has been going through further changes (Unicef, 2006). The UN reform and Post-Paris Declaration on Aid Effectiveness are reshaping the purpose and strategies of international development assistance (Unicef, 2006). Cracknell (2000) explains that the current phase signalled the beginning of switch emphasis of M&E work from the previous emphasis on project management and rigid frameworks towards a new emphasis on stakeholder analysis and willingness to experiment participatory approaches.

There is an increasing need to enhance M&E capabilities of developing country partners, so they have to tackle far more direct responsibility of the evaluation process (Bowden, 1988).

2.1.12 Drivers of monitoring and evaluation worldwide

Building on Segone (2006) division of M&E evolution stages, it can be inferred that the start of M&E adoption was mainly by US-based development agencies then by European development organizations and finally it reached other developing countries after the Paris Declaration on Aid Effectiveness which led to country led M&E Systems. The following paragraphs will discuss further the drivers and reasons for adopting M&E from a worldwide perspective.

a) Monitoring and evaluation for accountability: One of the main and most significant drivers for conducting M&E is accountability towards different actors for different purposes (Loveridge, 2011). During the past 15 years, NGOs have been increasingly pressured by all types of funders to demonstrate their effectiveness and document their programs outcomes as the current political and funding environment continues to stress the importance of accountability and measuring performance (Walker and Grossman, 1999; Salamon, 1999). Donors are demanding more formal accountability requirements from NGOs to ensure that their donations are being used to benefit society. In response to these demands for greater accountability, NGOs are adopting monitoring and evaluation practices (Juillet et al., 2001).

According to Edwards and Hulme (1995), accountability is the mechanism by which individuals and organizations are responsible in front of a recognized authority and accordingly, are held responsible for their acts. OECD (2010) defines accountability, in development terms, as the obligations of partners to act according to clearly defined responsibilities and roles with an efficient and effective use of the resources. For evaluators, it implies the responsibility of providing accurate, objective and credible monitoring reports and performance assessment (OECD, 2010). Ebrahim and Weisband (2007) further identify four core components of accountability, which are: transparency, answerability or justification, compliance, and enforcement.

b) Monitoring and evaluation for learning and knowledge acquisition: Learning and knowledge acquisition is another main driver for conducting M&E in non-profit organizations (Unicef, 2006).

Cracknel in his book "Evaluating Development Effectiveness: Issues, Problems and Solutions", Cracknel (2006) introduced "knowledge perspective" which argues the "accountability perspective" for adopting M&E in non-profit organizations. Cracknell discussed that since M&E of aid first began in the early 1960s in the USA, there has been a tension and a dichotomy between the main drivers and objectives of M&E; namely, accountability and knowledge acquisition (Cracknell, 2006).

The Inter-American Development Bank (1997) clarified lessons generated from M&E findings are transformed into knowledge when they are analyzed, systematized, disseminated and internalized within an organization. However, before transforming the lessons to knowledge, lesson learnt should meet certain criteria in order to have effective results. According to NASA (2001) lesson learnt is knowledge or understanding gained by

experience. The experience may be positive, as in as successful test or mission, or negative, such as failure. A lesson must be significant in that it has a real impact on operations and valid that is factually and technically correct. It should be applicable in that it identifies a specific design or process that reduces or eliminates the potential failures and reinforce a positive result (NASA, 2001) The attention paid by NGOs and evaluators to 'lessons learnt' as a result of the M&E process has increased over the past decade (UNEP, 2007). Patton (2001) observed that M&E has moved from merely generating findings about certain programs to meet donor requirement to generating knowledge.

Patton (2001) explained two major uses of M&E findings which are instrumental or conceptual use. Instrumental utilization of M&E findings occurs when a decision or action follows the evaluation results and is often associated with recommendations. Evidence that confirm the use of recommendation can readily be allocated, particularly if recommendations identify a specific actor, action, performance target and means of verification (ibid). Conceptual utilization of M&E findings, on the other hand, contrasts with instrumental use where no decision or action is expected; rather, it involves the use of evaluation to influence thinking and deepen understanding by increased knowledge. This knowledge might be clarifying a program model, testing theory, distinguishing kinds of interventions, understanding how to measure outcomes (ibid). In addition, the conceptual use may reduce uncertainty, offer illumination, enlighten funders and staff about what participants really experience, enhance communication. Patton (2001) argues that conceptual use of M&E findings, by its very nature, often difficult to discern. Lessons might be utilized, but evidence of such use or influence of learning is usually lacking.

c) Organizational learning, change and strategic planning: The new concept of evaluation as a function of organizational learning and strategic planning is being accepted at both the development agency level and at the academic level (Preskill and Torres, 1997; Lysyk, 1997; Cousins, 1995). Preskill and Torres (1997) defined organizational learning as a continuous process of organizational growth and improvement that is integrated with work activities. It uses information and feedback about processes and outcomes to make changes. Organization learning does not imply only the use of information, but is based on the concept of knowledge construction. This means gathering relevant information, processing, analysing and communicating it to other members inside the organization, and it is being understood and accepted and internalized as part of the organizational culture. This process facilitates behavior and attitude change among organization members and enables continuous

adaptation of the organization according to internal and environmental changes (Lysyk, 1997).

However, it is argued that the continuous improvement process requires a commitment to learning; therefore, the absence of a learning culture within an organization can prevent M&E results from being used for program improvement. A non-learning organization does not recognize the need to evaluate, nor is it hungry to reflect on its experience or identify the problems and experiment with proposed solutions. Fortunately, a non-learning organization can be transformed into a learning organization through different means (Preskill, 1994). For example, staff members can learn about the benefits associated with this transformation and receive training in conflict resolution, team building, critical thinking, M&E and other relevant topic areas (Preskill, 1994). Empowerment and participatory M&E approaches directly involving organization members can also lead to deeper and broader learning, since individuals have stronger ownership and understanding and can engage in an authentic dialogue with peers about the meaning of data (Cousins, 1995).

Strategic planning is a process for ensuring that the organization is sensitive and responsive to its social, economic and political environment which enables it to anticipate and to respond to major environmental changes, and can prepare and implement effective approaches for improving its program and operational performance (Fisk, 1994). It is used by organizations to effectively plan future overall missions and changes in the external environment. The knowledge and lessons acquired, learned and built through the M&E process is a fundamental input to and support for this strategic organizational process (Segone, 2006).

d) Improving program performance and effectiveness: Besides being a donor requirement, Hunter (2009) argues that the most important application of M&E should be for NGOs (implementing partners) themselves to establish if their projects are really making a difference for their beneficiaries. And if they discover that they are not, they have to learn how to improve their performance and make appropriate changes to project plans (Hunter, 2009).

M&E systems provides an extremely useful tool for all stakeholders to manage on going activities, identify successes, and plan effectively for new initiatives and programs, and thus using the allocated resources most efficiently (Unicef, 2006). According to Rossi and Freeman (1982), the purpose of M&E is to improve planning, administration, implementation, effectiveness, and utility of social interventions. For the U.S. Environmental Protection Agency (2004), program M&E determines how well a program is working and why these results are occurring. It can help program managers and staff: identify areas

needing improvement as well as those that are working well; design strategies to effectively achieve program goals; and improve program data collection and measurement of results.

However, conventional M&E approaches focus only on examining outputs, outcomes and the impact of a program without examining the environment in which it operates or the process involved in a project's development (Rossi and Freeman, 1982). Although it is agreed that assessing short and long term outcomes is important and necessary, the exclusive focus on impacts leads us to overlook equally important aspects of evaluation that could affect the program performance and effectiveness (W.K. Kellogg Foundation, 1998). According to Kellogg Foundation (1998), to ensure program effectiveness, M&E should focus on the following three aspects: Examine how the project functions within the economic, social, political environment of its community and project setting (context evaluation); Help with the planning, setting up and carrying out of a project, as well as the documentation of the evolution of a project (implementation evaluation); and assess the short and long term results of the project (outcome evaluation)

2.1.13 Basic concepts in M&E capacity building

Capacity building is a process for improving the ability of persons, groups, organisations or systems to meet objectives, address stakeholders' needs and, ultimately, perform better. (Horton et al, 2003; LaFond & Brown, 2003; Goodman et al, 1998). It refers to the creation, expansion or upgrading of a stock of desired qualities and features called capabilities that can be continually drawn on over time. Capacity building generally involves an on-going, systematic and planned process with measurable performance objectives, defined outcomes, implementation strategies and ways to measure capacity building outcomes and performance over time.

2.1.14 Purpose of capacity building in HIV M&E

The purpose of capacity building in HIV M&E is to improve the performance of the national HIV M&E system. At a minimum, M&E system performance includes the production of timely and quality data on the HIV epidemic and the national HIV response and the use of data for evidence-informed decision-making in programme planning, improvement and resource allocation. (Geneva: UNAIDS, 2008a)

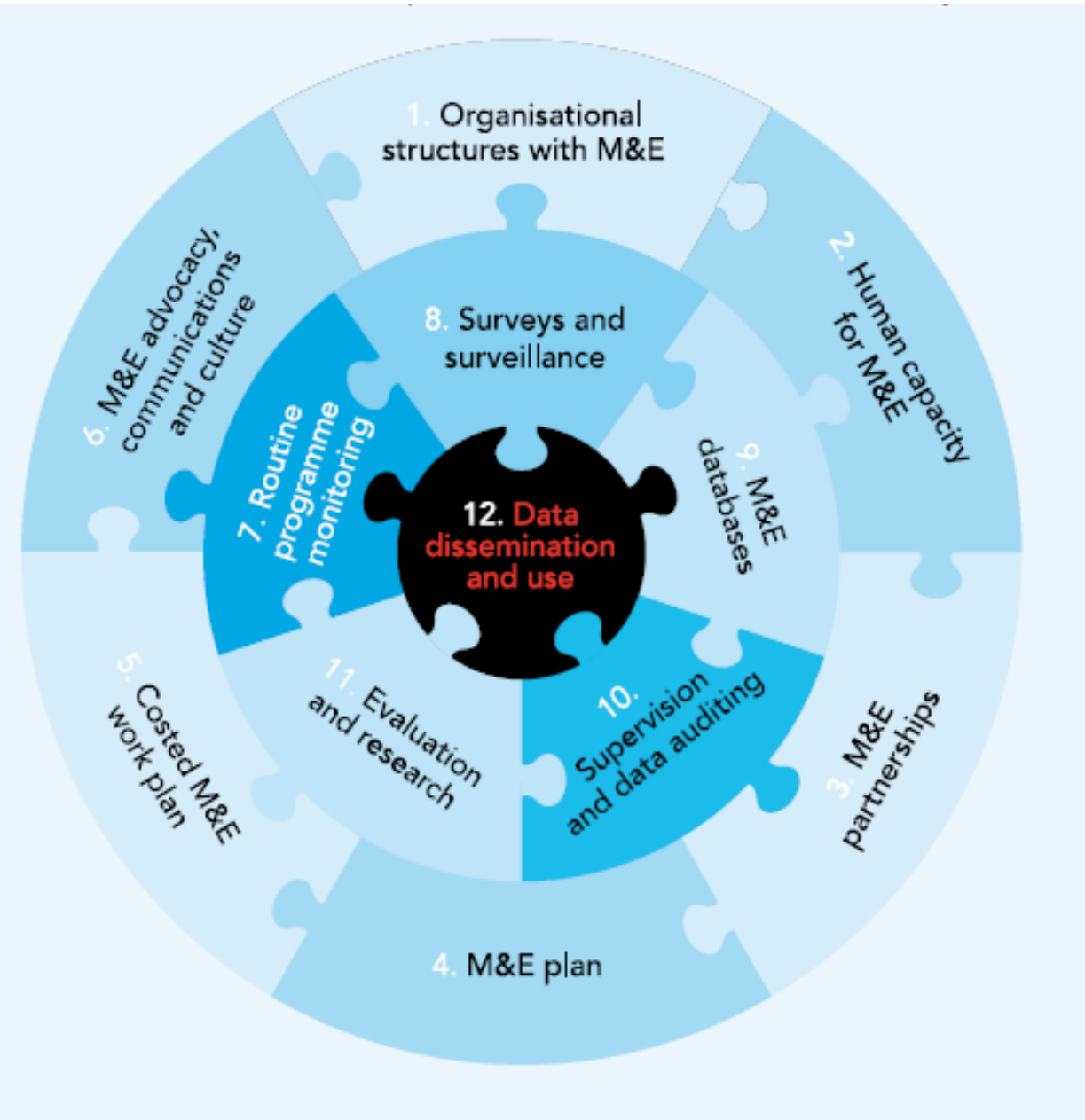
2.1.15 Organizing framework for a functional national HIV M&E system

The Organising Framework for a Functional National HIV Monitoring and Evaluation System) is an important reference for building the capacity in HIV M&E (UNAIDS 2008a). The Organising Framework describes the 12 main components of a multi-sectoral HIV M&E

system; it defines an overall performance goal for each component; and it identifies expected results if the component is functioning well.

In a functional HIV M&E system, each of the 12 components is present and working at an acceptable level to produce a basic set of results:

Fig.2.1. Overview of the 12 components of a functional national HIV M&E system



Source: (UNAIDS, 2008a)

• The outer ring of the Framework represents the human resources, partnerships and planning required to support data collection and data use. It includes individuals, organisations, functions/actions and the organisational culture that are fundamental to improving and sustaining the performance of an M&E system.

• The middle ring of the Framework focuses on the mechanisms through which data are collected, verified and transformed into useful information.

• The centre of the Framework represents the primary purpose of the M&E system: using data for decision-making. It is important to remember that collecting data, which are not used, wastes valuable time and resources.

The Organizing Framework helps planners focus their efforts to build M&E capacity. For example, it distinguishes capacity building for systems from capacity building for people. It also uses a 'systems thinking approach' to M&E, which allows stakeholders to gain insights into the whole system and understand the linkages and interactions between specific system components.

To date, capacity building interventions in HIV M&E have tended to focus on improving performance in data collection, verification and analysis; i.e., the technical elements of the system such as routine HIV programme monitoring, surveys and surveillance, national and sub-national HIV databases, supportive supervision and data auditing, and HIV evaluation and research.

However, the organisational structures and processes that enable the technical aspects of M&E to function effectively are equally important. Data collection, analysis and management do not occur in a vacuum. Rather, these actions take place in an organisational context, which includes factors that can inhibit or encourage sound M&E practices. These factors include organisational structures with HIV M&E functions; human capacity for HIV M&E; partnerships to plan, coordinate, and manage the HIV M&E system; a national multi-sectoral HIV M&E plan; an annual costed national HIV M&E work plan; and advocacy, communications, and culture for HIV M&E (Geneva: UNAIDS, 2008a).

A situation analysis and a participatory assessment of the human and organisational capacity of the national HIV M&E system in Guyana were conducted in 2007 and 2008, respectively. Both assessments revealed a range of limitations to M&E system performance, including both technical and organisational factors. The primary technical barriers included a lack of technical M&E skills and experience and the existence of parallel information systems. Key informant interviews with staff collecting and managing data at national, sub-national and service-delivery levels noted that critical aspects of the organisational structure and relationships with stakeholder were lacking, which prevented the M&E system from working effectively. Of particular importance was the lack of a well-defined mandate for the M&E Unit of the National AIDS Commission to be recognized as the coordinator of relevant

stakeholders in M&E, leading to a lack of commitment from stakeholders to contribute to the national HIV M&E system (Geneva: UNAIDS, 2008a).

2.1.16 Levels of M&E capacity building

There are three levels where capacity is required to ensure overall performance of the HIV M&E system: individual, organisational and system. When planning for M&E performance improvement, capacity building should be done at all three levels. In fact, improving capacity at one level may require concurrent interventions at another level. For example, to reinforce M&E technical training at the individual level, it is important to institutionalise regular performance assessments linked to job incentives at the organisational level (Geneva: UNAIDS, 2008a).

2.1.17 Standard capacity building strategies and interventions

There are some standard capacity building strategies and interventions that are used at different levels of the M&E system to improve performance. They include: introducing or strengthening strategic planning for M&E system capacity building; leadership development; team-building; coaching; mentoring; exchange visits; technical assistance; and, short and long-term training. In all cases, it is not only the strategy or intervention chosen that influences success in capacity building but also how it is done. Evaluations of capacity building teach that there are good practices which are more likely to lead to effective outcomes (Geneva: UNAIDS, 2008a).

2.2 Empirical literature

According to a research conducted in Kenya on effective use of monitoring and evaluation systems in managing HIV/AIDS related projects led to the conclusion that there is need to pay more attention to the usage of M&E systems for project efficiency, effectiveness and impact. If you can't measure how well you are doing against targets and indicators, you may go on using resources, without changing the circumstances you have recognized as a problem at all. The research considered several factors that affect the effective use of Monitoring and Evaluation by project managers in NGOs with HIV/AIDS projects in Kenya. These include lack of commitment by the project managers, incompetency on the use of the Monitoring and Evaluation systems by project managers, stringent donor requirements and capacity constraints of the local implementers. In addition to that there is a lack of professionalism on the part of qualified practitioners, and there are few academically trained M&E personnel mentioned as a challenge for effective M&E practice and rather major M&E practices are driven by activists and donor demands.

The same research argues that M&E system to be effective it should be aligned with national M&E framework of the sector under which the project is implemented. The goal of the National HIV/AIDS Monitoring and Evaluation Framework is to guide compilation, analysis, use, and distribution of information that allows the tracking of progress made in response to HIV/AIDS and enhances informed decision-making. In Kenya, few researches have been carried out to establish the usage of the Monitoring and Evaluation systems in place. There is a need to find out how effectively the HIV/AIDS projects implemented by NGOs in Kenya are monitored and evaluated against the best monitoring and Evaluation practices as laid down by the National HIV/AIDS Monitoring and Evaluation Research Framework. Finally concludes that Monitoring and Evaluation is an indispensable tool in quality service provision especially in the health industry.

A research conducted in twenty six African countries in 2010 by members of the project management of the University of Quebec at Montreal to analyse the observed relationship between project management efforts, project success, and success criteria, suggests that project success is not sensitive to the intensity of project planning efforts but to the use of monitoring and evaluation tools which is an early indicator of a project's lasting impact.

M&E can support strong governance in many ways. First, the information it produces can be important for decision-making and the setting of priorities, particularly in the budgetary process. Secondly, M&E assists managers by bringing out the performance of on-going activities at the project or sector levels, producing valuable information for planning new activities. Thus, M&E is a management tool that promotes future learning and improvement; that is, management based on results. Likewise, M&E information can be used to measure the performance of organizations and institutional modification processes. Third, M&E contributes to mechanisms that hold managers accountable for their performance (Francis Nyaga Karani, Walter Okibo Bichanga, Charles Guandaru Kamau, 2016).

A study article presented in Ethiopia by Zelalem Tadesse revealed that lack of participation of stakeholders during project designing, monitoring and evaluation, lack of fund, delayed release of funds, duplication effort, unable to have separate unit for monitoring and evaluation, unable to conduct mid-term evaluation, unable to have base line data were the serious problems encountered while managing and implementing HIV/AIDS related projects"(Zellalem, 2016). The observation made by the researcher showed that considerable numbers of HIV/AIDS related projects are facing difficulties in achieving their objectives and goals due to managerial and related reasons like ambitious expectation, vague objectives,

absence of baseline information, inadequate monitoring systems, and lack of experience in project and program management and lack of sufficient fund (Zellalem, 2016).

The study further indicated that the project(s) implemented by NGOs were not well/properly designed, monitored and evaluated. The study also revealed lack of awareness on the contribution of project, lack of fund, lack of knowledge and skills, lack of transparency and accountability and fear of failure as major challenges. Thus, it is safe and sound to conclude that all these factors lead to poor project management or challenge to implement projects. It was also found that majority of the NGOs did not have a separate unit for monitoring and evaluation. This has contributed to the conspicuous lack of a strong monitoring and evaluation system. Therefore, all these will have their own implications on the accomplishment of monitoring and evaluation in particular and overall project management in general (Zelalem Taddese).

Mark (2007:146) assessed the monitoring and evaluation practices and challenges of local NGOs implementing HIV/AIDS prevention projects in Botswana. The investigator in his findings shows that the projects implemented by NGOs were not effectively monitored and evaluated. The study determined that the monitoring and evaluation practices of the local NGOs fell short of the best practices. Most of the best practices were inconsistently done and others were not done at all. The study also unearthed the lack of funding faced by the NGOs. This was mainly as a result of lack of expertise in the area of project monitoring and evaluation. The study also identified quite a number of challenges the NGOs faced in carrying out monitoring and evaluation of the projects they faced. These challenges made it hard for the NGOs to effectively monitor and evaluate the projects implemented. The most significant ones included; inadequate finances, lack of expertise, stringent and multi-donor reporting requirements, and lack of baseline data. The study found out that, all in all the projects implemented by the local NGOs were not effectively monitored and evaluated (Zelalem taddese, 2016)

All the above points are raised by different authors and researchers about the research topic under consideration but there was no specific research found on assessing the M&E practice of AACAHB CDC project called strengthening local ownership for sustainable provision of HIV services. So the subsequent section of this paper will assess the actual M&E practices of the aforementioned project in AACAHB in light of the best practices of M&E.

CHAPTER THREE
RESEARCH METHODOLOGY

This chapter outlines how the research project is conducted. It focuses on the research design, location, target population, sampling technique, data source, collection tools and techniques and data analysis that were used in this study.

According to Brynard and Hanekom (1997) research methodology, or methods of collecting data, necessitates a reflection on the planning, structuring and execution of the research in order to comply with the demands of truth, objectivity and validity. Hence, research methodology focuses on the process of research and the decisions which the researcher has to take to execute the research project.

This study complies with the above compound definition and the principles of research for the deduction of reliable, valid and objective findings. The research method applied in this study falls within the framework of qualitative research. A qualitative approach is one in which the inquirer often makes knowledgeable claims based primarily on constructivist perspectives (i.e. meanings socially and historically constructed, with an intent of developing a theory or pattern) or advocacy/ participatory perspectives (i.e. political, issue orientated, collaborative, or change orientated) or both (Creswell, 2003). Therefore, this study fits well within the qualitative research framework.

3.1 Research Design

Research design is a plan and the procedures for research that span the decisions from broad assumptions to detailed methods of data collection and analysis (Creswell, 2009). The current research is a qualitative exploratory study since the purpose of the study is not to come up with statistics or test hypothesis but rather to explore views and generate rich information in the form of words (Bryman, 2008). Using qualitative exploratory approach in this context gave the researcher the ability to ask open questions to discover what is happening and gain insights about a topic of interest (Saunders et al., 2012) which is project M&E practice in AACAHB CDC project.

The study adopted a descriptive research design and utilizes a qualitative method to collect and analyse data on project M&E practices of AACAHB implementing CDC project under the thematic area of capacity buildings and strengthening the health management information system for informed decision making more particularly strategic information on HIV/AIDS. According to Schindler et al (2003), such a study is concerned with finding out who, what, when, and how of the relevant phenomena.

The study adopted a qualitative research approach and both primary and secondary data are used. Interview has been conducted to assess the M&E practices, key informant interview, and document review has been undertaken to better understand the practices and key factors affecting the M&E practice. The primary argument for qualitative research design is that the issue under study doesn't require any means of quantitative measurement or statistical procedure with small sample size. The researcher also used qualitative research with the aim to obtain an in-depth understanding of the practice as seen through the eyes of the key informants being studied.

3.2 Study Target Population

The M&E system & practice assessment sought information from AACAHB & the ten sub city health offices in Addis Ababa implementing the CDC project employees. Castillo (2009) defines target population as, referring to the entire group of individuals or objects to which researchers are interested in generalizing the conclusions. For this research, the target

Populations are all employees working as an M&E experts/coordinator/specialist & one project coordinator under AACAHB CDC project. Each of them is assumed to have project M&E experience and knowledge, therefore, the total number of study population targeted for the interview is 14. Ten (10) M&E coordinators from each sub cities, 3 M&E specialists and one Project manager/coordinator from AACAHB CDC project are targeted. These people are expected to have knowledge about M&E system either through career structure and training given or due to the responsibility and accountability they assumed. Unfortunately interview session schedule to hold with project coordinator and one sub city level M&E coordinator were not successful so the result has been presented based on the response of 12 study participants.

3.3 Sampling and Selection

A sample is a representative part of a population. In research it is not always possible to study an entire population. A decision is often made, therefore, to study only a small fraction of the population, or a ―sample of it, from which conclusions can be drawn about the whole population. Sampling requires a researcher to be careful in considering: Time, cost, availability of resources and also its practicability (ESTC, 2005). According to Saunders (2009), purposeful or judgmental sampling often used when working with very small samples such as in case study research and when you wish to select cases that are particularly informative. Since the research objective is to assess the current M&E practice of AACAHB CDC project the researcher purposively select all the 13 M&E staffs employed under the

project to undertake M&E activities and the response of 3 from regional level and 9 from sub city level a total of 12 participants are involved in this study. These people are expected to have knowledge about M&E system and practice either through career structure and training given or due to the responsibility and accountability they assumed.

3.4 Data Collection Methods and Instrument used

According to Wanjiru (2013) for descriptive type researches primary data can be obtained either through observation or through direct communication with respondents in one or another form or through personal interviews, questionnaires, observation method etc. Both primary and secondary data are collected to achieve the intended research objectives. Data collected using semi-structured and open ended interview questions to key informants and document analysis were employed as instruments of data collection to triangulate with interview responses for reliability. The researcher looks for the involvement of the participants in the data collection and seeks to build rapport and credibility with the individuals in the study (Creswell, 2003). This principle guided the process of data collection for this study. According to Creswell (2003), the method of interviewing gives the interviewer control over the questions he/she asks, and allows the participant to bring in historical information. Semi structured and open-ended questions were applied in the interviews in this study to create an avenue through which participants could voice their subjective viewpoints. So interviews were conducted with the above highlighted participants. All of these interviews were held face to face after prior notification of the study topic and ensured acceptance from participant.

3.5 Data Analysis Method

Yalew Endaweke (2011) refers qualitative data analysis allows describing a phenomena from different direction through holistic approach. The features of qualitative data indicate its diverse nature and there is no standardized procedure for analysis. Despite this, the collected data need to be reduced, displayed in graphical, tabular percentage etc. and finally concluded or verified in the analysis process. Saunders, et al (2009) also explained the data analysis process for qualitative research in the form of summarizing (condensation) of meanings; categorization (grouping) of meanings; Structuring (ordering) of meanings using narrative are grouped in analysis process. Due to the small sample size, developing statistical data was difficult and no advanced statistical analysis was performed in this study. Instead descriptive analysis and conclusion were drown from the analysis of specific monitoring and evaluation practices to general or over all Monitoring & Evaluation processes through inductive

approach. Therefore, based on Creswell (2009) the results were presented in descriptive and narrative form.

3.6 Validity and Reliability

Creswell (2009) states that employing multiple data collection instruments help the researcher to combine strengthen and amend some of the inadequacies and for triangulation of the data. Triangulation means compensating the use of single data collection methods and a simple study design with the use of several information sources and different methods simultaneously, to generate information about the same topics. A reliable study produces consistent information if it is repeated following the exact same procedures described by the initial researcher (Yin, 2009). To ensure the validity and reliability of data collected through interview, different organizational and project documents on the topic of study are reviewed and found to be supporting.

3.7 Ethical Considerations

The research follows the three principles of ethics which include: respect, beneficence and justice. The participants will be informed of the purpose of the study before the information collected from them thus conforming to the principle of voluntary and informed consent. Further, the identity of the respondents will be protected by reporting data as a block and not highlighting individual cases. The researcher further consider that all the sources used in this research report have been properly recognized and acknowledged as in-text- citation and reference list.

CHAPTER FOUR
DISCUSSION AND RESULTS

4.1 Overview of the Project under the Study

Addis Ababa City Administration Health Bureau in collaboration with CDC is implementing a second phase of five year "HIV/AIDS prevention, car & treatment project" in the region since 2012. The project is financially and technically supported by PEPFAR/CDC under Cooperative Agreement (CoAg) number **GH 00833** entitled "Strengthening Local Ownership; for the Sustainable Provision of HIV/AI DS Services in the Addis Ababa; by the Addis Ababa City Administration Health Bureau (AACAHB) of the Federal Democratic Republic of Ethiopia; funded under the President's Emergency Plan for AIDS Relief (PEPFAR)."

The intervention was aimed to transfer HIV/AIDS project implementations from donor to local ownership by strengthening government structure of the health sector capacity building in the course of transition periods. Accordingly there are three broader goals with defined objectives set for action.

Goal 1: To strengthen the leadership and managerial capacity of comprehensive HIV program managers at City, Sub-city and health facility level.

Goal 2: "Strengthening monitoring and evaluation of HIVAIDS services within the Addis Ababa city health system."

Goal 3: "To strengthen the capacity to deliver quality and standardized comprehensive HIV/AIDS prevention, Care and treatment services in the city of Addis Ababa."

Therefore the focus of this study is on goal two of the project strengthening; monitoring and evaluation of HIVAIDS service & strengthen strategic information use. Under this goal, there are also five objectives aimed to specifically address the intended goal. The objectives included are improving data use for timely evidence-based decision making, enhancing regular joint supportive supervision, improving follow up of program/service performance, improving the M&E capacity at all levels in the Addis Ababa city administration health system and the fifth objective is providing support to ANC-based HIV (PMTCT), TB/HIV and STI surveillance M&E activities.

So this chapter deals with discussion and results of the research findings. Data was obtained from M&E tools & techniques used, document analysis and semi-structured in-depth interviews that was conducted with the M&E officers, coordinators, Specialist and Project coordinator of AACAHB CDC project employee . Document review was also conducted to obtain additional information. The information obtained from these key employees for the study was thematically categorized, carefully analysed and interpreted to obtain a better result.

This research which studies the current M&E practices that the project under the bureau uses to strengthen local ownership for sustainable provision of HIV/AIDS services gives special focus only on capacity buildings and strengthening the health management information system for informed decision making by generating strategic HIV information. In the M&E aspect of project has benefited from key participants where by M&E is their major work or their involvement in the M&E activities and decision making process of the project is significant. For this study data was collected from nine M&E coordinators in ten sub city health offices of Addis Ababa, one data manager, one M&E coordinator, one M&E specialist & one project coordinator a total of 12 from the AACAHB CDC project.

4.2 Background Information of Respondents

The back ground information about participants/respondents for interview has been grouped in terms of educational level and work experience on the project. All sub city level M&E coordinators except one are BA/BSC holders while the rest working at AACAHB as M&E are all MA/MSC holders. As far as work experience in the project is concerned except one sub city level M&E coordinator all have work expedience ranging from 2 and half to 4 and half years in the project during the study period.

4.3 Current M&E Practice of the Project under the Bureau

The study tries to capture the opinion of the interviewees on the actual current project M&E practice in light of the best practices. These practice assessment statements include having there a comprehensive separate project M&E plan, indicating what, why, when, who, how of M&E, an explicitly designed & well communicated project M&E framework, a clearly defined distribution of role for M&E, role for M&E unit staffs, practice of RBM approach, identify best practice, scale up best practice and knowledge management, optimally budgeted M&E activities, methods used in M&E, use of SMART indicators, use of input monitoring, reporting & dissemination of findings, follow up of feedbacks given and M&E for data quality or performance tracking are the important questions addressed by the key informants

of this study during interview session with a possible triangulation of project document review done.

According to Hunter (2009) there are six steps to be followed in project M&E process includes identifying the purpose & scope of the M&E system, plan for data collection & management, plan for data analysis, plan for information reporting, plan for M&E of human resources & capacity building and prepare the M&E budget. Additionally setting indicators for performance measurement, set baselines & targets, collect data on indicators of inputs, activities & results for analysis and then compare progress against baseline & targets are the hallmark of M&E.

The M&E unit of the project is situated under planning job process of AACAHB that oversees the activities of the project assigned M&E coordinators at each of the ten sub cities health offices. The sub city level M&E coordinators are horizontally under immediate follow up of each sub city disease prevention and health promotion core job process heads. The planning job processes at sub city level are not well organized and only follow regular budgetary issues. So the M&E team at each level are expected to monitor and support the implementation of this HIV, TB/HIV project in particular and building institutional capacity for planning and managing strategic HMIS in general through the tools and techniques of M&E.

4.3.1 Project M&E plan

Project M&E system is described in a document called M&E plan that helps to track and assess the results of the interventions though out the life of a project. It is a living document that should be referred to and updated on a regular basis.

According to three respondents in the interview session the project has a detailed M&E plan that clearly outlines what activities it intend to do, why M&E is in need for program improvement, accountability, etc., the schedule, the frequency and responsible body for M&E activities are defined in the separate planning document of the project. But ten participants from sub city level M&E coordinators show hesitation that they are not aware of the presence and content of the project M&E plan. This inconsistent response implies the plan preparation was as per donor requirements and not made for downward communication even though it is implicitly understood in that the M&E plan components are actually used in practice. Another thing mentioned here by the study participants is that it will be better if M&E staffs at all level take part in preparation of the project M&E plan or get well oriented about it.

4.3.2 Project M&E Logical Framework, a basic Conceptual Structure

Well defined M&E framework requires adequate M&E personnel in number and skill sets, standardized data collection & reporting tools, integrated systems, and capacity for analysis and use of data.

According to the response from study participants in the interview session four of them said that there is M&E framework developed based on the funding agency (PEPFAR) framework but it is a more general one and acknowledged the importance of a coherent M&E framework that aids in identifying the logic behind project elements and performance measurement, how they are related and the underlying assumptions. However the same interviewees at AACAHB M&E unit suggested that the M&E frame work has not been well communicated and oriented to everyone involved in project implementation and that is the gap. Majority of the respondents are not clear about the project's M&E logical framework rather they are busy on the routine data collection and not well connected with project strategic issues.

4.3.3 Distribution of role for M&E

The project plan document clearly defined what would be the role of the unit and the intended outcomes as a result. But study participants explained as have witnessed several role confusions as far as the M&E unit has to contribute to project goal and the bureau's intention. M&E unit role as literally conceived for coordination of data collection, analysis, reporting and dissemination but sometime they get busy on routine organization issues. Almost all participants in the interview perceive that the main role of M&E is mentoring, coaching, data collection, data quality improvement and assurance, reporting, and data analysis. Majority of the M&E coordinators agree that the role M&E assumed in this project is narrowly perceived and practiced focusing on ensuring data quality issues than integrating to the broader project performance issues like inputs, outputs, and processes/tasks /activities monitoring. As informants argue project M&E unit should have their say and assessments on issues like project financial performance/budget utilization, procurement delay, quality of training delivered for programs & M&E. Since effective project management considers M&E as a tool for project success by objectively measuring key performance progress and identifying possible challenges for top management decision.

4.3.4 Use of the Result based M&E approach

Points for discussion raised at interview session to know whether the project uses result based M&E are use of baseline data at initiation, use of SMART indicators to measure change and improvement, focus on performance and achievement of outputs, outcomes, and impacts. In addition why for M&E used questions were answered as for performance reporting for organizational learning and accountability by the interviewees. Majority of study informants asserted that the use of M&E for learning has been given less attention rather more focus is given for performance reporting and accountability. Result based M&E approach which is part of result based management life cycle approach where planning, monitoring and evaluation considered as a continues process of doing, learning and improving.

4.3.5 Project budget allocation

As a rule of thumb, literatures reveal that projects should set aside not less than 5-10% of the total budget for M&E purposes. Transportation fee, travel expenses, periderm expenses, salary for M&E staffs, training costs for M&E staffs, M&E tools preparation costs, costs to organize meetings, & etc. are the main cost of the project M&E unit according the project document review made for this study. All study participants consistently respond that resource allocation for M&E activities are not well addressed. According to informants, the budget for M&E in this project is less than 3% of total budget and it is obviously low. The interviewees believe that this inadequate resource allocation is not because of shortage rather it is as a result of misallocation hence at the end of each budget year a significant amount of unused budget is reported. This shows that less attention is given for M&E unit and its contribution for project success.

4.3.6 M&E Methods in use & data quality issues

In this project case M&E is considered as all about ensuring data quality issues (timeliness, consistency, concordance, reliability and completeness…) than focusing on project performance progress tracking as respondents said. Most used M&E methods are using check lists for supportive supervision, interviewing, direct observation & document review, periodic review Meetings, picturing of best practices, data quality check has been done though visual scanning, mapping indicators with sources, using various validation checks, DQAs (RDQA, LQAS PRM) methods to improve the quality of data collected are in use. There is lack of consistency about schedule and frequency of data collection and reporting M&E mentoring activities but the donor requires a compiled quarterly performance data at regular basis from each technical supported sites.

4.3.7 Stakeholders' involvement in the project M&E

Regarding stakeholders involvement in the thematic area of strengthening the generation and use of strategic HIV/AIDS information, all private and government health facilities providing HIV services and technically supported by the project are considered for generating and use of quality data are acknowledged by the respondents as actively involved stakeholders. Another worth mentioned stakeholder in M&E thematic area at this time with good prior technical and project management experience working as transition partner with AACAHB is ICAP Ethiopia. But majority of the respondents are not satisfied on the quality of technical contribution from such stakeholder other than the donor of the project under the bureau. The respondents assume that the contribution of stakeholders like ICAP Ethiopia on technical matters should be more visible and sound. Further evaluation is recommended about their contribution by bringing them to share experiences of project management in general and M&E in particular.

4.3.8 Project M&E best practice and Knowledge management

Majority of the study participants asserted that there has been tremendous progress in the generation of strategic information for HIV/AIDS; however, routine M&E activities still face challenges including low quality data, inadequate ownership and value for reporting, absence of effective M&E feedback mechanisms, gaps in data demand and use, limited understanding of indicators and data elements, weak documentation practices, limited for sharing best practices which provides an avenue for learning, replication and adoption of successful innovative approaches in M&E.

Study informants believed that Lessons learned from the implementation should be captured and documented for incorporation into the subsequent projects and sharing with other stakeholders. The lessons would include what went right in implementation and what went wrong and why so that the mistakes are not repeated in the subsequent projects and the same project next time. These lessons should be shared with the implementing staff. Sustainability of the project should be determined. It is not easy to determine sustainability, but the level of the local ownership capacity both in technical and financial aspects can give an indication of the continuation of the project activities even at the end of funding period. According to the majority of the respondents the project under the bureau is not practicing documentation of M&E best practices and knowledge management likewise; sustainability issues are not well dealt.

Study informants noted that considering the limited knowledge and backward practices in M&E in general, the project has implemented M&E Mentoring to those involved at all levels so that they have a better understanding about what they are doing and give due care to make a better quality data but not well institutionalized. With all the challenges this project has had, there has been encouraging achievements on maintaining data quality & enhanced indicators understanding by health workers all levels as interviewees said.

4.3.9 Use of Performance Indicators & Input Monitoring

According to the majority of study informants and the researcher's observation the project uses both qualitative & quantitative indicators to measure outputs of the intervention. In relation to input monitoring taking human and financial resources as a key component has to be monitored effectively to ensure that they are used optimally on project activities in order to produce the desired outputs. On this point the study informants argue that human and financial resources of the project are not effectively utilized, the M&E unit is not well capacitated since there is no capacity gap assessment trend and provision of essential skill through training particularly on principles of project M&E.

The financial resource utilization also remains poor as evidenced at the end of each budget year, a significant amount of budget is returned back to donor account. Study informants asserted that due to late fund release and poor monitoring on budget utilization they witnessed ineffective outlay at the end of each budget year that was otherwise effective if done as scheduled and monitored earlier.

Interview respondents asserted that there is a trend of dissemination of M&E findings to relevant stakeholders through reporting/feedback mechanisms and formal meeting. But the way to reach the general public about the project is limited. There is a gap of consistency in making follow up for improvements of M&E findings based of the recommendation given.

4.4 The key factors that affect M&E practice effectiveness in the project

According the majority of the study participants there are two major factors that affect implementation of effective project M&E practice, these are leadership and project management experience of top management and lack of technical skill in the M&E unit. As noted in literatures the people, the institution and the system as a whole should be harmonized for a common goal. The study tries to get more ideas from the respondents and the structure of the project to further understand the effect of the two major factors in detail.

According to own observation and study participants response; in terms of leadership, project management knowledge and experience and project organizational structure aspects this project at all level is run by non-project personnel. The project uses internal project management structure with in the existing structure of the organization where the project manager has non-executive power. The project staffs are employed as seconded staff by the secured fund of the organization from the donor at each functional structure of the existing organizational structure. As majority of the key informants asserted the project staffs are not playing a leading role in M&E and in program rather they follow the direction of each functional units and this narrowed the chance of practicing innovative M&E practices.

Another issue raised by the study participants is the implementing organization (AACAHB) does not have prior experience on managing such type of donor funded project. As literatures show project management is quite different from traditional management, the response of study participants' support this fact in that project management knowledge and experience are very important to manage such type of huge project with internationally agreed goals that has allocated resources of more than 300 personnel and annual budget of US $8 million as of FY 2018. So without the due understanding of the unique nature of projects and project management practices, effective implementation of M&E practice for successful completion of project in the traditional management approach remain problematic as study participants asserted.

Presence of effective and efficient project leadership and management skill from top management has a paramount effect on addressing employees motivation issues, resource allocation, timely decision making, resolving interest conflicts & meeting project objectives. In this regard the respondents hesitate to acknowledge the presence of these top management qualities in supporting the M&E unit and the project in general.

The second major factor that affects effective implementation and use of project M&E system next to leadership and project management skill of top officials is lack of professionalism and lack of technical skill in the M&E unit as different literatures support that M&E is a young profession especially in developing countries like Ethiopia. According to majority of the interviewees the M&E unit at all level of the health system is not well capacitated on the basics of M&E components and they are solely dwelling on routine organizational activities and data collection and quality assurance issues. Most of the respondents believe that the M&E unit is not in a position to influence the top management in resource allocation for the routine M&E activities. As one key study participant put a quality

data that is not to be used by the project management team for decision have no difference with poor quality data, the only difference is waste of effort in collection.

According to the response of study participants and the researcher's observation the key skill gap in the M&E unit can be expressed by

- weak communication and understanding about overall project goal to horizontally and vertically across project participants,
- lack of professionalism & proven experience in project M&E,
- lack of training in M&E practice
- M&E tools are not standardized & updated regularly,
- absence of immediate response for gaps identified & proposed solutions,
- non-existence of experience sharing events, poor sense of ownership,
- lack of practice in using M&E feedback to review and amend project plan and implementation, and
- Poor integration with program unit is among many worth mentioning.

The M&E unit is not well organized and institutionalized at all levels of the health system; the system is almost non-existent at sub city and health facility level in the functional structure.

All of the respondents favoured the need to have a separate project management unit under one project manager so that cooperation of project units will be higher, resources will be effectively utilized, activities will be performed as planned, accountability will be enhanced, real contribution of the project will be clearly visible.

4.5 Hindrance in Implementing Project M&E Practices in the Project

A research question stating what underlying factors hinders the project not to implement the real sense of project management in general and M&E practices in particular has been raised to study participants and most of the responses focused on the structure of the organization. They all asserted on the need to have a separate project management unit that can clearly avoid role confusion, interference and resource wastage. Most importantly it will increase accountability and integration among project staffs.

Being managed by the existing functional organizational structure than separate project management unit did not encourage innovative management and M&E practice as participants argued. Backward practice in the use of M&E practice in the existing structure push back and resist the implementation of best practices.

As one key informant put, the whole objective of M&E is to make an informed decision on strategic project issues but most of the data collected is not utilized by the bureau officials. In addition, there should be a strong support from the management as well as program units to work in collaboration so that the system works effectively. These things are lacking in their current form, and he has witnessed their implications and repercussions. This implies the level of attention given to project M&E from top and functional managers.

CHAPTER FIVE
SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 SUMMARY OF FINDINGS

This chapter tries to present summary of findings from the results and discussion part and forward the possible conclusions and recommendations on the topic of research for the project under consideration.

The results and discussion part stars with the first research question of what looks like the current project monitoring and evaluation practice of the implementing partner AACAHB for PEPFAR /CDC funded project called “Strengthening Local Ownership; for the Sustainable Provision of HIV/AIDS Services in the Addis Ababa city administration with special emphasis on goal two of the project “Strengthening monitoring and evaluation of HIV/AIDS services within the Addis Ababa city health system” to support strategic HIV/AIDS information use.

In assessing the M&E practice of the project under the bureau 13 project M&E related staffs has been addressed by semi structured interview questions in light of the best M&E practices mentioned in the related literature review part. To prove the reliability of the responses organizational and project documents has been reviewed. M&E practice of the project from planning to learning and dissemination has been assessed based on the information gather from both primary and secondary sources.

The existence of a comprehensive separate project M&E plan in the project and M&E logical frame work is well communicate and get aware with all project participants are inconsistently responded by the study participants. But the document review shows that there is project M&E plan and log frame in place. This implies there is a gap in project document downward communication. Knowledge management and best practice scale up are poorly practiced. The role of M&E is narrowly defined to data collection and quality assurance than the broader project management issues for successful completion. So based on the finding the implementing partner is at infant stage of implementing the real sense of project M&E practice. But with all drawbacks in institutionalizing the M&E system one thing most praised is that the M&E staff employed by CDC project at all levels immensely contributed for strengthening the HMIS data quality in Addis Ababa health system than rely only on the project level M&E.

The finding show that the key factors that affect effective implementation M&E practice in the project are broadly categorized as top managers project management knowledge and experience in general and use of M&E findings for decision, lack of technical skill in M&E unit, capacity gap, lack of such project management experience, poor professionalism and the project structure.

As the majority of the respondents agreed, the arrangement of the project being under the functional structure of the existing organization affect the project management team not to play an executive role and all the direction come from the decisions of functional managers. Having separate project management unit can increase the level of integration between project teams, will have clearly shared goals, effective resource utilization and increased accountability.

5.2 Conclusions

Based on the findings from the study participant the implementing partner of the project PEPFAR/CDC funded project called "Strengthening Local Ownership; for the Sustainable Provision of HIV/AIDS Services in the Addis Ababa city administration with special emphasis on goal two of the project "Strengthening monitoring and evaluation of HIV/AIDS services within the Addis Ababa city health system" to support strategic HIV/AIDS information use is not practicing the real sense of project monitoring and evaluation as indicated project management literatures.

There is no clearly defined role practiced between the project staff and the existing functional organizational staff where M&E is perceived as to dwell on data collection and data quality assurance than integrating it as a tool to the broader concept of project management success. M&E unit has limited or almost no say on input monitoring of the project. So the M&E unit is not in a position to deal on the project's strategic issues.

The project M&E plan and the logical frame work have not well communicated with project M&E staffs at all level. The monitoring and evaluation unit is not well capacitated and optimally utilized to the level it can contribute for institutionalization of the M&E practice in all stages of the health system in Addis Ababa to generate strategic information for decision.

5.3 Recommendations

First, this study was very limited in terms of scope and time; whilst it presents a pointer of the issue a more in depth analysis would be highly beneficial. However, in light of the above conclusion, the researcher makes the following recommendation to adhere to the best project M&E practices:

The implementing partner AACAHB have to link the practice of the project monitoring and evaluation with the theoretical background knowledge of what project management mean in general and project monitoring and evaluation in particular. Otherwise it remains as usual as it is so where innovative contribution wouldn't be seen. To see the really contribution of the project on the existing organization endeavour, the project M&E team should focus on what actually the project intend to achieve, that is strengthening the generation and use of strategic HIV/AIDS information than the more broader HMIS.

The project overall goals should be communicated with all project staffs and with M&E staffs at all level particularly on the projects M&E plan and the logical framework.

The monitoring and evaluation unit should be strengthened to the level it can capacitate and utilize the full capacity of the resources on hand. The unit should adhere to the best project M&E practices out lined in literatures and commit to the level of professionalism. Involve the M&E unit at all level on the strategic project issues than to the narrowly practiced data collection and data quality assurance issues.

The technical skill gap in the monitoring and evaluation unit has to be fulfilled based on continues assessments. Not only is it necessary to have dedicated and adequate numbers of M&E staff, it is essential for these staff to have the right skills for the work. Human capacity building should focus on all levels of the system. M&E capacity building should focus not only on the technical aspects of M&E, but also address skills in leadership, financial management, facilitation, supervision, advocacy and communication.

Improve knowledge management practices through experience sharing events; organize project M&E specific workshops, identifying documenting and scaling up best practices.

Capacity building on project management knowledge and skill development for top managers should be enhanced. Strengthen synergy with different project units and particularity with program units and IT department.

The implementing partner should encourage operational researches on how to coordinate donor funded project management and best practice of project M&E for better learning performance improvement. The contributions of CDC project for overall health system in the city administration in terms of service delivery and HMIS strengthening worth further study. Most importantly the AACAHB have to deal on the issue of local ownership and sustainably after donor support cease out.

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Appendices 1: Semi structured Interview Questions

Dear participant, peace up on you! I am doing my final project work for MA in Project management on the title assessing project M&E practice of AACAH B CDC project. You are among the one who can contribute the most valuable ideas for the topic. The semi structured interview questions are presented here to capture your genuine and valuable opinions. So based on these interview questions please utmost of your knowledge & experience try to give me your ideas on the current M&E practice in the project, key factors hindering effective implementation of M&E practice in the project and coping mechanisms for effective implementation of M&E practices in the project under the bureau as a recommendation.

Thank you very much for all!

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Checklist for Interview Questions

1. Is there a comprehensive separate project M&E plan, indicating what, why, when, who, how of M&E?
2. Is there an explicitly designed & well communicated project M&E framework?
3. Is here a clearly defined distribution of role for M&E? What are the main roles of M&E?
4. Does the project under the bureau uses results based project M&E practice?
5. What are the M&E best practices in the project? How do you identify best practices and scale up them for learning? Is there a systematic approach? How do you evaluate M&E knowledge management practice in this project?
6. How is M&E financed and budgeted? Do you think M&E activities are optimally budgeted?
7. What are your most used M&E method? How do you ensure the quality of data collection?
8. What are the key factors that affect M&E practice effectiveness in the project? What key factors have to be considered for effective implementation of M&E system?
9. What do you recommend to cope up challenges of good M&E practice to improve the M&E system effectiveness in this project?
10. Do you think having a separate project management unit (PMU) under the Bureau would help to better implement the project M&E practice? Please briefly elaborate.
11. What is your project management plan for phase out strategy to insure sustainability when donor fund end up?
12. How do you evaluate the way CDC project M&E contribution on strengthening strategic HMIS?
13. Do you think that the M&E unit is well capacitated and optimally utilized? Do you notice any lack of professionalism in M&E? Please brief this point.
14. Are stakeholders involved in the project? How do you evaluate stakeholders (internal & external) involvement & contribution in the project M&E practice?
15. Any additional points you can mention?

THANK YOU!