

ADDIS ABABA UNIVERSITY



COLLEGE OF BUSSINESS AND ECONOMICS  
SCHOOL OF COMMERCE

Project Impact Evaluation Practices and Challenges: An Appraisal of  
Selected World Vision Ethiopia`s Prevention of Mother to Child HIV  
Transmission Projects

By:

Feleke Shiferaw Berhane

GSE/0048/08

A Thesis Submitted As An In partial Fulfillment of The Requirements  
for the Award of Master of Arts Degree in Project Management

Advisor:

Teklegiorgis Assefa (Asst. Professor)

June 2018

Addis Ababa, Ethiopia

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Approved by the Board of Examiners:

Teklegiorgis Assefa (Asst. Prof)  
Advisor

-----  
Signature

Abeba Beyene (Ph.D.)  
Internal Examiner

-----  
Signature

Raju Krishnam (Ph.D.)  
External Examiner

.....  
Signature

## **Declaration**

I, the undersigned, declare that this thesis is my original work and has not been presented for a degree in any other university; and that all sources of materials used for the thesis have been duly acknowledged.

### **Declared by:**

Name: Feleke Shiferaw Berhane

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### **Confirmed by advisor:**

Name: Teklegiorgis Assefa (Asst. Prof.)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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## ACRONYMS

|        |  |
|--------|--|
| AP     | Area Program   |
| AIDS   | Acquired Immunodeficiency Syndrome                       |
| ANC    | Antenatal Care   |
| CBO    | community based organization                             |
| CCC    | Community Care Coalition                                 |
| CoH    | Channels of Hope   |
| CWBOs  | Child Well Being Outcomes                                |
| CWBAs  | Child Well Being Aspirations                             |
| CPMTCT | Community Prevention of Mother to Child HIV Transmission |
| DIP    | Detailed Implementation Plan                             |
| FBO    | faith based organizations                                |
| FY     | Fiscal Year  |
| HF     | Health Facilities  |
| HIV    | Human Immunodeficiency Virus                             |
| IPM    | integrated programming model                             |
| ITT    | Indicator Tracking Table                                 |
| KA     | Kebele (village) Administration                          |
| MCH    | Maternal and Child Health                                |
| M&E    | monitoring and evaluation                                |
| M2M    | Mother to Mother   |
| OVC    | Orphan Vulnerable Children                               |
| PLHIV  | People Living with HIV                                   |
| PMTCT  | Prevention of Mother to Child HIV Transmission           |
| WDA    | Women development army                                   |
| WVE    | World Vision Ethiopia                                    |

## ***Abstract***

*Projects were hitherto evaluated, by and large, from the view point of implementation success. Currently, there is a growing recognition of project impact evaluation apart from implementation effectiveness. This is truer for development projects. This thesis deals with project impact evaluation practices and challenges in World Vision Ethiopia's Prevention of Mother to Child HIV Transmission Project (PMTCT) which is simultaneously implemented in three different parts of Ethiopia: Shashemene, Adeadega and Kolfe Qeranyo (Addis Ababa) from 2014 -2017 E.C. The author selected the topic because it is under researched, compared to other topics in project management. The study tries to explore and describe separate but interrelated issues. On the one hand, it seeks to identify the importance of project impact evaluation in World Vision Ethiopia, how it is conducted and its objectives; and on the other hand it tries to identify the attendant challenges thereof. The study utilized descriptive research design; employed qualitative research methodology and contemporary material and has come up with six major findings. The first is project planning in the case organization includes final evaluation. The second finding is that final project evaluation is conducted by an independent external professional organization guided by the Organization for Economic Cooperation and Development (OECD) principles (effectiveness, efficiency, relevance, sustainability and impact) as evaluation objectives. Thirdly, it found out that goal level impact evaluation is not conducted for the project in question. The fourth finding is that the choice of time for final evaluation is not suitable for impact evaluation as the impacts were not yet fully visible at that point in time. The fifth finding is that PMTCT projects impact evaluation is affected by lack of willingness from the side of HIV positive mothers and partners for fear of stigma and discrimination from the society. The sixth and final finding is that, there is no culture of evaluating goal level impact evaluation for PMTCT projects in the case organization. The overall conclusion of the study is that conducting impact evaluation, its basic evaluation problem-disentangling project effects from intervening factors, is not given due attention in the case organization even if it has shown exemplary performance in other aspects as the final evaluation report claims. The practical implication of the findings is that, impact evaluation requires a separate timing and design to conduct than the relatively easy to measure strands of project evaluation such as efficiency and effectiveness.*

**Key words:** Project Impact Evaluation, PMTCT, World Vision Ethiopia

# CHAPTER ONE

## INTRODUCTION

### 1.1 Background of the Study

The ultimate objective of projects is to effect positive impact on the conditions of life of the target population in question and contribute to the overall socio-economic development endeavor of a given country or region. Hence, implementing projects is not enough by itself. Its success should be measured from different dimensions. If we do not measure results we cannot tell success from failure; if we cannot see success we cannot learn from it and reward contributors. Hence, it is imperative that Project implementers and stakeholders measure the success of the projects they implement through a process called evaluation. Evaluation can be done before implementation (formative) and after implementation (summative). Impact evaluation is under the latter category.

Impact evaluation is the systematic identification of the effects-positive or negative, intended or not- on individual households, institutions, and the environment caused by a given development activity such as a program or project. Conducting evaluation in general and impact evaluation in particular requires skills and resources. This is because firstly, impact evaluation is done after the completion of the project and the project team is disbanded; secondly, the observed change cannot be easily attributed to the particular intervention since it can be a result of some other factors other than the project; and finally there may not be a proper baseline data against which end line data can be measured. Getting end line data is not easy either. In deed impact evaluation is an arduous travail. However, it must be done. The reason is simple; without it one cannot judge the worth of the intervention, draw lessons, and or establish accountability, among others (World Bank, 2004).

Projects are implemented by several actors: governmental and non-governmental, local and international organizations alike. Their area of engagement is also diverse. NGOs in tandem with the country`s strategic development framework and also their own mission engaged projects such as food security, education and public health, to mention but a few. Ethiopia is no exception. The country hosts a number of international NGOs. Among these is found World Vision Ethiopia. Ethiopia like the rest of the developing world experiences huge social and economic challenges. HIV AIDS is one of these challenges that has been menacing the society since the early 1980s.

According to, Fisseha and Bereket (2016), Ethiopia is among the ten countries in the world with the highest burden of HIV infections among children where mother-to-child transmission (MTCT) occurs in a third of infants born to HIV-infected mothers. In 2012, HIV prevalence at antenatal care clinics was 2.4% and MTCT ranging from 17% (at 6 weeks) to 30% (including breastfeeding), amounting to an estimated 13,000 new HIV infections among children.

To contribute to the national goal of combating the transmission of HIV AIDS, through the elimination of new HIV infections in new born and reduction of child and maternal mortality in Ethiopia, World Vision Ethiopia has implemented Prevention of Mother to Child Transmission (PMTCT) projects in Shashemene Addis Ababa (Kolfe Keranyo sub city) and Adaaberga town. The projects were implemented from April 2014- March 2017 G.C. The overall goal of the project was the elimination of new HIV infection in new born in Shashemen, Adaberga and Kolfe Keranyo sub city, three woredas (World Vision Ethiopia, WVE, 2015).

The expected outcomes were increased uptake and reduced loss to follow-up to PMTCT services through demand creation; improved capacities of PMTCT service providers and enhanced evidence-based decision making to address challenges and bottlenecks for uptake and follow-up of PMTCT services. The target population of the program are: pregnant mothers, HIV positive pregnant and lactating mothers with their respective partners, infants and young children of HIV positive parents, and general HIV positive persons (Ibid, 2015).

In this study the researcher attempts to evaluate the impact of these interventions and the sustainability of the results and attendant challenges that the organization experiences.

## **1.2 Background of the Organization**

Engagement of civil society/NGOs, at national, regional and global levels has long been recognized as an essential and complementary (to government, private sector) precondition for poverty reduction, service delivery and development (CRDA, 2006:4). In the Horn of Africa, NGOs have emerged and grown rapidly since the 1980s partly as a response to address the resultant failures of governments of the sub region to provide its citizens with basic services and social security (Paul & Jonathan, 2005: 233).

The earliest predecessors of civil society organizations (CSOs) in Ethiopia were traditional community based organizations such as the iddir, the iqub and other self-help organizations (Dessalegn, 2002 and Asnake & Dejene, 2008). Currently civil society actors are visible on the overall institutional landscape of Ethiopian society (Dessalegn, 2008:1). Similar to the Horn of Africa, the largest groups constituting the civil society sector in Ethiopia are NGOs which are largely engaged in what broadly termed as service delivery and welfare activities (Dessalegn, 2010:82).

World Vision is among these NGOs; it is an international Christian relief and development organization founded in 1950. World Vision began its ministry in Ethiopia in the early 1970s and opened a national office in Addis Ababa in 1975. World Vision operated emergency response programs during the 1984 famine, followed by a period of rehabilitation (1986-87) and a self-review that came up with the concept of Area Development Programs (ADPs) as a model.

World Vision's work in Ethiopia contributes to the well-being of vulnerable children in partnership with the church, civil society and the government. Initiatives include education, food security, health, HIV and AIDS, water, sanitation, and hygiene, as well as sponsorship management. All programmes are implemented with the goal of addressing the strategic and basic needs of children while supporting and building the capacity of families and communities (World Vision Ethiopia, WVE, 2015).

### **1.3 Statement of the Problem**

The success of projects plays a key role in achieving organization growth, development and reputation. Project monitoring and evaluation exercise adds value to the overall efficiency of project planning, management and implementation by offering corrective action to the variances from the expected standard (Charles and Human, 2015). Project managers or more generally project implementers are required to undertake rigorous monitoring and evaluation of the projects they implement and develop frameworks and guidelines for measuring impact Kahilu (2010) as cited in Charles and Human(2015). By doing so they will achieve greater value creation for the organization through project success.

For development projects funded by international donor/aid groups in particular not just project management but results based management is the contemporary modus operandi. Results-Based Management (RBM) is a management strategy that focuses on performance and the achievement of results (outputs, outcomes and impacts). One critical aspect of results based management is impact evaluation. Impact evaluation seeks to identify net effects or impacts of interventions. Their distinctive feature is that they aim to support claims that interventions cause results through ruling out explanations, other than the effects of the intervention under consideration, for the results observed.

Put differently, project organizations in general and donor driven organizations in particular are duty bound to perform impact evaluation to comply with donor agencies requirements and ascertain their contribution to the broader national goal that they strive to contribute to. However, apart from emphasizing the need for impact evaluation the challenges of conducting them from the stand point of the implementers has not been well researched. The author believes, understanding the impact evaluation practice and the challenges thereof of World Vision Ethiopia's PMTCT projects merits researching.

#### **1.4 Research Questions**

- ❖ How are Prevention of mother to child transmission (PMTCT) of HIV projects impact evaluations are conducted in World Vision Ethiopia?
- ❖ What are the main challenges of Prevention of mother to child transmission (PMTCT) HIV projects impact evaluation in World Vision Ethiopia?
- ❖ How important is projects impact evaluation in project planning in World Vision Ethiopia?
- ❖ What are the overarching objectives of impact evaluation in World Vision Ethiopia?
- ❖ What could be done to ameliorate PMTCT project impact evaluation challenges in World Vision Ethiopia?

## **1.5 Research Objectives**

### **1.5.1 General Objective**

The study mainly aims at exploring project impact evaluation practices and the challenges thereof in WVE and suggest possible measures of improvement by taking PMTCT project`s as a case.

### **1.5.2 Specific Objectives**

- ❖ To find out the major challenges of PMTC projects impact evaluation in World Vision Ethiopia;
- ❖ To identify PMTC projects impact evaluation approaches in World Vision Ethiopia;
- ❖ To assess the level of attention given to impact evaluation in project planning in World vision Ethiopia;
- ❖ To identify the reasons of impact evaluation in PMTCT projects in World Vision Ethiopia;
- ❖ To suggest measures to address PMTCT project impact evaluation challenges in World Vision Ethiopia.

## **1.6 Significance of the Study**

In general, project impact evaluation is not a well-studied and documented issue in Ethiopia. The author is not aware of studies conducted on evaluation of PMTC projects implemented by International Non-Governmental Organizations (INGO) focusing on impact evaluation. In addition to dealing with impact evaluation issues, this study attempts to relate the problem with the relevant international practices and guiding principles. Furthermore, it lays a ground for a more comprehensive evaluative study of INGO/NGO projects effectiveness in contributing to address the country`s pressing challenges such as Combatting HIV.

## **1.7 Scope of the Study**

The focus of this study is on impact evaluation practices of prevention of mother to child transmission (PMTCT) projects and it does not cover other forms of evaluation. Methodologically it is limited to qualitative methods of eliciting data.

### **1.8 Limitations of the Study**

This study focuses on project impact evaluation practices of Word Vision Ethiopia in relation to PMTCT projects. Its generalizability to other organizations is hence limited since each organization has its own unique culture.

## **CHAPTER TWO**

### **LITERATURE REVIEW: CONCEPTUAL FRAMEWORK**

Literature review builds a logical framework for the research that sets it within a tradition of enquiry and a context of related studies (Catherine & Gretchen, 1999:43). In line with this, the review section of this study attempts to present salient issues as regards project evaluation, PMTCT and challenges. A discussion of these issues is believed to provide a useful explanation and analysis for understanding the study in context.

Every research activity is conceptualized and carried out within some contextual framework. This contextual framework is in part conceptual (Scott, 2003:13). Concepts are mental images or perceptions and therefore their meanings vary markedly from individual to individual (Kumar, 2005:48). Clarifying them and framing their use in a given context as indicated above is, therefore, important. Conceptual framework is described as a set of broad ideas and principles taken from relevant fields of inquiry and used to structure a subsequent presentation. It has a potential to structure and build research (Scott, 2003:13). Conceptual frameworks or perspectives provide a broad language and a form of reference in which reality can be examined. Hence, major concepts which are used as building blocks of this research are described as follows.

#### **2.1 Project Concept**

The project management institute defined project as “a temporary endeavor undertaken to create a unique product, service, or result” (PMI 2005: 553). The temporary nature of projects indicates that a project has a definite beginning and end. The end is reached when the project’s objectives have been achieved or when the project is terminated because its objectives will not or cannot be met, or when the need for the project no longer exists or if the client (customer, sponsor, or champion) wishes to terminate the project.

Temporary, however, does not necessarily mean the duration of the project is short. It rather refers to the project’s engagement and its longevity. Temporary, hence, does not typically apply to the product, service, or result created by the project; most projects are undertaken to create a lasting outcome. For instance, a project to build a national monument will create a result expected to last for centuries. Projects can also have social, economic, and environmental impacts that far outlive

the projects themselves. The outcome of the project may be tangible or intangible. Although repetitive elements may be present in some project deliverables and activities, this repetition does not change the fundamental, unique characteristics of the project work (PMI, 2013).

According to (Pinto 2016), the various elements of projects can be summarized as:

- Projects are complex, one-time processes;
- Projects are limited by budget, schedule, and resources;
- Projects are developed to resolve a clear goal or set of goals;
- Projects are customer-focused.
- The principal outcomes of a project are the satisfaction of customer requirements within the constraints of technical, cost, and schedule objectives.

## **2.2 Project Management Concept**

Projects are managed by project managers through the process called project management. According to PMI (2005) 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 several logically grouped project management processes categorized into five process groups. The groups are:

- Initiating,
- Planning,
- Executing,
- Monitoring and Controlling, and
- Closing.

Managing a project typically includes, but is not limited to:

- Identifying requirements;
- Addressing the various needs, concerns, and expectations of the stakeholders in planning and executing the project;
- Setting up, maintaining, and carrying out communications among stakeholders that are active, effective, and collaborative in nature;
- Managing stakeholders towards meeting project requirements and creating project deliverables;
- Balancing the competing project constraints, which include, but are not limited to: Scope, Quality, Schedule, Budget, Resources, and Risks. The specific project characteristics and circumstances can influence the constraints on which the project management team needs to focus (Pinto, 2016).

A related issue is the issue of project success. Literature points out two distinctions when the terms project and success are taken into consideration. The first distinction is between project success that is measured against the project's overall objectives and project management success that is measured against the iron triangle (time, cost and quality). The second distinction is between success criteria (aspects that are used to explain or judge whether a project is a success or a failure) and success factors (aspects that are to be in place in order to ensure that the management system will directly or indirectly lead to project success).

### **2.3 Results Based Management Concept**

What is Results-Based Management?

Results Based Management is defined by different institutions. Some of the most important ones are the following.

The Organization for Economic Co-operation and Development (OECD) defines results based management (RBM) as “a broad management strategy aimed at achieving important changes in the way in which agencies operate, with improving performance and achieving results as the central orientation” (OECD , 2011).

The Department of Foreign Affairs, Trade and Development (DFATD) Canada, defines RBM as “a program/project life cycle approach to management that integrates strategy, people, resources, processes, and measurements to improve decision-making, transparency, and accountability.” The approach focuses on achieving outcomes, implementing performance measurement, learning, and adapting. Results are linked by causal relationships, that is, a result is achieved because related, and interdependent results were also achieved a result as a change happening in the lives of people as a consequence of a project or program. The change may concern the economic, social, political, cultural, or ecological situation of people (Global Affairs Canada - Results - Based Management for International Assistance Programming, 2016).

The project management institute, PMI, on the other hand, conceptualized Results-Based Management (RBM) as “a management strategy that focuses on performance and the achievement of results (outputs, outcomes and impacts)”. The aim of RBM is to manage an intervention while trying to ensure its relevance, efficiency, effectiveness, impact and other quality criteria. RBM provides a structured, logical model for identifying expected results and the inputs and activities needed to accomplish them (PMI, 2013).

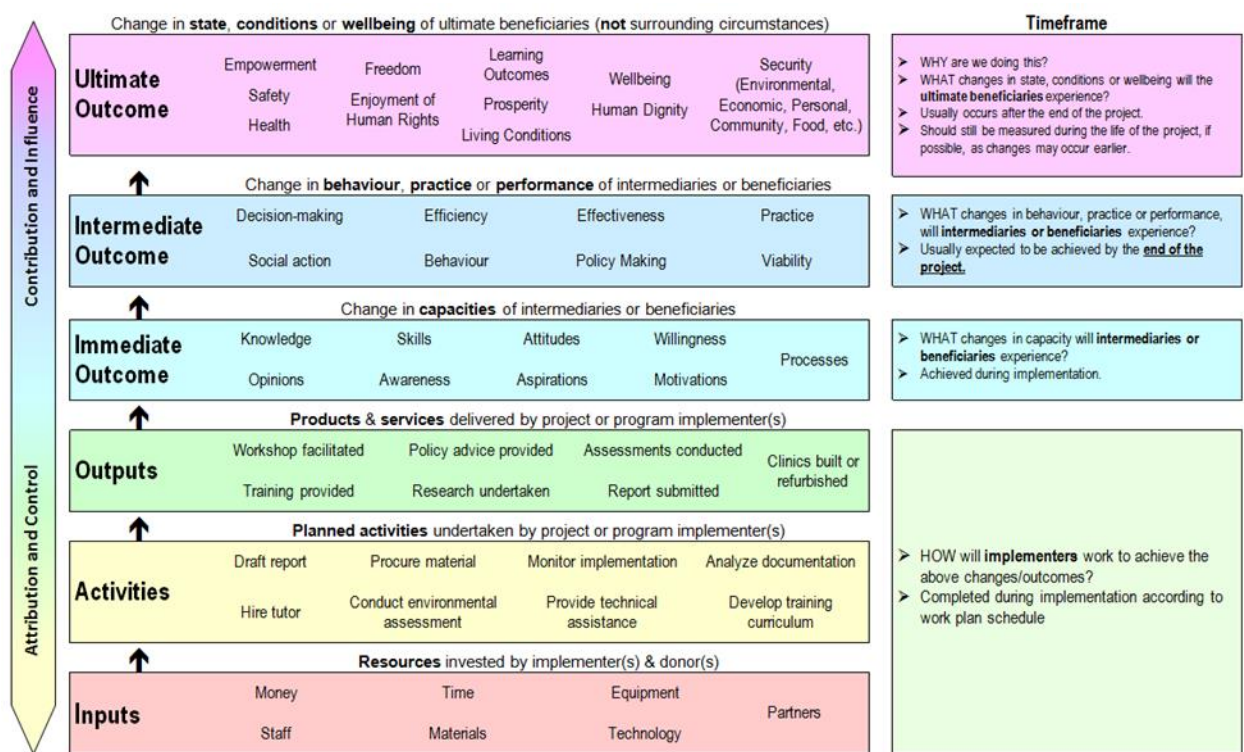
According to The International Federation of Red Cross and Red Crescent Societies, IFRRCS, IFRRCS (2011), RBM is an approach to project/programme management based on clearly defined results and methodologies and tools to measure and achieves them. RBM supports better performance and greater accountability by applying a clear, logical framework to plan, manage and measure an intervention with a focus on the results you want to achieve. By identifying in advance the intended results of a project/programme and how we can measure their progress, we can better manage a project/programme and determine whether a difference has genuinely been made for the people concerned (IFRRCS, 2011).

As the aforementioned different but complementary conceptualizations show RBM is a program/project management method that focuses on what a program is achieving, as opposed to what activities are being implemented in the program. Key to RBM is the principles of focusing on change in the target population, learning from results throughout program implementation, and subsequently adapting implementation as necessary.

The bottom line is RBM relies predominantly on quantification; it is a shift from focusing on activities and inputs into the focus on outputs and outcomes. This is done by focusing on strategic

planning, systematic implementation, performance measurement, monitoring and evaluation, as well as efficient utilization of performance information to inform and improve policy decision-making in an organization (Global Affairs Canada, 2016).

**Table 2. 1** Log frame



**Source:** Adapted from Global Affairs Canada. (2016). Results - Based Management for International Assistance Programming: A How to Guide.

## 2.4 Development Concept

Development has come a long way in the past six decades both as an enterprise, and a scholarly discipline. It became significant in the period immediately following World War II that had devastated Europe. Development refers to a bewildering range of complex activities (Colin, 2002:1). Originally, development was equated with economic growth and modernization. It has many meanings depending in the context it is being talked about. For instance, Newman (2007:267) conceptualized it as, “a process of creating, testing, and maintaining opportunity.” Advanced Oxford Learners Dictionary (2006) perceives development as “transforming the

peoples' way of living and doing things for the better." Sanford (1983:4) cited in (Oxfam, 1994:4), on the other hand defined it in a more comprehensive manner.

According to him development is "a conscious pursuit of certain objectives with a view of increasing welfare." The meaning of development depends upon who is doing the developing and who is receiving the benefits of the development (Oxfam, 1994:4). Large multi-lateral donor agencies may employ an entirely different definition of development from small nongovernmental organizations, even though both types of agency may be working in the same area, attempting to solve the same problem (Oxfam, 1994:4).

In the definitions given above, development is perceived as a process, a transformation and a conscious pursuit. But all aim at one thing- improving the human condition. As, Jeong (2005:123) argues, development has to improve a social reality that is inhospitable to human material well-being. The kind of development that has been accepted as workable in the current era as a result of the growing awareness of the global links between mounting environmental problems, socioeconomic issues to do with poverty and inequality and concerns about a healthy future for humanity (Nuray, 2007:254) , and the writer of this study refers to, is sustainable development. Sustainable development refers to the goal of fostering adaptive capabilities and creating opportunities (Newman, 2007:267). The focus of Sustainable development concept is humankind (Newman, 2007:267).It has a number of features (Sachikonye, 2002). Economic: growth, efficiency and stability. Social: full employment, equity, security, education, health, participation (Kojo & Sam, 2008:2). And environmental: rational use and conservation of natural resources to continue living a healthy life in harmony with one another and with nature. This is both a right as well as a responsibility (Nuray, 2007:254). Promoting sustainable development requires mobilizing human and material resources and establishing partnerships among government, civil society and the private sector at both the national and international level. To be effective and sustainable these partnerships must exist at all levels of the decision making, implementation and monitoring processes of the development projects and above all the evaluation of their impacts.

## **2.5 Monitoring and evaluation**

Monitoring and Evaluation of projects is one of the essential ingredients of good project management. It provides means of accountability, demonstrating transparency to the Stakeholders and facilitates organizational learning through documenting lessons learnt in implementation of

the projects and incorporating the same in the subsequent project planning and implementation or through sharing experience with other implementers (UNDP, 2009).

The OECD (2002: 27) defines monitoring and evaluation as follows: Monitoring is a continuous function that uses the systematic collection of data on specified indicators to provide management and the main stakeholders of an ongoing development intervention with indications of the extent of progress and achievement of objectives and progress in the use of allocated funds. Evaluation on the other hand is conceptualized as the systematic and objective assessment of an ongoing or completed project, program, or policy, including its design, implementation, and results. The aim is to determine the relevance and fulfillment of objectives, development efficiency, effectiveness, impact, and sustainability. An evaluation should provide information that is credible and useful, enabling the incorporation of lessons learned into the decision making process of both recipients and donors (OECD 2002: 27).

**Table: 2.2** Monitoring, Evaluation and Impact Evaluation

|  |  |
|--|--|
| <p><b>Monitoring</b></p> <p>Regular systematic collection and analysis of information to track the progress of program Implementation against pre-set targets and objectives. Did we deliver?</p>                              | <ul style="list-style-type: none"> <li>• Clarifies program objectives.</li> <li>• Links activities and their resources to objectives.</li> <li>• Translates objectives into performance indicators and sets targets.</li> <li>• Routinely collects data on these indicators, compares actual results with targets.</li> <li>• Report progress to managers &amp; alert them to problems.</li> </ul>   |
| <p><b>Evaluation</b></p> <p>Objective assessment of an ongoing or recently completed project, program or policy, its design, implementation and results.</p> <p>What has happened as a result?</p>                             | <ul style="list-style-type: none"> <li>• Analyze why intended results were or were not achieved.</li> <li>• Assesses specific casual contributions of activities to results.</li> <li>• Examines implementation process.</li> <li>• Explores unintended results.</li> <li>• Provides lessons, highlights significant accomplishments or program potential and offers recommendations for improvement.</li> </ul>   |
| <p><b>Impact Evaluation</b></p> <p>Assesses what has happened as a result of the intervention and what may have happened without it - from a future point in time.</p> <p>Have we made a difference and achieved our goal?</p> | <ul style="list-style-type: none"> <li>• Seeks to capture and isolate the outcomes that are attributable (or caused by) the program.</li> <li>• Will review all fore-going M&amp;E activities, processes, reports and analysis.</li> <li>• Provides an in-depth understanding of the various causal relationships and the mechanisms through which they operate.</li> <li>• May seek to synthesize, compare &amp; contrast a range of interventions in a region, timeframe, and sector.</li> </ul> |

**Source:** Adapted from, AAUSC. (2016). Monitoring and Evaluation Module, Supported Distance Program.

Monitoring and evaluation (M&E) of development activities provides government officials, development managers, 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. Within the development community there is a strong focus on results— this helps explain the growing interest in M&E (World Bank 2004).

## 2.6 Types of Evaluation

As described below, evaluation can be categorized into several classes on the basis of *Timing*, *who conducts* it and the *methodology* employed.

**Based on Evaluation Timing:** Formative, midterm, Summative, final, ex-post evaluations.

**Formative evaluations** occur during project/programme implementation to improve performance and assess compliance.

**Midterm evaluations** are formative in purpose and occur midway through implementation. Typically, this does not need to be independent or external, but may be according to specific assessment needs.

**Summative evaluations** occur at the end of project/programme implementation to assess effectiveness and impact.

**Final evaluations** are summative in purpose and are conducted (often externally) at the completion of project/programme implementation to assess how well the project/ programme achieved its intended objectives.

**Ex-post evaluations** are conducted sometime after implementation to assess long-term impact and sustainability.

**Based on who conducts the evaluation:** internal/self, external/independent, participatory, and joint evaluations.

**Internal or self-evaluations** are conducted by those responsible for implementing a project/programme. They can be less expensive than external evaluations and help build staff capacity and ownership. However, they may lack credibility with certain stakeholders, such as donors, as they are perceived as more subjective (biased or one-sided). These tend to be focused on learning lessons rather than demonstrating accountability.

**External or independent evaluations** are conducted by evaluator(s) outside of the implementing team, lending it a degree of objectivity and often technical expertise. These tend to focus on accountability.

**Participatory evaluations** are conducted with the beneficiaries and other key stakeholders, and can be empowering, building their capacity, ownership and support.

**Joint evaluations** are conducted collaboratively by more than one implementing partner, and can help build consensus at different levels, credibility and joint support.

**Based on Evaluation Technicality or Methodology:** Real time, Meta, Thematic, Cluster/Sector evaluations.

**Real-time evaluations (RTEs)** are undertaken during project/programme implementation to provide immediate feedback for modifications to improve ongoing implementation. Emphasis is on immediate lesson learning over impact evaluation or accountability.

**Meta-evaluations** are used to assess the evaluation process itself. Some key uses of metaevaluations include: take inventory of evaluations to inform the selection of future evaluations; combine evaluation results; check compliance with evaluation policy and good practices; assess how well evaluations are disseminated and utilized for organizational learning and change, etc.

**Thematic evaluations** focus on one theme, such as gender or environment, typically across a number of projects, programmes or the whole organization.

**Cluster/sector evaluations** focus on a set of related activities, projects or programmes, typically across sites and implemented by multiple organizations (e.g. National Societies, the United Nations and NGOs).

**Impact evaluations** focus on the effect of a project/ programme, rather than on its management and delivery. Therefore, they typically occur after project/programme completion during a final evaluation or an ex-post evaluation. However, impact may be measured during project/ programme implementation during longer projects/ programmes and when feasible.

**Table: 2.3** Evaluation Criteria, Definition and Core Questions

| Criteria       | Definition   | Core Questions   |
|----------------|--|--|
| Relevance      | The extent to which the aid activity and strategy is responsive to the priorities and policies of the target group, recipient and donor.                 | <ul style="list-style-type: none"> <li>• Does the intervention address needs?</li> <li>• Is it consistent with the policies and priorities of major stakeholders?</li> <li>• Is it compatible with other efforts?</li> <li>• Does it complement, duplicate or compete?</li> </ul>  |
| Effectiveness  | The extent to which an aid activity attains its objectives and the degree to which desired outcomes are achieved through products and services provided. | <ul style="list-style-type: none"> <li>• Are the desired objectives being achieved at outcome and impact/goal level?</li> <li>• Does it add value to what others are doing?</li> <li>• To what extent are partners maximizing their comparative advantage?</li> </ul>  |
| Efficiency     | The operational and administrative efficiency of projects and services provided.   | <ul style="list-style-type: none"> <li>• Are we using the available resources wisely and well?</li> <li>• What is the efficiency of communication mechanisms, knowledge management and coordination with other agencies?</li> <li>• How can we measure outputs – both qualitative and quantitative – in relation to inputs?</li> </ul> |
| Sustainability | Measuring whether the benefits of an activity are likely to continue after donor funding has been withdrawn.   | <ul style="list-style-type: none"> <li>• Will the outcomes and impacts be sustained after external support has ended?</li> <li>• Will activities, outputs, structures and processes established be sustained?</li> </ul>   |
| Impact         | The positive and negative changes produced by a Development intervention, directly or indirectly, intended or unintended.                                | <p>What changes, positive or negative have occurred?</p> <ul style="list-style-type: none"> <li>• Are these changes attributable to the initiative?</li> </ul>   |

**Source:** United Nations Development Programme, UNDP, (2009) Handbook on Planning, Monitoring and Evaluating For Development Results.

**Table-2.4** Norms of Evaluation

| Evaluation Should be: |   |
|-----------------------|---|
| Independent           | Management must not impose restrictions on the scope, content, comments and recommendations of evaluation reports. Evaluators must be free of conflict of interest.   |
| Intentional           | the rationale for an evaluation and the decisions to be based on it should be clear from the outset   |
| Transparent           | Meaningful consultation with stakeholders is essential for the credibility and utility of the evaluation  |
| Ethical               | Evaluation should not reflect personal or sectorial interests. Evaluators must have professional integrity, respect the rights of institutions and individuals to provide information in confidence, and be sensitive to the beliefs and customs of local social and cultural environments. |
| Impartial             | Removing bias and maximizing objectivity are critical for the credibility of the evaluation and its contribution to knowledge.  |
| Of high quality       | All evaluations should meet minimum quality standards defined by the Evaluation Office.   |
| Timely                | Evaluations must be designed and completed in a timely fashion so as to ensure the usefulness of the findings and recommendations   |
| Used                  | Evaluation is a management discipline that seeks to provide information to be used for evidence-based decision making   |

**Source:** Adapted from, AAUSC. (2016).Monitoring and Evaluation Module, Supported Distance Program.

**Table-2.5** Quality Standards for Evaluation

| Standard       | Requirement  |
|----------------|--|
| Utility        | The evaluation meets the information needs of the intended users and therefore is relevant and timely  |
| Accuracy       | The evaluation uses valid, reliable and relevant information   |
| Independence   | The evaluation is impartial, objective, and independent for the process concerned with policy-making, and the delivery and management of development assistance                        |
| Credibility    | The evaluation is undertaken by evaluators with appropriate skills and experience, is transparent and inclusive  |
| Propriety      | The evaluation is conducted legally, ethically and with due regard for the welfare of those involved in the evaluation, as well as those affected by its results                       |
| Cost effective | The costs of evaluation are proportional to the budget committed to the development intervention being evaluated and remain within the budgetary limits. Resources are used with care. |

**Source:** Adapted from, Patricia J. Rogers. (2012). Introduction to Impact Evaluation, Impact Evaluation Notes, No. 1. Inter Action and The Rockefeller Foundation.

## 2.7 Impact Evaluation

Impact evaluation investigates the changes brought about by an intervention. It can be undertaken on interventions at any scale: a small, local HIV-AIDS project; an entire civil society strengthening program of an NGO; a sequence of natural resource management projects undertaken in a geographic area; or a collection of concurrent activities by different organizations aimed at improving a community's capacity (Patricia, 2012).

This research adopts the OECD/DAC definition of evaluation as “an assessment, as systematic and objective as possible, of an ongoing or completed project, programme or policy, its design, implementation and results positive or negative, intended or not – on individual households, institutions, and the environment ( OECD/DAC, 2002). The aim is to determine the relevance and fulfillment of objectives, developmental efficiency, effectiveness, impact and sustainability. An

evaluation should provide information that is credible and useful, enabling the incorporation of lessons learned into the decision-making process of both recipients and fund suppliers.

This definition:

- Stresses the search for any effect, not only those that are intended.
- recognizes that effects may be positive and negative.
- recognizes that effects of interest are ‘produced’ (somehow caused) by the intervention.
- suggests the possibility of different kinds of links between all kinds of development intervention (project, programme or policy) and effects.
- focuses on the longer-term effects of development interventions.

Impact evaluation helps us better understand the extent to which activities reach the poor and the magnitude of their effects on people’s welfare. Impact evaluations can range from large scale sample surveys in which project populations and control groups are compared before and after, and possibly at several points during program intervention; to small-scale rapid assessment and participatory appraisals where estimates of impact are obtained from combining group interviews, key informants, case studies and available secondary data (World Bank, 2004).

For development practitioners, impact evaluations play a key role in the drive for better evidence on results and development effectiveness. They are particularly well suited to answer important questions about whether development interventions do or do not work, whether they make a difference, and how cost-effective they are. Consequently, they can help ensure that scarce resources are allocated where they can have the most developmental impact (UNDP, 2009).

### **Why Should We Do Impact Evaluation?**

Impact evaluations may be conducted for a range of purposes and to provide information to a range of audiences. The way a particular evaluation is conducted, its unit of evaluation (e.g. project/program/business unit etc.), the data that is collected for it and the methodology used to interrogate that data, are all functions of the evaluation’s purpose and audience. The best way to undertake a particular impact evaluation depends in part on its purpose and who its primary intended users are. Some common reasons for doing impact evaluation include:

- To decide whether to fund an intervention – “ex-ante evaluation” is conducted before an intervention is implemented, to estimate its likely impacts and inform funding decisions.
- To decide whether or not to continue or expand an intervention.
- To learn how to replicate or scale up a pilot.
- To learn how to successfully adapt a successful intervention to suit another context.
- To reassure funders, including donors and taxpayers (upward accountability), that money is being wisely invested – including that the organization is learning what does and doesn’t work, and is using this information to improve future implementation and investment decisions.
- To inform intended beneficiaries and communities (downward accountability) about whether or not, and in what ways, a program is benefiting the community (UNDP, 2009).

**Table: 2.6** Examples of key evaluation questions for impact evaluation.

|  |  |
|--|--|
| <p><b>Overall impact</b></p> <ul style="list-style-type: none"> <li>•Did it work? Did [the intervention] produce [the intended impacts] in the short, medium and long term?</li> <li>•For whom, in what ways and in what circumstances did [the intervention] work?</li> <li>•What unintended impacts (positive and negative) did [the intervention] produce?</li> </ul> | <p><b>How it works</b></p> <ul style="list-style-type: none"> <li>•How did [the intervention] contribute to [intended impacts]?</li> <li>•What were the particular features of [the intervention] that made a difference?</li> <li>•What variations were there in implementation?</li> <li>•What has been the quality of implementation in different sites?</li> <li>•To what extent are differences in impact explained by variations in implementation?</li> </ul> |
| <p><b>Nature of impacts and their distribution</b></p> <ul style="list-style-type: none"> <li>•Are impacts likely to be sustainable?</li> <li>•Did these impacts reach all intended beneficiaries?</li> </ul>  | <p><b>Match of intended impacts to needs</b></p> <ul style="list-style-type: none"> <li>• To what extent did the impacts match the needs of the intended beneficiaries?</li> </ul>   |
| <p><b>Influence of other factors on the impacts</b></p> <ul style="list-style-type: none"> <li>•How did [the intervention] work in conjunction with other interventions, programs or services to achieve outcomes? <ul style="list-style-type: none"> <li>• What helped or hindered the intervention to achieve its impacts</li> </ul> </li> </ul>                       |  |

**Source:** Adapted from, Patricia J. Rogers. (2012). Introduction to Impact Evaluation, Impact Evaluation” Notes, No. 1 March 2012. Inter Action and The Rockefeller Foundation.

**Table: 2.7 Models of Impact Evaluation**

| Model   | Design   | Example  | Indicative cost and Time   |
|---|--|--|--|
| 1. Randomized pre-test/post-test evaluation.  | Subjects (families, schools, communities etc.) are randomly assigned to project and control groups. Questionnaires or other data collection instruments (anthropometric measures, school performance tests, etc) are applied to both groups before and after the project intervention. Additional observations may also be made during project implementation  | Water supply and sanitation or the provision of other services such as housing, community infrastructure etc. where the demand exceeds supply and beneficiaries are selected by lottery. Example: Bolivia Social Fund. | 1-5 years depending on time which must elapse before impacts can be observed. Cost can range from \$50,000 - \$1million depending on the size and complexity of the program being studied. |
| 2. Quasi-experimental design with before and after comparisons of project and control populations | Where randomization is not possible, a control group is selected which matches the characteristics of the project group as closely as possible. Sometimes the types of communities from which project participants were drawn will be selected. Where projects are implemented in several phases, participants selected for subsequent phases can be used as the control for the first phase project group.  | These models have been applied in World Bank low-cost housing programs in El Salvador, Zambia, Senegal and the Philippines.  | Cost and timing similar to Model 1.  |
| 3.Ex-post comparison of project and non-equivalent control group.                                 | Data are collected on project beneficiaries and a non-equivalent control group is selected as for Model 2. Data are only collected after the project has been implemented. Multivariate analysis is often used to statistically control for differences in the attributes of the two groups.   | Assessing the impacts of micro-credit programs in Bangladesh. Villages where microcredit programs were operating were compared with similar villages without these credit programs.                                    | \$50,000 upwards. The cost will usually be one third to one half of a comparable study using Models 1 or 2.  |
| 4. Rapid assessment ex-post impact evaluations.   | Some evaluations only study groups affected by the project while others include matched control groups. Participatory methods can be used to allow groups to identify changes resulting from the project, who has benefited and who has not, and what were the project's strengths and weaknesses. Triangulation is used to compare the group information with the opinions of key informants and information available from secondary sources. Case studies on individuals or groups may be produced to provide more in-depth understanding of the processes of change. | Assessing community managed water supply projects in Indonesia.  | \$25,000 upwards (the Indonesia study cost \$150,000). Some studies are completed in 1-2 months; others take a year or longer.   |

**Source:** Adapted from, The International Bank for Reconstruction and Development/The World Bank. (2004).

## **How Should We Choose Methods for Impact Evaluation?**

There has been considerable debate in development evaluation, and more broadly, about which methods are best for impact evaluation. These discussions reflect different views on what constitutes credible, rigorous and useful evidence, and who ought to be involved in conducting and controlling evaluations (Patricia, 2012).

Some organizations and evaluators have argued that particular methods or research designs should be used wherever possible – for example, randomized controlled trials or participatory methods. Others have argued for situational appropriateness. This means choosing methods that suit the purpose of the evaluation, the types of evaluation questions being asked, the availability of resources, and the nature of the intervention – in particular whether it is standardized or adaptive, and whether interventions work pretty much the same everywhere and for everyone or are greatly affected by context.

### **When choosing methods, it is important to address each of six different aspects of an impact evaluation:**

- Clarifying the values that will underpin the evaluation – what will be considered desirable and undesirable processes, impacts and distribution of costs and benefits?
- Developing and/or testing a theory of how the intervention is supposed to work – these are sometimes referred to as theories of change, logic models or program theory.
- Measuring or describing these impacts and other relevant variables, including processes and context.
- Explaining whether the intervention was the cause of observed impacts.
- Synthesizing evidence into an overall evaluative judgment.
- Reporting findings and supporting their use (Patricia, 2012).

## **2.8 Challenges of Impact Evaluation**

A number of common challenges for development evaluation are described below, along with some suggestions for addressing them. It has been increasingly apparent that no one

methodological toolkit can appropriately evaluate all kinds of projects and programmes. For example, these may:

- **Be inherently difficult to measure** – cultural changes around equality and human rights, greater empowerment and participation in governance or strengthening civil society are all socially constructed and have qualitative as much as quantitative outcomes.

- **Have causal pathways** – what evaluators call ‘theories of change’ – that lead from programme to outcome that are often complex, little understood and hard to unravel, making them unsuited to analysis through the experimental manipulation of single causal factors.

- **Be relatively small scale** and not provide the numbers of cases needed for statistical analysis. This is made even more difficult when development programmes are quite sensibly ‘tailored’ to take account of their very different contexts, depriving evaluators of a standard intervention to compare, control for or measure.

- **Variation in implementation and environment** across different sites

An intervention may have been implemented in quite different ways to suit the different contexts in different country offices around the world, or in different geographic areas within a country. It can be useful to compare the theories of change for each site.

- **Heterogeneous impacts**

Development interventions often only work well for some people, and may be ineffective or even harmful for some other people. In addition, the success of an intervention in terms of achieving desirable impacts is often affected by the quality of implementation. It is therefore important to not only calculate and report on the average effect but to also check for differential effects. This requires gathering evidence where possible about the quality of implementation and data about contextual factors that might affect impacts, including participant characteristics and the implementation environment.

- **Long time scales**

Often the intended impacts will not be evident for many years, but evidence is needed to inform decisions before then (e.g., on whether or not to launch a subsequent phase or replicate the model elsewhere). A theory of change can identify intermediate outcomes that might be evident in the

life of an evaluation. In some cases, research evidence can be used to fill in later links, and estimate likely impacts given the achievement of intermediate outcomes. Consideration should also be given to the expected trajectory of change – when impacts are likely to be evident.

#### **•Influence of other programs and factors**

The impacts of development interventions are heavily influenced by the activities of other programs and other contextual factors that might support or prevent impacts being achieved.

#### **•Resource constraints**

Existing evidence (in the form of program documentation, baseline data and official statistics) may have gaps, and there may be few resources (in terms of funding, staff time or access to specialist technical expertise) to collect the types of evidence needed for quality impact evaluation. For a specific evaluation, when existing evidence is scarce and there are few resources to gather additional evidence, key informant interviews from diverse informants may provide sufficient data, including reconstructing baseline data. Planning ahead for impact evaluation can reduce resource constraints by building in sufficient resources at the design and budgeting stage, and/or strategically allocating evaluation resources across interventions so that they are concentrated more on a smaller number of more comprehensive evaluations of strategically important interventions.

In general an impact evaluation should begin with a plan that clarifies its intended purposes, including identifying intended users, the key evaluation questions it is intended to answer, and how it will address the six components of impact evaluation – clarifying values, developing a theory of change, measuring or describing important variables, explaining what has produced the impacts, synthesizing evidence, and reporting and supporting use. Having this plan reviewed (including by intended users) will increase the likelihood of producing a high quality impact evaluation (UNDP, 2009).

#### **Indicators**

Indicators are clues, signs or markers that measure one aspect of a program and show how close a program is to its desired path and outcomes. Indicators are realistic and measurable criteria of project progress. They should be defined before the project starts, and allow us to monitor or

evaluate whether a project does what it said it would do. In project planning; indicators form the link between theory and practice. An indicator is a tool to help us to know whether our work is making a difference. Indicators usually describe observable changes or events which relate to the project intervention. They provide the evidence that something has happened – whether an output delivered, an immediate effect occurred or a long-term change observed (UNDP, 2009). Indicators are required to be (SMART): specific, measurable, attainable, reliable and time bounded (AAUSC, 2016).

**Table: 2.8** Evaluation indicators

| Indicator type | Characteristics and use  | Observations  |
|----------------|--|---|
| direct         | For observable change resulting from activities and outputs.                           | simply be a more precise and operational restatement of the objective |
| Indirect/proxy | Useful when the objective is not directly observable e.g.                              | May be used in addition to /instead of direct indicators              |
| Qualitative    | A way of measuring levels of participation, attitudinal change, behavioral change etc. | Special effort and attention required to get real value.              |
| Quantitative   | Can measure frequency, growth rates, prices  | Often perceived as more reliable and more useful for comparison       |
| Process        | Allows measurement of how things are being done  | Often subjective as it relies personal perspectives                   |
| Cross cutting  | Often used to describe indicators relating to gender, diversity, environment           | Will still need to be direct, indirect, quantitative or qualitative.  |
| Formative      | Set up within a timeframe to be measure during a phase of intervention                 | Sometimes used interchangeably with milestones.                       |
| Summative      | Used to measure performance at the end.  | Formative and summative are terms also applied to evaluations.        |

**Source:** Adapted from, AAUSC. (2016). Project Monitoring and Evaluation Module, Supported Distance Programme.

## **2.9 Prevention of Mother to Child HIV Transmission (PMTCT)**

Human Immunodeficiency Virus (HIV) is a virus that damages the body's immune system, the system that fights infections. HIV is an etiologic agent of AIDS and can be transmitted by sexual contact, from blood and blood products, sharing injection needles or instruments used in tattooing or circumcision and by HIV-infected mothers to their infants during pregnancy, birth or breast feeding. Globally 36.7 million people are living with HIV. 1 million AIDS related deaths per year; about 5000 new HIV infections (adults and children) a day; about 64% are in sub-Saharan Africa (UN AIDS Reference, 2017).

In Ethiopia there are 710, 00 people living with HIV PLWHIV; New yearly HIV infections 30 000; yearly Aids related deaths 20, 000; Stigma and Discrimination= 59.9 %; yearly HIV expenditure \$= 408,577,985 of this only \$= 53,357,570 is sourced from domestic source (UN AIDS Reference 2017).

Ethiopia is among the ten countries in the world with the highest burden of HIV infections among children where mother-to-child transmission (MTCT) occurs in a third of infants born to HIV-infected mothers (Fisseha&Bereket2016). Prevention of mother-to-child transmission (PMTCT) services is available in Ethiopia, but during 2012 only an estimated 50% of pregnant women used these services implying that 50% of these pregnant women did not access PMTCT services. Reasons for non-utilization of PMTCT services were unknown, but might have been affected by the women's lack of knowledge/awareness about the maternal and neonatal outcomes of the programme (Fisseha & Bereket 2016).

According to the World Health Organization ([WHO] 2011:1–12), four elements are helpful to reduce the incidence of PMTCT:

- Primary prevention of HIV infections.
- Family planning.
- Antiretroviral therapy (ART) interventions.
- Care, treatment and follow-up services.

The goal of PMTCT programmes is to maximize the health of the HIV-positive woman and decrease the chances of mother-to-child transmission of HIV (MTCT), by decreasing the viral load

(VL) and increasing the CD4<sup>1</sup> count, whilst maintaining the maximum level of health throughout pregnancy (WHO 2011:1–12). Proper implementation of these four prongs of PMTCT services could reduce the incidence of MTCT and improve the quality of these services(Tefera & Valerie,2016:1). The main objective of World Vision Ethiopia`s PMTCT projects is contributing to these national and global initiative.

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## **CHAPTER THREE**

### **RESEARCH METHODOLOGY AND DESIGN**

The research process is systematic in that defining the objective, managing the data, and communicating the findings occur within established frameworks and in accordance with existing guidelines. The frameworks and guidelines provide researchers with an indication of what to include in the research, how to perform the research, and what types of inferences are probable based on the data collected (Creswell, 1994). This Chapter of the study deals with the research design and methodology employed to do the research.

#### **3.1 Description of the study Area/Organization**

Shashemene and Adeaberga are located in Oromia regional state. Shashemene is located in West Arsi while Adeaberga is in west Shoa zone. Shashemene is located at 250 KMs from Addis Ababa in the southern part of the country while Adeaberga is located at 80KM west of Addis Ababa. Kolfie Kenanio is one of the sub cities of Addis Ababa city administration. The population of Shashemene, Adeaberga and Kolfie Keranio is 261,831, 120,177, and 465,811 respectively (World Vision Ethiopia, WVE, 2014).

#### **3.2 Research Approach**

The three common approaches to conducting research are quantitative, qualitative, and mixed methods (Creswell, 1994). Qualitative methods are used to gain a deeper understanding of the studied problem. The objective in a qualitative study is to describe the big picture of the context that includes the problem. A qualitative method requires a significant closeness to the studied source. It is characterized by unsystematic observations as informal interviews or an interview schedule with no fixed answer alternatives (Kothari, 2004).

Quantitative methods on the other hand are based on structured surveys with predetermined possible answers. In contrast to qualitative methods it consists mostly of general conclusions and assessments. When the information is gathered, formal analysis and comparisons are made to determine in which situations, and for what units, the drawn conclusions are valid. In quantitative methods the analysis of collected information is characterized by statistical methods. Mixed

method, also called methodological triangulation, uses both methods simultaneously (Creswell, 1994).

Both qualitative and quantitative methods have the common purpose to create an understanding of how society works and of the problems that may arise. The most significant difference between the two methods is that quantitative methods focus on transforming information into numbers and amounts which can be analyzed. Qualitative methods on the other hand focus on the researcher's interpretation of motives, social processes and context of the problem (Kothari, 2004).

Qualitative methodology is utilized to do the research. This research methodology, as explained above, uses a set of non-statistical inquiry techniques and processes to gather data about social phenomena (McNabb, 2005:341). Qualitative research is a holistic approach that involves discovery. Qualitative research is also described as an unfolding model that occurs in a natural setting that enables the researcher to develop a level of detail from high involvement in the actual experiences (Creswell, 1994).

The study was made with a deductive approach, based on standard project evaluation guidelines and principles as stated in the literature review. The complexity of the studied issue made the qualitative methodological approach most suitable for the study. A quantitative method was considered less useful in the analysis of the issue. The research was made through detailed document analysis and unstructured interviews with individuals with key-roles within the involved project and evaluation organizations.

There are five areas of qualitative research: case study, ethnography study, phenomenological study, grounded theory study, and content analysis (Creswell, 2003). This is a case study research. From the various approaches in qualitative method, the study utilized description and exploration. To describe is to draw a picture of what happened or how things are proceeding or what a situation or an event is like. It aims at describing the state of affairs as it is. It sets to describe and interpret what it is. It, therefore, helps to make complicated things, in this case, impact, development and related issues understandable. Exploration on the other hand focuses on expanding understanding

on issues under study such as development intervention and associated impacts. Hence, both techniques are believed best serve the achievement of the objectives of the study.

### **3.3 Data Type and Source**

#### **3.3.1 Data type**

The researcher anticipates the type of data needed to respond to the research question. This study used both primary and secondary data to answer the research questions.

#### **3.3.2 Data source**

Primary data were gathered through key informant interview. Intensive interviews allow informants to elaborate their views and attitudes (Adams et al, 2007). Interviewees are selected from both World Vision Ethiopia and Integrity Consulting Service (the company that had conducted the independent evaluation of the projects in question).

For the secondary data Literature review method is utilized. Data, on the issue, is gathered from Books, Journals, Periodicals, Proceedings, Government Publications and Official Releases and the Internet.

### **3.4 Data Collection Methods and tools**

Data on the issue is gathered through interview and document analysis. The two methods complement each other to strengthen the reliability of research.

### **3.5 Data Analysis and Presentation**

As data means raw material, it has to pass through a process of analysis and interpreted accordingly before their meaning and implications are understood. This research uses both description and exploration. Data elicited through interview and document analysis will be presented in mainly in narration form; but graphs are also used as deemed necessary.

## **3.6 Validity and Reliability**

### **3.6.1 Validity**

The validity of the study concerns the author's ability to translate and convey the collected data correctly. The author's close cooperation with the different project's management team created an open and honest information flow. Since the data collection was made in close collaboration with the organizations conditions were good for the author to get a correct picture of the studied issue. The respondents in the interviews were closely familiar with the studied topic. Together, these factors contribute for the validity to be considered high in the study.

### **3.6.2 Reliability**

Reliability or replicability estimates the consistency of the measurement or more simply, the degree to which an instrument measures the same way each time it is used under the same conditions with the same subjects. Reliability is essentially about consistency (Adams et al, 2007).

It is widely believed that qualitative research is highly susceptible to the influence of the researcher's interpretation and view of the studied issue. To this effect notes were taken during all interviews to minimize the risk of misunderstanding and make it possible to control the answers during the analysis of the study. As result, a new study of the issue is highly likely to reach the same conclusion.

# **CHAPTER FOUR**

## **DATA PRESENTATION AND ANALYSIS**

### **4.1 Data Presentation**

#### **4.1.1 Introduction**

In research context, the word data points to information that is collected in a systematic way and organized and recorded to enable the reader to interpret the information correctly. Data analysis on the other hand, as Marshall and Rossman (1999) points out, is the process of bringing order, structure and meaning to the mass of collected data. According to Gibbs (2007) qualitative data analysis is a process of transformation of collected qualitative data, done by means of analytic procedures, into a clear, understandable, insightful, trustworthy and even original analysis. Qualitative data analysis, according to Creswell (2013), is both inductive and deductive and establishes patterns or themes where data presentation and analysis is undertaken simultaneously. In other words qualitative analysis transforms data into findings.

For the sake of simplicity the author opted to organize the data by taking the research objectives as themes of the research. Accordingly, data elicited from documents, in this case the final evaluation report and the project concept note, and through key informant interview is presented thematically. The data presentation is divided in to two. The first part of data presentation covers, the project summary table; the logically connected project goal, outcome, output and activities; the project log frame; and expected project impact. All of them are obtained from the project concept note that the organization under study (World Vision Ethiopia) prepared and submitted to the funding organization, World Vision Hong Kong, in 2013. The second part, covers the final project evaluation. Its main source is the final evaluation report and key informant interview.

## 4.1.2 Project Plan

**Table: 4.1 the projects background, a summary**

|                               |  |
|-------------------------------|--|
| Project Name                  | Enhancing Community PMTCT service for elimination of new HIV infections  |
| Country                       | Ethiopia   |
| Region                        | Oromia regional state and Addis Ababa City Administration  |
| Project Location (ADPs)       | Three Area Development Programmes (Shashemene, Adeaberga, and Kolfie Keranio)  |
| Project duration              | Three years ( January 1 , 2014 to November 30 , 2016 )   |
| Project Goal                  | To contribute to the elimination of new HIV infections in new born and reduction of child and maternal mortality.  |
| Project Outcomes              | <ol style="list-style-type: none"> <li>1. Increased uptake and reduced loss to follow-up to PMTCT services through demand creation.</li> <li>2. Improved capacity of PMTCT service providers.</li> <li>3. Enhanced evidence-based decision making to address challenges and bottlenecks for uptake and follow-up of PMTCT services.</li> </ol> |
| No. of Direct Beneficiaries   | 5,000 (Pregnant mothers, HIV positive pregnant and lactating mothers with their respective partners, infants and young children of HIV positive parents, and general HIV positive persons)   |
| No. of Indirect Beneficiaries | 15,000 (Members of community care coalitions (CCC's), community based organizations (CBO's), community case managers, home visitors, health volunteers, health development army (HDA), health extension workers (HEW's), district level PMTCT health professionals, PLHIV and the general community)   |
| Project budget (in USD)       | <p>Total budget for the entire life of the project is US\$ 492, 768</p> <p>FY'14 = 187,606 USD</p> <p>FY'15 = 188,828 USD</p> <p>FY'16 = 116,334 USD</p>   |
| Funding Agency                | World Vision Hong Kong   |

**Source:** World Vision Ethiopia, WVE. (2013). Project Concept Note.

### **4.1.3 Project Goal, Outcomes and Outputs**

The overall goal of the *Project* is to contribute to the elimination of new HIV infections in new born and reduction of child and maternal mortality. In the process, the project aims to achieve three inter-related outcomes.

1. Increase uptake and reduce loss to follow-up to PMTCT services.
2. Improve provision of quality PMTCT services at community, Woreda, City and national levels.
3. Enhance evidence-based decisions on challenges related to low uptake and loss to follow-up of PMTCT services.

#### **Detailed description of outputs and Activities**

**Expected Outcome 1:** Increased uptake and reduced loss to follow-up to PMTCT services through demand creation

#### **Outputs for Outcome 1**

**Output 1.1:** HIV and MTCT related Strategic Behavior Communication (SBC) interventions and entitlements to preventive services provided.

#### **Major activities for output 1.1:**

- Conduct a series of behavior change communication (BCC) related activities
- Provide HIV preventive trainings for reproductive age parents
- Provide HTSP training for reproductive age parents
- Provide comprehensive holistic messaging for reproductive age females on MCH/PMTCT services
- Conduct life skills training for HIV prevention for young children and youth
- Provide information and promote counseling and testing

**Output 1.2:** Communities sensitized on stigma and discrimination against PLHIV

#### **Major activities for output 1.2:**

- Conduct Channels of Hope (CoH) training for FBOs focusing on impacts of stigma and discrimination on PMTCT service uptake and reducing loss to follow-up
- Engage traditional leaders and other key entities to become champions of PMTCT and to start to address social and gender norms through CoH

- Conduct community PMTCT training for CCCs/CBOs
- Conducting Community dialogues on PMTCT
- Conduct review meeting with CBOs to stigma and discrimination issues in their bylaws

**Output 1.3:** Peer support provided for pregnant and lactating HIV positive mothers

**Major activities for output 1.3:**

- Provide trainings for strengthening community organizations/structures for PMTCT services
- Form and strengthen mother to mother support group
- Conduct PMTCT training for home visitors and case managers
- Support the formation of community ambulance where no car Ambulance is available
- Support mother support groups and PLHIV associations in their response to evidence based barriers to PMTCT services.

**Output 1.4:** Community Resources and assets mobilized for PMTCT services

**Major activities for output 1.4:**

- Provide trainings for Community Support Groups on mobilizing services and assets for PMTCT
- Facilitate community support for mobilizing resources and assets (transport/ linkage w/nutrition/financial support)

**Output 1.5:** Increased male involvement in PMTCT services

**Major activities for output 1.5:**

- Conduct CoH for Gender training for FBOs and CBOs
- Conduct CoH for gender for couple PLHIV

**Outcome 2:** Improved capacity of PMTCT service providers.

**Outputs for Outcome 2**

**Output 2.1:** Community groups strengthened to provide PMTCT services

**Major activities for output 2.1:**

- Provide TTC training for Mother to Mother (M2M) support groups;
- Conduct counseling skills for home visitors;

- Facilitate community's labour contribution in farm/house maintenance/construction for pregnant PLHIV mothers;
- Facilitate community's contribution for support in mothers' transportation to health facilities.

**Output 2.2:** Health facilities strengthened to provide PMTCT services.

**Major activities for output 2.2:**

- Support needy pregnant PLHIV mothers in food;
- Medical support for needy PLHIV for OI treatment;
- Conduct PMTCT training for health professionals;
- Reward mothers who are delivering at HFs;
- Support HCs MCH section in delivery kits and others based on research findings which will be conducted as part of this project and ultimately inform the project.

**Outcome 3:** Enhanced evidence-based decision making to address challenges and bottlenecks for uptake and follow-up of PMTCT services.

**Outputs for Outcome 3:**

**Output 3.1:** Strengthened M&E systems in health facilities.

**Major activities for output 3.1:**

- Provide M&E training for woreda health staffs;
- Support HFs and community support groups in referral formats;
- Provide ongoing support, follow up and mentoring of community actors;
- Provide ongoing mentoring and support.

**Output 3.2:** Increased use of evidence for decision making in PMTCT service Improvement.

**Major activities for output 3.2:**

- Conduct formative research on challenges of PLHIV mothers in adherence to PMTCT services; conduct baseline survey; and conduct final evaluation of the project.

**Output 3.3:** PMTCT Service provision monitored through community participation.

**Major activities for output 3.3:**

- Identify level of knowledge and competency of community support groups around c-PMTCT M&E;

- Strengthen community referral system to health facilities;
- Set up functional reporting system for CHW.

#### **4.1.4 Anticipated Impacts of the Project.**

As the WVE’s sponsorship program is currently addressing the general HIV transmission in the community at large, this specific project will bridge the gap by focusing on MTCT as well as on mothers and children. The project will build the local capacity to respond to PMTCT at two levels – individual and institutional.

1. At individual level, the project will have improved the awareness of HIV positive mothers and their partners on the availability and importance of PMTCT services, and enhanced the demand for PMTCT services.
2. At institutional level,
  - a) Communities will have their capacities strengthened to respond to PMTCT as a result of this project.
  - a) Interventions on community based institutions will have also improved the institutions’ capacity to mobilize local resources and assets that contribute towards improved adherence to PMTCT services and early diagnosis of infants.

At aggregate level the interventions are expected to improve the capacity of community based institutions to influence the coverage and quality of PMTCT services provided locally. Moreover, the project will ultimately contribute to the global goals of eliminating new HIV infections in children and reducing related maternal mortality.

#### **4.1.5 Sustainability and Transition Plan**

This project will be implemented in parallel with the existing health, nutrition and HIV/AIDS project (which is also funded by WVHK sponsorship programme and focused mainly on the general community based HIV/AIDS preventions and OVC care and support services). The existence of the sponsorship funded health programme at the ADPs will ensure the short term sustainability of this project until the target community institutions such as PLHIV and CBOs have sufficient capacity to own project activities (WVE, 2013). The logical framework of the project is indicated hereunder as table 4.2.

**LEAP PROJECT MONITORING & EVALUATION**

|                        |                                  |                          |                                  |
|------------------------|----------------------------------|--------------------------|----------------------------------|
| <b>Project Name:</b>   | <b>Enhancing Community PMTCT</b> | <b>Programme Name:</b>   | <b>HIV &amp; AIDS Prevention</b> |
| <b>Project Number:</b> | <b>201705</b>                    | <b>Programme Number:</b> | <b>00271</b>                     |

|                         |                    |
|-------------------------|--------------------|
| <b>Project Logframe</b> | <b>Project ITT</b> |
|-------------------------|--------------------|

Enter information in the following columns: Indicator Definition, Unit, Data Collection Methodology, Frequency of Data Collection, and Who is Responsible

| Log Frame Code*       | L1      | L2     | L3       | Summary of objectives  | Indicator               | Indicator Definition                          | Unit | Data Sources   | Data Collection Methodology | Frequency of Data Collection   | Who is Responsible |
|-----------------------|---------|--------|----------|--|-------------------------|---|------|----------------|-----------------------------|--------------------------------|--------------------|
|                       | Outcome | Output | Activity |  |                         |   |      |                |                             |                                |                    |
| <b>Programme Goal</b> |         |        |          | Reduced Impact of HIV and community's vulnerability to new HIV Infection | New HIV Prevalence rate | HIV Incidence rate from the target population | Rate | Secondary data | Health Office               | Baseline and Evaluation report | NO & ADPs          |

Enhancing Community PMTCT se

|     |   |   |  |  |   |  |            |  |  |                    |           |
|-----|---|---|--|--|---|--|------------|--|--|--------------------|-----------|
|     |   |   |  | To contribute to the elimination of new HIV infections in new born and reduction of child and maternal mortality.            | Percentage of HIV free infants born to HIV infected mothers   | Estimated percentage of infants born from HIV infected mothers and free of HIV                                       | Persons    | Secondary data from Woreda Health offices  | Woreda Health Office reports                     | Baseline & Endline | NO & ADPs |
| 1   | 1 |   |  | Increased uptake and reduced loss to follow-up to PMTCT services through demand creation.                                    | % of defaulting HIV care clients who return to care, Default Rate = (# of defaults/total appointments) x 100, Return to Care rate = (# who returned to care/sum missed appts, defaulters &LTFU) X 100 | Estimated proportion of women voluntarily tested for HIV during pregnancy  | Persons    | secondary data from Woreda Health offices and health facilities and baseline and end line survey | Woreda Health Office reports and Document Review | Baseline & Endline | NO & ADPs |
| 1.1 | 1 | 1 |  | HIV and MTCT related Strategic Behaviour Communication (SBC) interventions and entitlements to preventive services provided. | Number of pregnant PLHIV mother who attended 4FANC  | Number of pregnant PLHIV attended 4FANC  | Persons    | secondary data from health facilities & Project report   | Interviews and report from the health facilities | Biannual           | ADPs      |
| 1.2 | 1 | 2 |  | Communities sensitized on stigma and discrimination against PLHIV  | Number of influential community leaders who sensitized on the impact of stigma and discrimination in reducing PMTCT services  | Estimated percentage of health workers who reported stigma and discrimination on HIV infected persons because of HIV | Persons    | Project Report and secondary data from woreda health offices                                     | Surveys and interviews                           | Biannual           | ADPs      |
| 1.3 | 1 | 3 |  | Peer support provided for pregnant and lactating HIV positive mothers  | Percent of pregnant and lactating HIV positive mothers who received peer support  | Estimated percent of pregnant or lactating mothers who reported to have received peer support                        | Persons    | secondary data from health facilities and woreda health offices & Project report                 | Reports and interviews                           | Biannual           | ADPs      |
| 1.4 | 1 | 4 |  | Community Resources and assets mobilized for PMTCT services  | # and % of trained and functional CBOs/FBOs   | Existence and function of estimated # or % of CBOs   | Groups     | secondary data from woreda health offices and project monitoring reports                         | Reports and interviews                           | Biannual           | ADPs      |
| 1.5 | 1 | 5 |  | Increased male involvement in  | Proportion of men who accept voluntary counseling and testing for HIV, provide moral and  | Estimated proportion of men who support their  | Proportion | Project report and secondary data from   | Surveys and interviews                           | Biannual           | ADPs      |

#### **4.1.6 Evaluation Plan**

The project monitoring and knowledge management activities will document and share lessons, successes and survey findings in order to inform policies, programmes and actions at local and national levels. The project will employ two complementary methods to monitor, evaluate and assess changes and impacts measured against baseline indicators.

##### **a. External Project Monitoring and Evaluation**

A monitoring and evaluation team will be established in the target woredas and kebeles. At the woreda level, the team will be drawn from the Office of Woreda Administration, Woreda Health Office and Woreda Women Affairs Offices. Their tasks will include ensuring that the project is in line with the government plans and policies; ensuring effective integration with other government health or HIV/AIDS programmes; and providing overall guidance and support to the project.

##### **b. Participatory impact and process monitoring**

Participatory impact and process monitoring activities will enable the project to assess if the project has made desired changes on target groups' health meeting the stated objectives, and will identify problems encountered in the course of implementation. The approach takes into account target groups' perceptions of key change indicators. The project team will facilitate the impact and process monitoring design and application and document the key lessons and take corrective measures in the course of the project execution.

To measure the effectiveness of the project in elimination of new HIV infections in newborn and reduction of child and maternal mortality, baseline data will be established and mid-term and end-line evaluations will show the extent to which the project outputs translated into mortality reductions.

#### **4.1.7 Project Evaluation: Actual**

##### **4.1.7.1 Evaluation period & Team Structure**

The final evaluation was conducted during the last quarter of the project life time by an independent external professional organization called Integrity Consultancy Services. The evaluation took two months to complete, March-April 2017<sup>2</sup>. The evaluation team was comprised of a consultant serving

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<sup>2</sup>Wubshet Ali, Health and Nutrition Grant Manager, (Addis Ababa, May 14 2018, in an interview). Mr. Wubshet was also the main coordinator of the evaluation process from WVE side.

as the Team Leader and Task manager with appropriate educational background, Master`s Degree in Public Health and Sociology and Information technology. The Evaluation team worked under the direct supervision of the C-PMTCT Project Manager from World Vision Ethiopia (WVE) country office (WVE, 2017)

#### **4.1.7.2 Evaluation Objective**

The purpose of the final evaluation is to assess the results achieved against the project`s target outputs, outcomes and indicators and evaluate the overall impact of the project as experienced by participants, local government partners and the community more broadly. The evaluation also dealt with identifying and documenting the lessons learnt through the implementation of the project so that they can be shared and replicated throughout World Vision Ethiopia`s work and can inform good practice in C-PMTCT more broadly. It assesses the relevance, effectiveness, efficiency and sustainability of the project outputs and outcomes.

The main purpose of this end line evaluation is to obtain a timely, precise and reliable assessment of the impact of the project on children and women; to assess the project progress, and to provide specific, actionable and practical recommendations on the future status of on-going critical tasks and risks for the project and for potential scale up of the approach elsewhere by conducting an independent, external evaluation using the key project evaluation criteria shown below as proposed by the project organization, World Vision Ethiopia.

- Review the Relevance of the project and its approaches in the context of the development need and potential of the intervention areas;
- Verify the Efficiency and Effectiveness of the results achieved and trace the changes observed in the lives of the target beneficiaries, as a result;
- Critically examine the continuing validity of the assumptions on which the project's likely Impact was based
- Analyze Sustainability of the project initiatives from the point of view of local stakeholders including target beneficiaries` participation, institutional arrangements, compatibility of project objectives and target community need, etc.

- Assess level of the intended synergies/integration/complementarities as well as the coordination of the project interventions with other on-going similar initiatives implemented in the respective project intervention wordas by both the government and other actors.
- Draw lessons and give respective recommendations having strategic significance for improvement in future similar actions/project scaling up.

#### **4.1.7.3 Evaluation Methodology**

##### **Evaluation Design**

The project final evaluation was conducted on participatory and process oriented manner involving all partners and stakeholders at all levels. In order to generate the required project end-line data, the consultant team employed a mix of qualitative and quantitative research design. The reason for using a mixed methodology was that it would generate a richer and stronger array of evidence that any single type of data alone would be able to accomplish. It would also provide the opportunity to access and present a greater diversity of divergent views and increase the utility of the inquiry, both of which were central drivers behind the evaluation.

##### **General Evaluation Approach**

Designing an appropriate evaluation approach had a great role to make this evaluation task much easier and fulfill the objectives of the end-line evaluation. Our evaluation team has adopted the approach employed during the baseline survey of the projects for the ease of maintaining consistency and comparability between baseline survey and end-line evaluation finding results.

During the course of the evaluation we had tried to actively involve all relevant stakeholders participated during design and implementation of the project including, implementing partners (WVE and local government), government sectors engaged in health services (Health Centers) at project target areas level and professionals, project beneficiary Pregnant and lactating mothers and various community level groups. Consultation with these stakeholders were helpful in displaying and expressing their situation, their challenges and their achievements in their own words and images at

grass root level. Hence, our approach was aimed at being both consultative and collaborative with a view to provide both qualitative and quantitative results.

In order to assess the overall achievements of expected outcome(s) of the project towards achieving visible and equitable improvements in sustainable C-PMTCT service delivery through project evaluation in the project targeted zones and woredas of WVE, analysis was made between Before and After projects situation. Hence, our bench-mark for comparison was baseline line data that was documented during baseline survey of the project. Regarding the Evaluation Criteria, the consulting team has adopted standardized evaluation criteria proposed in the ToR and the Development Assistance Committee (DAC) of OECD-DAC3; which include relevance, efficiency, effectiveness, impact and sustainability.

### **Data Collection and presentation**

During the project evaluation; Quantitative and qualitative instruments, such as individual interview for pregnant and lactating mothers, desk review, in-depth interviews of key informants, focus group discussions, and secondary documents review were used to collect quantitative and qualitative information. The questionnaire were submitted to the client and obtained constructive comments before using. All the process of data collection was conducted using the developed data collection tools and the project outputs were photographed and the interviewees were recorded for documentation and evidence based report is produced. Descriptive statistics (frequencies, percentages, cross tabulations, graphs and charts) were produced using the software in a way to understand the current project status according to the project evaluation criteria's with respect to the project objectives and outcomes as outlined in the TOR as well as the consultancy assignment outputs.

### **Ethical Considerations**

The evaluation adopted the highest standard of evaluation ethics to ensure the rights of respondents are respected. The evaluation team sought and acquired ethical clearance and consent from the concerned government offices, the project implementer (World Vision Ethiopia (WVE)) and the community. The evaluation team went further to ensure that no respondent responded to questions

against his/her will. The evaluation team therefore read a participatory information sheet explaining the rights and responsibilities of respondent to ensure that each respondent had adequate information to make a decision in taking part or otherwise.

**Table: 4.3** Comparison of Community care and support both during the project baseline survey and Project evaluation, WVE project areas, Oromia and Addis Ababa.

| <b>Indicator</b>   | <b>Baseline</b> | <b>Evaluation</b> | <b>E-B</b> |
|--|-----------------|-------------------|------------|
| Government and other stakeholders involvement on MCH improvement   | 90.6%           | 93.8%             | 3.2%       |
| Existence of Stigma and discrimination against HIV positive people | 61.5%           | 61.5%             | 0          |
| HIV status disclosure  | 52.1%           | 59.2%             | 7.1%       |
| Care and support from family                                       | 82.3%           | 76.2%             | -6.1%      |
| Existence of community by law                                      | 39.6%           | 69.2%             | 29.6%      |
| Community participation on PMTCT                                   | 68.8%           | 69.5%             | 0.7%       |

**Source:** World Vision Ethiopia. (2017). PMTCT Projects final Evaluation Report.

**Table 4.4:** Summary of Project performance with respect to the project expected outcomes

| LFA     | indicators   | LOP Target | Baseline | Evaluation | E- B    |
|---------|--|------------|----------|------------|---------|
| Goal    | Percentage of HIV free infants born to HIV infected mothers  | 95%        | 85%      | 98.2%      | 13.20%  |
| Outcome | % of defaulting HIV care clients who return to care,   | 85%        | 80%      | 85%        | 5.00%   |
| Outcome | Default Rate   | -5%        | 15%      | 6.9%       | -8.10%  |
| Outcome | Return to Care rate  | 20%        | 9%       | 60%        | 51.00%  |
| Outcome | Loss to follow up (LTFU) rate  | -1%        | 10%      | 8%         | -2.00%  |
| Outcome | % of PLHIV mothers who received PMTCT service from HFs and reported satisfied with the services.       | 90%        | 76%      | 96%        | 20.00%  |
| Outcome | Availability of scientific evidence for decision making at health facilities and woreda health offices | 10         | 0        | 11         | 100.00% |

**Source:** World Vision Ethiopia. (2017). PMTCT projects final Evaluation.

#### 4.1.7.4 IMPACT

##### General

As indicated above; there are visible indications that this project is or was high impact intervention for changing the existing situation of PMTCT service at all project intervention areas. This evaluation found that the project activity plan has been largely achieved, considering the increased enrolment of PMTCT service coverage and elevated PMTCT awareness in pregnant and lactating mothers and the community that can be directly attributed to the project main purpose.

##### Improved quality of life

The improved quality of life in targeted mother can be attributed to the project out puts. Key indicators of quality improvement include having better capacity of women's to engage in their

own day to day business or income generating activities rather than spending much time for caring sick baby and themselves.

### **Conclusion about project Impact**

Even though it is difficult to measure the project impact at this stage<sup>4</sup> ; the project have some visible indications that this project is or will be a high impact intervention for changing the existing situation of uptake to PMTCT services, highest rate of loss to follow-up of women, children and partners of PMTCT service, and absence of evidence-based decision for PMTCT services In addition; government responsiveness to community PMTCT needs and concerns has significantly improved as a result of projects advocacy and capacity development interventions.

#### **4.1.7.5 Challenges of the Project Evaluation**

The evaluation was successful but not without limitations. The exercise was confronted by one main data-related challenges: failure to collect data from HIV positive Pregnant and lactating mothers on census basis. Significant number of mothers were not volunteer to participate in the study and provide data on the project's contributions to their access to PMTCT service. This makes the evaluation report writing difficult to talk about the complete census of PMTCT service project beneficiary Pregnant and lactating mothers. However; adequate and representative study subjects were participated in this study. We planned that a complete census of all the 324 registered HIV positive pregnant women and lactating women will be included in this survey (183 in Shashemen, 46 in Adaeberga and 91 Kolfe). However; only 130 of them were volunteer and participated in the survey.

#### **What should be done to improve?**

- Consideration of behavioral communication activity for further enhancement of demand creation;
- Consideration of interventions aimed at improving male participation in PMTCT; and
- Consideration of culturally sensitive messages that can address socio-cultural issue in PMTCT health promotion. The reason for small change might be the fact that community

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<sup>4</sup>This is a critical point that indicates the evaluation was done earlier than it should be done. The head of the organization that had conducted the final evaluation, Integrity consultancy Services, reaffirmed this point on a phone interview.

behavioral change required more time and frequent professional engagement and community involvement.

#### **4.1.7.6 Overall conclusion of the final evaluation**

Apart from addressing the felt needs and problems of the target communities, this project has contributed to the high level goals of SDG, GTP II, HSTP and the development priorities of the regions. It has adequately changed lives and improved wellbeing of many HIV positive Pregnant and lactating mothers, children and the PLHIV communities as a whole. In conclusion, the project has achieved its goals and objectives more than 100% and has consequently resulted in a positive evolution of the PMTCT situation in the target and the nearby project areas. In a nutshell; the project was effective in terms of addressing the target beneficiaries and achieving the target project objectives; efficient in terms of financial utilization and accomplishment of the project plan as per the project schedule; relevant in addressing the real problems of HIV positive Pregnant and lactating mothers, children and the PLHIV community needs; sustainable and impactful by fully addressing all the sustainability efforts and achieving remarkable impact scores<sup>5</sup>.

#### 4.2 Data Analysis

The author opted to start the analysis from the challenges. As shown above, the evaluation report boldly states that, participants' lack of willingness to participate in the research process, due to fear of stigma and discrimination, has been the only evaluation challenge. Which of course is a serious challenge by itself. However, a close investigation of the report from proper impact evaluation perspective, reveals the evaluation is affected by other limitations as well.

As clearly discussed in the second chapter of the study impact evaluation is distinct from other evaluations in that:

- 1) It measures both positive and negative impacts;
- 2) Intended and unintended impacts;
- 3) And finally, and most importantly I suppose, establish a strong causal relationship between impacts and causes. What caused the observed effects and show the counterfactual, what would have been the situation in the absence of the project.

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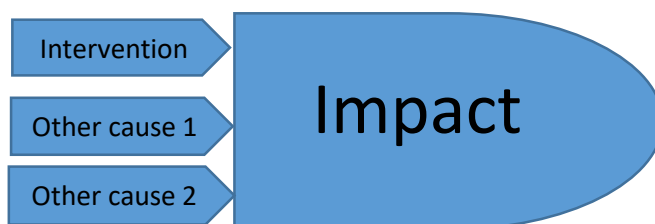
<sup>5</sup>This is a rather difficult conclusion vis a vis the previous remark, by the evaluation team, that the project was not ripe for impact evaluation at that point in time.

As shown in the data presentation sub section, there is no mention of intended and unintended; positive and negative effects of the intervention. Furthermore, the conclusion of the report rather shies away from attributing the observed changes purely to the project. It states “...*it is difficult to measure the project impact at this stage.*” What does this signify? The author believes that the evaluation is also challenged by timing. Meaning at the time of the evaluation the project impact indicators were not fully ripe for assessment. The decision to conduct impact evaluation is based on two things, according to literature. These are:

- 1) Whether there is a clear idea of the findings will be used and by whom; and
- 2) Given the resources & time available will the findings be credible (too early no accurate picture of impact; too late it misses the window to inform decisions)

As presented in the first sub section of this chapter, the project plan clearly stipulates the intended purpose of the evaluation; most of them are congruent to the ones indicated in the literature review. The integration of evaluation plan with its clear intentions into the project plan is something appreciable and signifies the value attached to final evaluation in the case company. The level of detail and logical relationship between project activities, outputs, outcomes and goal as shown in the project log frame strengthens the above statement. But when it comes to impact evaluation, the impact evaluation practice in the case company hardly fulfills the accuracy and credibility criteria indicated in the literature review part of the study. The relationship between an intervention and impacts is not linear. Measuring the specific contribution of the project to the observed changes is in fact daunting. The following figure fairly captures the main idea of proper impact evaluation.

**Fig.4.1** Impact evaluation design



**Source:** Developed by the author.

In terms of specific questions that an impact evaluation purports to address, the evaluation is more of descriptive than evaluative. It described what was done, what happened, and in what context. Other than that, it didn't tell the evaluative aspect of it. In terms of methodology the evaluation

adopted the before and after (end line and base line) situation assessment of the population understudy. It is, hence, non-experimental in nature.

Viewed from the norms and standards of impact evaluation it fulfills most of them. It was done by an external independent evaluator; it was intentional, transparent and ethical. However, impact evaluation is not done separately. One of the questions that the author posed to one of the key informants was, whether the organization would conduct a separate evaluation of the impacts of the projects in question sometime in the future. The simple answer was no<sup>6</sup>. He believes, apart from the quality of the indicators in the health sector, that are numbers and rates and easy to observe and measure, the results that the project is claimed to have scored in the evaluation could have been affected by confounding factors<sup>7</sup>. Which a genuine impact evaluation is expected to control. In fact, in the sustainability and transition plan of the project, as shown in the first sub section of this chapter, there are ongoing health, nutrition and HIV/AIDS projects sponsored by the same organization. The Respondent further explained that this is how project evaluation is conducted in the organization. The final evaluation report is submitted to the funding parent organization, World Vision Hong Kong and adopted with no measure comments. The report is also submitted to the Ministry of Finance and Economic Development of Ethiopia to comply with the legal requirements and to be shared to other concerned bodies<sup>8</sup>.

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<sup>6</sup>Wubshet Ali, Health and Nutrition Grant Manager, (Addis Ababa, May 14 2018, in an interview).

<sup>7</sup>Wubshet Ali, Health and Nutrition Grant Manager, (Addis Ababa, May 14 2018, in an interview).

<sup>8</sup>Wubshet Ali, Health and Nutrition Grant Manager, (Addis Ababa, May 14 2018, in an interview).

## **CHAPTER FIVE**

### **SUMMARY AND CONCLUDING REMARKS**

There is a wide consensus about the inextricable linkage between underdevelopment and the prevalence of its manifestations: disease, malnutrition, violence, high rate of child and maternal mortality, among others. The HIV AIDS pandemic came to the scene for the first time in the late 1970s in the developed world. However, its prevalence and its devastating impacts are much more felt in the underdeveloped part of the globe particularly in African countries found south of the Sahara.

Ever since, the pandemic, remains one area of diverse INGO and NGO intervention, in addition to governments of course, through service delivery, awareness creation and behavioral change. Since, Ethiopia is one of these countries that have been hugely affected by the disease and its inescapable consequences, it hosts several local and international NGOs that work on the area from several perspectives. World Vision Ethiopia is one of these nonprofit not governmental organizations that operate in several parts of Ethiopia making prevention of the HIV transmission as one of its area of engagement. As presented in the paper, the organization simultaneously implemented a \$ 492 768 worth PMTCT project in parts of the country that it believes the pandemic and its impacts are widespread, namely: Shashemene & Adeaberga (Oromia region) and Kolfe Qeranyo sub city of Addis Ababa city administration. The project targeted over 3000 direct and 15 000 in direct beneficiaries and aimed at the overall objective of contributing to the higher goal of prevention of HIV AIDS by way of achieving three interrelated outcomes increased uptake of PMTCT services, reduced loss to follow-up of women, children and partners of PMTCT service, and enhanced evidence-based decision for PMTCT services.

By employing a descriptive exploratory research methodology the author tried to appraise the practice and associated challenges of project impact evaluation in the case organization. To address its research objectives which sets at the outset, the study attempted not only to uncover the existence/nonexistence of project impact evaluation but also analyzed the level of attention accorded to evaluation/ impact evaluation in project planning; explored how it is conducted; pointed out its overreaching objectives; and most importantly identified the challenges of impact evaluation in the organization by taking the aforementioned project as a case.

In this connection the study thoroughly analyzed the project final evaluation report and interviewed key personnel in the project and evaluation organizations. The data obtained from these two sources is evaluated against the backdrop of conventional project impact evaluation guidelines and principles presented in the literature review section.

As shown in the paper, the final evaluation is benefited from the theory of change to identify immediate and intermediate outcomes that were evident in the life of evaluation on the basis of which to arrive at the much needed conclusions and recommendations to inform decisions. The evaluation is also benefited from the clearly established baseline data, continuous monitoring and midterm evaluations performed by the project organization and the much needed cooperation and collaboration from all important stakeholders to gather pertinent data through questionnaire, focus group discussions and key informant interviews.

This study found that Project final evaluation (including impact evaluation) was an integral part of project planning in the case organization. It was conducted by an independent external organization with an explicit purpose of assessing the project's success vis a vis its planned objectives and anticipated impacts, and draw lessons for future planning, among others. It was guided by the OECD principles of evaluation; namely: effectiveness, efficiency, relevance, sustainability and impact. From these five components it is the study's major focus, impact evaluation, that was found challenging to undertake and measure.

As the evaluation report stated the project is of the sort that its intended goal level impacts could not be evidently visible within the life time of the project. This shows that, among the commonly mentioned challenges of impact evaluation, the evaluation was challenged by long time scale challenge. A phenomena where project impact/s took longer time span to be adequately observed for measurement. The challenges are partly attributed to the TOR of the project organization. The evaluation team stated that the evaluation is done as per the Terms of Reference approved by the project organization and the funding agency which predefined, among others, the objectives, intended users, timeline, key evaluation questions and methodology. And the evaluation was conducted during this prearranged time period. As the interview with the project organization informs there will not be a separate impact evaluation for the project.

The evidence from this study suggests that impact evaluation proper, as defined by OECD, evaluation of the positive and negative, primary and secondary long term effects produced by the

intervention, whether directly or indirectly, intended or unintended is not conducted for the case projects. Consequently it would not be wrong to conclude that, as far as PMTCT projects are concerned, apart from attempting to assess project impacts more broadly together with effectiveness, relevance etc. impact evaluation proper is not a culture in World Vision Ethiopia regardless of its decades of existence and extensive experience in project implementation both independently and in coalition with other actors of development. This paper has argued that project impact evaluation is not well studied from the stand point of the implementers.

The current study has only examined the practice of one organization and the results may not be applicable to other organizations and even the same organization with other projects. Further research in this field would be of great help to account for the identified gap as the area of intervention, PMTCT, as a development endeavor stipulated in MDGs seems to remain important in the foreseeable future both at organizational and national level. As development understood as sustainable change for the good it is hard to ascertain one`s contribution towards it, in whatever form, unless it is measured. The practical implication of the findings is that, more often than not, impact evaluation requires a separate timing and design to conduct than the relatively easy to measure strands of project evaluation such as efficiency and effectiveness.

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# **APPENDICES**

## **Appendix I: Guiding Interview Questions**

### **Introduction**

Description of the project, your role in the project?

Project organization?

1. Is impact evaluation mandatory in your organization?
2. Have you got the indicators effective in capturing the impacts?
3. It is believed that measuring impacts is a difficult task to undertake, could you mention some of the major challenges your organization did face with regard to PMTCT impact evaluation practice? (Data availability, methodological challenges, etc.)
4. Do you believe that the impact of the project was fully achieved (visible) at the time of the evaluation?
5. If not, would you conduct a separate impact evaluation in the future? When?
6. Could the results be fully attributable to the projects? If not what other factors (outside) the project do you think have contributed to the outcomes?
7. The attitude towards (stigma and discrimination) PLHIV is still a challenge in Ethiopia (research shows); how do you evaluate your project success in this regard?
8. How do you evaluate your project design in view of the above question?

9. How do you describe the level of cooperation between the several stakeholders during the implementation and evaluation processes?
10. Could you mention some of the major lessons learnt from the projects (planning, execution and evaluation)?
11. What do you do with the evaluation, is it used in new programs/initiatives?
12. Any other points you would like to mention.

**THANK YOU!**

**Appendix II. List of Interviewees**

| No | Name           | Organization                  | Position                    | Date        | Place of Interview                     |
|----|----------------|-------------------------------|-----------------------------|-------------|--|
| 1  | Wubshet Ali    | World Vision Ethiopia         | Grant and Nutrition Manager | May 14 2018 | World Vision Ethiopia Head Office, A.A |
| 2  | Shegaw Fantaye | Integrity Consulting Services | Team Leader                 | May 7 2018  | Telephone interview                    |



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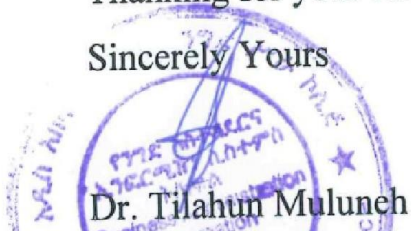
**To: - World Vision Ethiopia**  
**Addis Ababa**

The Addis Ababa University School of Commerce currently runs five Masters level programs and one Doctoral Program: Human Resource Management (MA), Project Management (MA), Marketing Management (MA), Supply Chain and Logistics Management (MA), Business Leadership (MA, PhD) In addition to this, the School is also Preparing itself to launch some more expedient Programs very soon.

As an immediate and direct stakeholder to this socioeconomically pragmatic move, we would like you to cooperate with us by way of assisting our students to conduct academic researches and case analyses in your organization. As such, we kindly request your esteemed organization to provide student **Feleke Shiferaw Berhane IDNo. GSE/0048/08** with information pertaining to **Project Impact Evaluation: The Case of World Vision Ethiopia's PMTCT Project in Kolfe keranyo Sub City Addis Ababa** A copy of the paper produced may be provided to you if so demanded.

Thanking for your earnest cooperation, we remain

Sincerely Yours



Dr. Tilahun Muluneh