

**FACTORS INFLUENCING IMPLEMENTATION OF HIV/AIDS PROJECTS
MANAGED BY NGO IN KENYA; A CASE OF DOCTORS WITHOUT
BORDERS IN EMBU COUNTY**

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**A RESEARCH PROJECT REPORT SUBMITTED IN PARTIAL FULFILLMENT
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DECLARATION

This research project is my original piece of academic work and to the best of my knowledge has not been presented for any award in this or any other university.

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This research project has been submitted for examination with my approval as the University's Supervisor.

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DEDICATION

This study is dedicated to my family for their unwavering support and encouragement throughout my study especially to my mum, Justa Nyaga, wife Josephine Wawira, Son Johnfrend Muthomi and daughter Joyfrend Wanyaga who stood by me during each low and high moment of the entire period.

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TABLE OF CONTENTS

DECLARATION.....	ii
DEDICATION.....	iii
ACKNOWLEDGEMENT.....	iv
TABLE OF CONTENTS	v
LIST OF TABLES	viii
LIST OF FIGURES	ix
ABBREVIATIONSAND ACRONYMS.....	x
ABSTRACT	xi
CHAPTER ONE:INTRODUCTION	1
1.1 Background to the Study.....	1
1.2 Statement of the Problem.....	4
1.3 Purpose of the Study	5
1.4 Objectives of the Study.....	5
1.5 Research Questions	5
1.6 Significance of the Study	5
1.7 Limitation of the Study	6
1.9 Delimitations of the Study	6
1.7 Assumption of the Study.....	6
1.10 Definition of Significant Terms.....	6
1.11 Organization of the Study	7
CHAPTER TWO:LITERATURE REVIEW	8
2.1 Introduction.....	8
2.2 Implementation of HIV/AIDS projects management	8
2.3 Funding and Performance of HIV/AIDS Projects	9
2.4 Stakeholder Involvement and Performance of HIV/AIDS Projects	11
2.4 Planning and Performance of HIV/AIDS Projects	12
2.5 Theoretical Framework.....	15
2.5.1 Systems Theory.....	15
2.6 Conceptual Framework.....	15

2.6.1 Relationship between the independent variables and dependent variable	16
2.7 Summary of Literature Review	17
2.8 Summary of Literature Review	19
CHAPTER THREE:RESEARCH METHODOLOGY	20
3.1 Introduction.....	20
3.2 Research Design.....	20
3.3 Target Population.....	20
3.4 Sample Size and Sampling Procedures	20
3.5 Data Collection Methods	21
3.6 Validity of Research Instruments.....	21
3.7 Reliability of Research Instrument	21
3.8 Data Analysis	22
3.9 Ethical Issues	22
3.10 Operational definition of variables	22
CHAPTER FOUR:DATA ANALYSIS AND PRESENTATION AND	
INTERPRETATION	24
4.1 Introduction.....	24
4.2 Questionnaire Return Rate	24
4.3 Demographic characteristics of the respondents.....	24
4.3.1 Distribution of Age of the respondents.....	25
4.3.2 Education level of the Respondents	25
4.3.3 Years of Experience	26
4.4 Implementation of HIV/AIDS projects	26
4.4.1 Implementation of HIV/AIDS projects in Kenya	27
4.5 Funding and implementation of HIV/AIDS projects.....	28
4.5.1 Organization Funding	28
4.5.2 Sources of funding for your projects	29
4.5.3 Funds implementation and HIV/AIDS projects.....	29
4.5.4 Extent to which adequate funding influences the implementation of HIV/AIDS Projects	31
4.6 Stakeholder involvement and implementation of HIV/AIDS projects.....	32

4.6.1 Stakeholder involvement	32
4.6.2 Extent to which stakeholders involvement influences the implementation of HIV/AIDS projects	33
4.7 planning and implementation of HIV/AIDs projects	34
4.7.1 Does your organisation plan for its project	34
4.7.2 planning	35
4.7.3 Extent to which planning of projects influences the implementation of HIV/AIDs projects.....	36
CHAPTER FIVE	38
SUMMARY OF FINDINGS, DISCUSSIONS, CONCLUSIONS AND RECOMMENDATIONS.....	38
5.1 Introduction.....	38
5.2 Summary of the Findings.....	38
5.3 Discussion of findings.....	41
5.3.1 Funding	41
5.3.2 Stakeholder involvement.....	41
5.3.3 Planning	42
5.4 Conclusion	43
5.4 Recommendations.....	43
5.5 Suggestions for further studies.....	44
REFERENCES.....	46
APPENDICES	50
Appendix I: Transmittal	50
Appendix II: Research Questionnaire	51

LIST OF TABLES

Table 1.1 Operational Frameworks.....	23
Table 4.2 Response Rate.....	24
Table 4.3 Distribution of Age of the respondents.....	25
Table 4.4 Education level.....	25
Table 4.5 Years of Experience.....	26
Table 4.6 Implementation of HIV/AIDS projects.....	27
Table 4.7 Organization Funding.....	28
Table 4.8 Funding sources for projects.....	29
Table 4.9 Funds implementation and HIV/AIDS projects.....	30
Table 4.10 Extent to which adequate funding influences the implementation of.....	31
Table 4.11 Stakeholder involvement.....	32
Table 4.12 Extent to which stakeholders involvement influences the implementation of HIV/AIDS projects.....	34
Table 4.13 Does your organization plan for its project.....	35
Table 4.14 Planning and implementation of HIV/AIDS Projects.....	35
Table 4.15 Extent to which effective planning of projects influences the implementation of HIV/AIDS projects.....	37

LIST OF FIGURES

Figure 1 Conceptual Framework	16
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ABBREVIATIONS AND ACRONYMS

AIDS	Acquired Immune Deficiency Syndrome
ARV	Antiretroviral
BMGF	Bill & Melinda Gates Foundation
CHAM	Community Health Association in Malawi
GFATM	Global Fund for AIDS, Tuberculosis & Malaria
HENNET	Health NGOs Network
HIV	Human Immunodeficiency Virus
ILO	International Labour Organization
NGO	Non-Governmental Organization
OECD	Organization for Economic Co-operation and Development
PLWA	People Living with AIDS
PMTCT	Prevention of Mother to Child Transmission
TB	Tuberculosis
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDP	United Nation Development Program
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nation Population Fund
UNICEF	United Nations Children Fund
UNODC	United Nations Office on Drugs and Crime
USAID	United States Agency for International Development
VMMC	Voluntary Medical Male Circumcision
WFP	World Food Program
WHO	World Health Organization

ABSTRACT

The purpose of this study was to investigate factors influencing implementation of HIV/AIDS projects in Embu County. The following objectives provide general guidance to the study: To assess how funding for HIV/AIDS projects influence implementation of HIV/AIDS projects management by NGOs in the health sector; To establish how stakeholder involvement in HIV/AIDS projects influence implementation of HIV/AIDS projects management by NGOs in the health sector and To determine how planning in HIV/AIDS projects influence implementation of HIV/AIDS projects management by NGOs in the health sector. The study targeted 48 members of staff working with Doctors without Borders based in Embu. Since the target population was small the researcher employed census which involved capturing the entire population as a sample size which had 48 respondents. In census, data is collected on the entire population hence the sample size is equal to the population size. This study used questionnaires for data collection. The researcher edited the data collected through questionnaires, for the purpose of checking on completeness, clarity and consistency in answering research questions. The data was then being coded, tabulated and analysed using Statistical Package for Social Sciences (SPSS) based on study objectives. Descriptive statistics was computed, and study findings were presented using tables and percentages and interpretations made. The researcher sought permission from Embu County government, Doctors without Borders Kenya – Embu Branch and sought consent from research respondents. Confidentiality was assured, and data collection instruments shall not bear their names of the respondents. Those not willing to participate in the study were not being forced to do so. The study found out that; lack of adequate funding had a negative influence on the performance of health projects in HIV/AIDS projects. Where HIV/AIDS related projects run out of resources before completion, there is a negative impact on the achievement of intended objectives hence the desired outcomes and impact may not be achieved. The study concludes that stakeholder involvement to a significant extent impacts on the implementation of HIV /AIDs projects by NGOs in the health sector. Good and clear stakeholder’s involvement in implementation of HIV/AIDS projects is of great importance in ensuring smooth implementation of HIV/AIDS projects. Planning promoted the performance of health projects working in HIV/AIDS. The study made the following recommendations: Fund-raising leaders and resource mobilization teams should consider the financial resources needed to finish the project and match this with the project design and work plans.

CHAPTER ONE

INTRODUCTION

1.1 Background to the Study

Worldwide, HIV/AIDS remains a fundamental development challenge in many countries which threatens growth, livelihoods, and human capacity, and inflicting tragedy on millions of families. According to United Nation (2014), there were about 35 million people living with HIV by the end of 2013, with HIV incidence of 2.1 million HIV infections in 2013 and about 1.5 million deaths cause by HIV in the world. The United Nation noted that the new HIV infections continued to exceed the number of AIDS related deaths and as a record number of people have been receiving antiretroviral therapy, keeping them alive longer. The environment for combating HIV/AIDS keeps on changing dramatically, with new donors, increased funding, more affordable treatment, better understanding of the disease and its transmission, and a new appreciation of gender inequality in the feminization of the disease in the world (World Bank, 2008).The aim of managing project is forecast dangers and problems that may jeopardize the success of a project and then to plan; organize and control activities that will lead to the successful completion of projects in spite of all the envisaged risks. However, in practice more than 80% of projects run over budget. The consequences of ineffective implementation of projects are also likely to have a poorly motivated workforce (Lock, 2003).

Globally, Non-Governmental Organizations (NGOs) have increasingly been recognized today as vital development partners in HIV/AIDS projects. The Joint United Nations Programme on HIV/AIDS (UNAIDS) leads and inspires the world to achieve its shared vision of zero new HIV infections, zero discrimination and zero AIDS-related deaths. UNAIDS unites the efforts of 11 UN organizations—UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, UN Women, ILO, UNESCO, WHO and the World Bank—and works closely with global and national partners towards ending the AIDS epidemic by 2030 as part of the Sustainable Development Goals (UNAIDS, 2017)

According to World Health Organization (WHO (2017), World Health Organization directs and coordinates international health activities within the United Nations' system. WHO's goal is to build a better, healthier future for people all over the world.

Working through offices in more than 150 countries, WHO staff work side by side with governments and other partners to ensure the highest attainable level of health for all people. WHO's HIV/AIDS Department provides evidence-based, technical support to WHO Member States to help them scale up treatment, care and prevention services as well as drugs and diagnostics supply to ensure a comprehensive and sustainable response to HIV/AIDS. Visit WHO's HIV/AIDS health topic page for more information

In sub-Saharan Africa, it is estimated that in 2012 there were 1.6 million new infections with about 1.2 million HIV related deaths. This region carries the greatest burden of the epidemic throughout the world with 71 per cent of PLWA worldwide. Though there has been a decline in number of HIV related deaths, Sub-Saharan Africa account for 70 per cent of HIV related deaths worldwide. It's also reported that more than 90 per cent of the children who acquired HIV infection in 2011 live in sub-Saharan Africa (UNAIDS, 2012). In sub-Saharan Africa, which is home to 92 per cent of pregnant women living with HIV worldwide, the percentage of pregnant women living with HIV who received antiretroviral therapy or prophylaxis was 59 per cent [53–66 per cent], this is way below the Caribbean where the coverage levels was at 79 per cent [67–97 per cent] in 2011 (UNAIDS, 2013).

According to National Aids Control Council (2016), in Africa, Kenya is one of the four “high burden” countries with an estimated 1.5 million people living with HIV infection at the end of 2015. Women had a higher prevalence rate of 7.0 per cent compared to men at 5.7 per cent according the the Ministry of Health estimates in 2015. HIV epidemic is geographically diverse with counties within Nyanza region with higher prevalence and North Eastern regions with the lowest prevalence. Homa Bay has a prevalence of 26 per cent, while Wajir has an estimated 0.4 per cent. In Kenya, HIV and AIDs accounted for 29 per cent of the annual adult deaths, 15 per cent deaths for children below five years and 20 per cent of maternal mortality. This has greatly affected Kenya's economy by lowering the per capita output by 4.1 per cent with 77,647 new HIV infections annually.

According to Kenya National Bureau of Statistics, (2015) Embu County has a population of 554,081 comprising of 275,869 males and 278,212 female. 38 per cent of the population is below 15 years and 19 per cent of the population is aged 15 – 24

years which means 57 per cent of the population is 24 years and below. HIV prevalence in Embu by the end of 2015 was at 3.3 per cent lower than the national average prevalence of 5.9 per cent (Kenya HIV Estimates 2015). The prevalence of women is more than twice that of men at 4.5 per cent compared to that of men at 2.0 per cent. By the end of 2015, there were 11,141 people living with HIV infections in Embu county out of whom 26% were aged 24 years and below. According to Kenya HIV county profiles (2016), majority of all the new adult HIV infections occur among persons aged 15 to 24 years.

Similarly, Kenya has struggled in the past 30 years to get the best, most effective and responsive programmes, strategies, policies and approaches of tackling the menacing HIV/AIDS pandemic. The effects range from villages being wiped out to severe loss of employees within organizations and government ministries as well as the private sector. Many families, institutions and departments have over the past decade lost valuable sons and daughters, earnings and their best-trained workers at the prime of their working lives. The disease has not spared any country in the world. It has affected both rich and poor countries. The only difference is in the way each country responds, which much depends on their social-economic and political environment (Ndambuki, 2006).

According to Kraeger (2011) successful implementation of projects start with organizations which have a mission that is clearly defined and have created a vision of what they want their impact to be and in their activities and plans aim to follow that. Other optimum performance enabling factors include aligning activities with institutional strengths and capabilities and strategically building collaborative linkages with other players working in the sector. According to Antill (1974), a project is only successful if it comes on schedule, on budget, it achieves the deliverables originally set for it and it is accepted and used by the clients for whom the project was intended. A project in its basic definition is a temporary endeavour undertaken by people who work cooperatively together to create a unique product or service (Project Management Institute, 2000) within an established time frame and within established budget to produce identifiable deliverables.

According to ECHD (2017), Embu County, HIV/AIDS prevalence rate among women has increased. Statistics show that women's HIV prevalence rate in the county is at 5% compared to 3.7% among men. HIV/AIDS related programmes that target women have been enhanced especially on pregnant mothers with an aim of reducing mother-to-child infection. HIV/AIDS Programmes are aimed at improving maternal health and ensuring that only qualified health professionals oversee child deliveries. Beyond Zero Mobile Clinic will be used to assist mothers, especially those in remote areas, to access quality child deliveries and health care. It is against this background that the study endeavours to investigate factors influencing implementation of HIV/AIDS projects in Embu County.

1.2 Statement of the Problem.

For a project to be said to have been successfully implemented, it must achieve the deliverables that are prior agreed upon to satisfy the project beneficiaries. Organizations successful performance is dependent on multiple factors, which are either internal or external to the firm (Kloppenbotg, 2009). In project management the project owners have the clear vision of the project in their mind (Müller and Turner, 2007). According to Joanne (2009), in non-profit organizations the project owners are the donors, who contribute funds to pursue a course. Regan and Rhoads (2013) in a case analysis done in India in education sector found out that the donors, as the project owners, had significant influence to service delivery.

Though donors have been described as influencers of program performance, little has been done to study their influence on performance of HIV/AIDS programs in Kenya. In HIV/AIDS projects, characteristics and behaviours of People Living with HIV (PLHIV) need to be studied too in order to enhance service delivery and consequently the performance of the programs. While majority of previous studies concentrated on clinical care and treatment of people living with HIV/AIDS, there seems to be few studies done on strategic issues that affect the performance of programs such as HIV/AIDS programs in Kenya, which are used as vehicles for providing clinical care and treatment to PLHIV. There is need to clearly get the factors that will accelerate positive performance of HIV/AIDS programs in Kenya to accelerate reduction on new HIV infection. It's with this background that the study seeks to investigate factors influencing implementation of HIV/AIDS projects in Embu County.

1.3 Purpose of the Study

The purpose of this study was to investigate factors influencing implementation of HIV/AIDS projects in Embu County.

1.4 Objectives of the Study

The following objectives provided general guidance to the study:

- i. To assess how funding for HIV/AIDS projects influence implementation of HIV/AIDS projects management by NGOs in the health sector.
- ii. To establish how stakeholder involvement in HIV/AIDS projects influence implementation of HIV/AIDS projects management by NGOs in the health sector.
- iii. To determine how planning in HIV/AIDS projects influence implementation of HIV/AIDS projects management by NGOs in the health sector

1.5 Research Questions

The study was endeavoured to provide meaningful responses to the following research questions:

- i. To what extent does funding for HIV/AIDS projects influence implementation of HIV/AIDS projects management by NGOs in the health sector?
- ii. To what extent does stakeholder involvement in HIV/AIDS projects influence implementation of HIV/AIDS projects management by NGOs in the health sector?
- iii. In what ways does planning in HIV/AIDS projects influence implementation of HIV/AIDS projects management by NGOs in the health sector?

1.6 Significance of the Study

This study maybe beneficial to NGOs, donor agencies, project managers and project management students involved in program planning and control. The study maybe also relevant to other areas concerned with program planning and control. In addition, this study may also provide insights that were to help increase knowledge in this study area by filling knowledge gap that currently exist. The findings may present a useful platform to build the body of knowledge for international development and incremental knowledge for

further research on health sector NGOs. The study also identified areas related to project management and performance field that required more research, hence a basis for further research.

1.7 Limitation of the Study

The researcher encountered some limitations that hindered by access to information that the study is seeking. The researcher solved that problem by going with an introduction letter from the University and assure the respondents that the response they gave be treated confidentially and were used purely for academic purposes

1.9 Delimitations of the Study

The study covered factors influencing implementation of HIV/AIDS projects managed by NGO in Kenya; a case of Doctors without borders in Embu County. Even though other institutions such as the Government of Kenya's Health Ministry, USAID etc. are key players in the health sector HIV/AIDS services, they only be discussed when relevant. This was to help maintain focus of the study on the specific variables considered and how they impacted success of projects being implemented.

1.7 Assumption of the Study

The study was to be carried out with the assumption that: Successful completion of projects for NGO's working in the health sector, specifically and respondents in the study were volunteer error free, correct and unbiased responses to the areas of interest in the questionnaire.

1.10 Definition of Significant Terms.

Adequate project funding: A mix of funding for the project that is suitable in quantity to meet the project plan and budget.

Doctors without Borders- An independent, global movement providing medical aid where it's needed most commonly referred to as Medecins Sans Frontiers (MSF). The NGO was created by doctors and journalist in France in 1971 to provide lifesaving medical humanitarian care, and speaking out about what they observe. The organization works to In collaboration with the Embu County, to develop models of care which can assist integrate Non Communicable Disease management into the primary health care facilities within Embu.

Project planning: A deliberate scheduling of activities from one step to another to enable achievement of a set goal that builds within it a warning system to enable plan to be kept on track.

Stakeholder Involvement: Participation from the onset of an implementation by groups of people who have an interest in or are affected by outcome of a certain intervention.

Implementation of HIV/AIDS projects: The process of putting a decision or plan into effect; execution.

1.11 Organization of the Study

The study consists of five chapters. Chapter One covers the background of the study, statement of the problem and purpose of the study. This is followed by the research objectives, research questions, limitations of the study, delimitations of the study, significance of the study, and definition of significant terms and concludes with the organization of the study.

Chapter Two covers the literature review from various sources to establish work done by other researchers, their findings, conclusions and identification of knowledge gaps which forms the basis of setting objectives and research questions of the study. The theoretical and conceptual frameworks are also explained.

Chapter Three covers the research design, target population of the study, sample size and sampling procedures. This will be followed by data collection procedures, data collection instruments, validity of the instruments, reliability of instruments, data analysis techniques, ethical considerations and concludes with operational definition of variables.

Chapter four covers the findings from data analysis, presentation of findings and interpretation of findings. It will be concluded with the summary of the chapter.

Chapter five covers the summary of findings, discussions, conclusions and recommendations of the study. It will be concluded with suggested areas for further research and contribution to the body of knowledge.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter covers significant literature on the factors influencing implementation of HIV/AIDS projects managed by NGO in Kenya. The chapter also offers empirical review, theoretical framework and conceptual frameworks on which the study is based

2.2 Implementation of HIV/AIDS projects management

To implement a project means to carry out activities proposed in the application form with the aim to achieve project objectives and deliver results and outputs. Its success depends on many internal and external factors. Some of the most important ones are a very well organised project team and effective monitoring of project progress and related expenditures. Overall management has to be taken over by the lead partner and project manager, who is often employed or engaged by the lead partner. The project management has to have an efficient management system and always has to be flexible to current needs and changed situations, as the project is rarely implemented exactly according to the initial plan. Nevertheless, the partnership should aim at deliver quality results and outputs. Quality means meeting expectations described in the application and those agreed within the partnership (Lock, 2003).

Project implementation in organizations appears to be the most difficult aspects of a manager's job (Boles, 2002). The purpose of project management is to forecast or anticipate potential dangers and problems that may jeopardize the success of a project and then to plan; organize and control activities that will lead to the successful completion of projects in spite of all the envisaged risks. However, in practice more than 80% of projects run late or over budget. The consequences of ineffective implementation of projects are also likely to have a poorly motivated workforce (Lock, 2003). According to Boyce and Haddad (2001); projects possess certain characteristics that distinguish them from any other activity in the organization. These include the fact that projects are temporary meaning that any project will have a start date and end date although it has nothing to do with short duration. Another feature is that projects produce unique results meaning that the product or service at the end of

the project should be some way different than the existing. The other characteristic is that projects are characterized by progressive elaboration due to uniqueness and greater uncertainty projects cannot be understood entirely at or before project start, and therefore, planning and execution of projects is happening many times in separate steps or phases. Implementation is the stage where all the planned activities are put into action. Before the implementation of a project, the implementers who are spearheaded by the project committee or executive should identify their strength and weaknesses including internal forces, opportunities and threats which include external forces. The strength and opportunities are positive forces that should be exploited to efficiently implement a project.

2.3 Funding and Performance of HIV/AIDS Projects

Important feedback on the performance of funded projects comes from the donor community. There are varied development assistance donors to the developing and developed world. These include the World Bank, United Nations bodies, the European Union and bilateral donors, non- governmental organizations and foundations (Bechange, 2010). Successful projects in HIV/AIDS sub-sector of health will ideally have secure funding for the whole project locked in multi-year contracts; the payment structure should always be staggered and disbursed as the previous tranche is accounted for such that cash flow difficulties do not arise (Ika, 2012). Brown (2013) noted that health projects such as HIV/AIDS ones require high assurance planning, leadership, funding and community input to serve as the basis that informs decisions on programming.

Price Waterhouse Coopers (2014) identified important success factors as ‘clearly establishing project costs, committed funding, and a deliberate project centered financial management framework that includes cost monitoring and reporting. Stein Fort and Walker (2007) in their study note that ‘sufficient financial and non-financial resources being specifically dedicated for the project based on details obtained from a well thought out project plan’ as a success factor. Secure financing goes hand in hand with managing project costs and budget throughout the project’s phases to ensure that expected results and benefits are yielded within the predetermined resource constraints. Many project funders tend to prefer financing short term specific issue projects since they have higher impact; Effective aid, however usually requires core unrestricted funding over a longer period in order to empower local institutional

strengthening. NGOs working in the health sector and implementing projects such as family planning and HIV/AIDS therefore, need to develop a mix of short term and longer-term projects (Birdsall, 2004).

Health projects help the communities realize better health outcomes either generally or specific outbreaks. Countries including Kenya, obtain resources to fund healthcare from the relevant Government ministries budgets, from bilateral and multilateral donors NGOs and other charities as well. Further, domestic financing mechanisms are being utilized to move towards health for all in line with millennium development goals and social health insurance being implemented by NHIF. Increase in health sector investment by partners in the sector has tended to focus on certain health conditions (notably HIV/AIDS, TB, Malaria, Ebola, Water and Sanitation and Yellow Fever). The global health financing arena has undergone a revolution in the last decade with the emergence of billion-dollar global health collaborations such as the BMGF, GAVI Alliance and Global Fund. These have been instrumental in raising financing committed for projects that to make available preventive and curative programmes for various ailments. Many successful health projects in Kenya have tapped into the above sources of funds (Oxford Policy Management, 2012).

Certainty in financing, enough funding both locally and from other health partners increases the probability that a health project will be successful. The successful projects are those that are able to lock in long-term commitments of financing. Steady enough resources are requisite to enable sustainable programs that deliver the appropriate impact. Ideally, long term and consistent funding is more suitable when applied to HIV/AIDS interventions, both preventive, curative and treatment thus preventing the risk of disease relapses and manage infections. The following three important practices have been found to be common attribute for NGOs that have managed to build a portfolio of restricted and unrestricted funding that ensures a sufficient pool of funds to address planned projects and respond to emergencies: (1) They concentrated their core/main funding to one source that is unwavering as opposed to diverse sources; (2) they matched their funding source to an organization that matches their own mission and objectives; and (3) they have an organization structure which serves as an enabler for fundraising. These factors have been found to hold true for successful NGOs working in health projects such as AMREF (Kaleeba, 2016).

Successful NGOs tap into different donors who have specialization in various needs. Not all donors address the same need. The Global Fund for instance only funds malaria and TB interventions. The different projects addressing different needs then fall under the umbrella of a health program and serve the community's diverse health needs more appropriately. Successful NGOs in health also have their priority is to get funding from multiple sources. In this time of shifting donor priorities and donor apathy, it makes financial sense to try and raise money elsewhere such as corporate foundations when the main source becomes unavailable (Kraeger, 2011). Population Services International which is involved in HIV/AIDS prevention has come up with a model that helps them manage fundraising risk by tapping into several federal and other partners each of whom has their own restrictive practices.

2.4 Stakeholder Involvement and Performance of HIV/AIDS Projects

A stakeholder is an individual or group of persons who have a direct or indirect interest in a certain project intervention or project. Stakeholders could either be primary or secondary. (www.dialoguebydesign.co.uk). It is imperative that HIV/AIDS strategic planning is done in a framework that is all inclusive of key stakeholders, be transparent, accountable and that has a structure for identifying intervention priorities and serve as a basis for allocating limited resources. Such activities need to rope in the major stakeholders to include, strategic government ministries, PLWA, affected communities, the community and cultural leaders, donor community etc. (UNAIDS, 2007). Stakeholder relationship management is important if the project is to take off properly and implementation be smooth as it is the relationship between the project and government, project and community, project and donors, project and other health partners that is managed (Friedman and Miles 2006).

By the community being involved, it is important that they participate from the onset in taking up and assuming roles for attaining intended goals and outcomes of projects being implemented in their locality. Communities being involved in health projects has served as the pillar of primary and secondary health care projects as designed in Alma Ata in 1978 as well as the Bamako Initiative (Kahssay, 2004). Enabling even more and relevant participation of citizenry infected with HIV/AIDS in all facets of planning and in the field execution of HIV interventions is a real manifestation of devotion to ensure that the project performance is optimal. This need not just be a principle but should be translated into action.

Many of these organizations recognize that stakeholder consultation should be about looping them in from pre-planning to inception so that their views and ideas shape the project to be implemented and the benefits that emanate from the project (Aaltonen, K.2011). The main factors and challenges to consider when developing a framework for community involvement in health projects include: the community should be empowered to take up certain responsibilities such as diagnosis and surveillance through community health workers, putting in place communication channels that facilitate community participation, facilitate sharing of information to enable learning that helps improve future project design, using community opinion leaders to encourage condom use, reducing stigma for the affected and adopting use of ARVs in managing HIV/AIDS (Hershey, M 2011) Analysis of questions arising from stakeholder analysis enables the identification of relationships which should be enhanced or tackled avoid negative effects on the project and enhance positive ones. Stakeholder has over time proved to be a key tool in enhancing performance of health projects including HIV/AIDS ones (Chan, P. 2004). Where project goal is to improve health of a certain community, the primary stakeholder needs to be the one to be empowered.

The relationship between this person and other stakeholders needs to be reviewed so that the primary stakeholder derives maximum benefit. (Aaltonen, 2011). Institutional policies often give direction on how different stakeholders relate. To improve livelihoods of the community through an intervention, an understanding of the individuals and groups that affect them, or are affected by them is key at all levels (Hershey 2011). Stakeholder power analysis helps elevate an understanding of the costs and benefits of engaging key stakeholders (Chan et al, 2004).

2.4 Planning and Performance of HIV/AIDS Projects

Planning, when done effectively has been known to lead to success of projects using all the parameters of time, cost and quality (Hermano, et al 2012) Their review provided planning as plausible explanation for the success of development projects – that they are able to meet set targets due to effective planning. This project performance factor has been supported by other researchers among them (Agheneza, 2009) and (Khang, & Moe, 2008). They indicated that the process of project planning and implementation is able to resolve inherent challenges ranging from conceptual

differences about the projects if there are well thought out and capture proper technical and economic considerations. Further, they should have the necessary basic information obtained through sufficient investigation and surveys to adequate project monitoring throughout the project lifecycle and in-depth evaluation exercise. Where all the above factors are considered, development projects such as health projects tend to have strong links between sectoral planning and project identification, /feasibility and formulation, and between project preparation/project appraisal and project implementation (Golini & Landoni, 2013).

An important characteristic of effective planning is listening and considering the views and requirements of beneficiaries during the planning process. Where there is no input from local stakeholders and beneficiaries or their perspectives and experiences from other projects are not sought during the planning stage, they may tend to see the project as having been imposed on them and not meeting their immediate needs. The risk is that they may remain indifferent to the project whereas ownership is critical to optimal performance. Health sector projects such as family planning and HIV/AIDS may thus succeed where the community feels a sense of ownership as the community will feel responsible for ensuring that they succeed (Virgo, 2007).

Hershey (2013) concluded that poor planning, lack of experience among the executing teams, scope creep, change in project design, project complexity and fraudulent practices may results in budget overruns. HIV prevention interventions demand a thorough, results-driven, objective oriented framework that is alive to the actual situations of the groups afflicted by the scourge, and that are in tandem with the national HIV plan (UNAIDS, 2007). Planning when comprehensively done and clearly thought through sets up a project for success from the start. It is imperative that stakeholders are brought on board from the initial planning stages and always be in the know as to which direction the project is going. Planning helps teams achieve targets, deadlines and stay organized and focused on the goal. As part of planning health interventions including HIV/AIDS projects, stakeholders should be kept aware of project progress (Mishra, 2012).

Planning has numerous benefits. This significant first step in the project process enables realistic timelines in implementation to be set. Having near accurate timelines and cost estimates also enable vivid documentation of various stages in the work plan and expected outputs. This makes tracking the project much easier as the implementation goes on. A suitable plan takes in to account all financial and non-financial resources and builds within a corrective mechanism so that remedial action is instituted when deviations are above normal (Goatham, 2013). Successful planning uses successful and optimal performing projects as benchmarks for other future projects. This enables institutionalization of learning. In this way unnecessary hurdles that come with building a project from scratch are circumvented. The more often a template is reused for project planning near accurate timelines and budget estimates will be achieved. Successful HIV prevention and control stories in Uganda have been replicated across Africa (UNAIDS, 2008).

Project Management Institute recommends between 10 and 15 percent provision for contingency in planning. It is prudent to be a little pessimistic and deliver early as opposed to being overly optimistic and delivering later than planned (Moir, 2015). Determining the scope of the project to be implemented may be difficult where a considerable amount of time is not spent upfront properly planning. Putting together requirements, coming up with detailed plans for project management, establishing and scheduling activities requires careful thought, co-ordination and lots of time (Baker et al., 2008). Without proper project planning activities, there may be lack of stakeholder buy in and commitment and inadequate resources. The result is an increase in success ratios throughout projects being carried out by particular NGOs that take planning seriously (Harding, 2012).

Project planning enables efficient allocation and use of available resources. Developing the work breakdown structure and cost breakdown structure and making the necessary adjustments along the way requires detailed planning to ensure a project is moving towards achievement of pre-set objectives. Successful projects seek to employ limited resources while maximizing output and effectiveness (Zwikael et al, 2014). Planning may seem time consuming at the start but will yield minimum rework and rescheduling later (Ika, 2009). Project planning with clarity and correctness may turn out to be a repetitive process until we get it right, but it may save the project a lot of cost and time in future. The risks associated with poor planning necessitate that the

planning exercise be as meticulous as possible to enable the project achieve success (Kerzner, 2009).

2.5 Theoretical Framework

According to (Bull, 1991) a theory is defined as asset of interrelated concepts, definitions, and propositions that present a systematic view of phenomena by specifying relations among variables with the purpose of explaining or predicting the Phenomena. The study id based on Systems and Management theories.

2.5.1 Systems Theory

The system theory was developed by biologist Ludwig Von Bertalanffy. Little John (1983) defines a system as a set of objects or entities that interrelate with one another to form a whole. System theory is basically concerned with problems or relationships, of structures, and of inter-dependence, rather than with the constant attributes of object. This theory can be related to individuals in the Non-governmental organizations and how they relate to each other in the implementation of relief projects. The systems theory views an organization as a social system consisting of individuals who cooperate within a formal framework, drawing resources, people, finance from their environment and putting back into that environment the products they produce or the services they offer. This theory is based on the view that project managers in the NGO's should focus on the role played beach part of an organization; rather than dealing separately with the parts. According to (Koontz, 2001) the systems theory maintains that an organization does not exist in a vacuum. It does not only depend on its environment, but it is also part of a larger system such as the society or the economic system to which it belongs. The systems approach is concerned with both interpersonal and group behavioural aspects leading to a system of cooperation.

2.6 Conceptual Framework

The conceptual framework is a brief explanation of the relationships between the variables identified for study in the statement of the problem, objectives and research questions. It is the concise description of the phenomenon under study accompanied by visual depiction of the variables under study Kothari, 2004).

Independent Variable

Dependent Variable

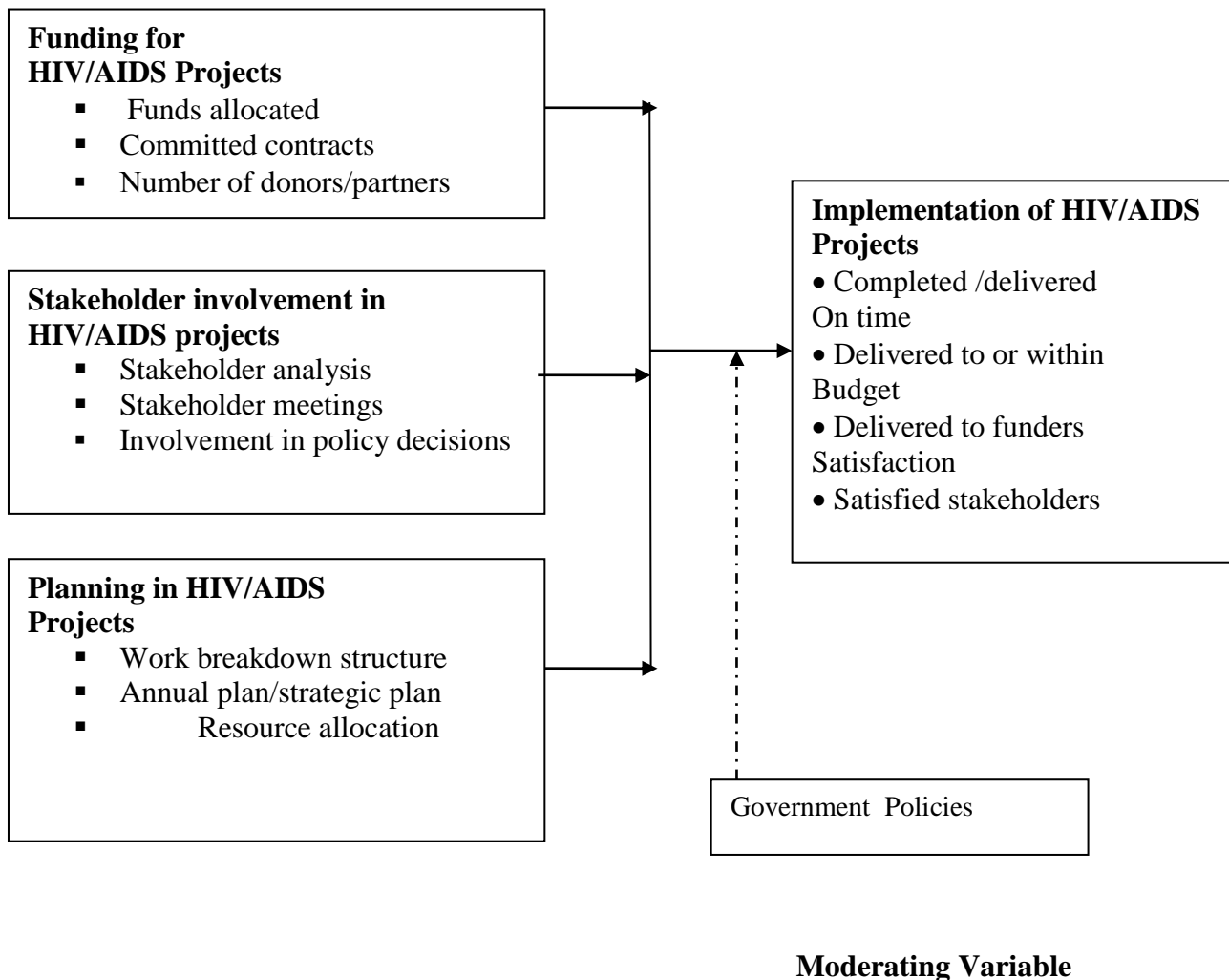


Figure 1 Conceptual Framework

2.6.1 Relationship between the independent variables and dependent variable

The figure is the diagrammatic representation of the relationship between the independent and the dependent variables. The arrows indicate the direction of influence and thus showing the independent variables influence the dependent variable. The independent variables are planning in HIV/AIDS; Projects Funding for HIV/AIDS Projects and Stakeholder involvement in HIV/AIDS projects while dependent variable is Implementation of HIV/AIDS.

2.7 Research Gap

Variable	Indicators	Author (Year)	Title of Study	Findings	Knowledge Gaps
Funding for HIV/AIDS Projects	<ul style="list-style-type: none"> • Funds allocated • Committed contracts • Number of donors / partners 	Ika 2012)	Project management that facilitates sustainable development in Africa	Successful projects in HIV/AIDS sub-sector of health will ideally have secure funding for the whole project locked in multi-year contracts; the payment structure should always be staggered and disbursed as the previous tranche is accounted for such that cash flow difficulties do not arise	The author acknowledged that successful projects in HIV/AIDS sub-sector of health will ideally have secure funding for the whole project. However, he did not acknowledge how that would be achieved.
Stakeholder involvement in HIV/AIDS projects	<ul style="list-style-type: none"> • Stakeholder analysis • Stakeholder meetings • Involvement in policy decisions 	Friedman and Miles (2006).	The convergence of planning and execution: improvisation in new product development	Stakeholder relationship management is important if the project is to take off properly and implementation be smooth as it is the relationship between the project and government, project and community, project and donors, project and other	The author identified that Stakeholder relationship management is important if the project is to take off properly. However, failed to identify the key stakeholders in HIV/AIDS projects

				health partners that is managed	
Planning in HIV/AIDS Projects	<ul style="list-style-type: none"> • Work breakdown structure • Annual plan/strategic plan • Resource allocation 	Hershey (2013)	NGOs and community participation in Kenya's fight against HIV/AIDS, ProQuest, UMI Dissertations Publishing	Poor planning, lack of experience among the executing teams, scope creep, change in project design, project complexity and fraudulent practices may result in budget overruns.	The author acknowledged poor planning, lack of experience among the executing teams; scope creep, change in project design; project complexity and fraudulent practices may result in budget overruns. However, failed to acknowledge the effectiveness of planning toward implementation of projects
Implementation of HIV/AIDS Projects	<ul style="list-style-type: none"> • Completed/delivered on time • Delivered to or within budget • Delivered to funders satisfaction • Satisfied stakeholders 	Boyce and Haddad (2001)	Strategic implementation: five approaches to an elusive phenomenon	Projects possess certain characteristics that distinguish them from any other activity in the organization.	From the study, it was clear that projects possess certain characteristics that distinguish them from any other activity in the organization .However failed to point out to identify the projects

2.8 Summary of Literature Review

Despite an increased interest in factors enabling project performance, only relative handful studies have specifically examined the influence of factors that impact project completion and performance specifically in HIV/AIDS projects implemented by NGOs. By extending a critical review of project performance literature in the last decade, the gap could be bridged. Chan (2004) and Naomi (2014) conducted a case study to determine the influence of critical success factors for delivery of healthcare projects.

As (Goatham, 2013) recently indicated that the wrong definition of success is a cause of failure of projects. In his view, if the project management's definition of success is wrong then the basis upon which key project management decisions are being made is flawed and this may trigger cases of missed milestones and project failure. Good performance of HIV/AIDS projects is realized from different project stakeholders seeing success in the same way, which should lead to concerted effort that aims to achieve a common objective. This review shows that a number of factors are responsible for performance of health projects being implemented by NGOs, and by extension project failure as evident in related project management literature. These factors vary in scope and purpose. So, they are repetitive and overlapping in nature. It is therefore impossible for a general agreement on a specific set of factors as the only factors that are responsible for the optimal performance of healthcare projects. Moreover, different factors affect projects at different stages of the project's lifecycle. However, there could be some underlying reason(s), which appears lacking in literature responsible for projects' success worth identifying.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

The chapter gives the methodology which was to be used in the study. It also provided information on research design, target population, sample size, sampling technique, sampling procedure, unit of analysis and unit of observation, methods of data collection, validity of instrument, data analysis and ethical considerations.

3.2 Research Design

The study adopted descriptive survey research design because the method applied both qualitative and quantitative approaches to research. The researcher adopted descriptive research design because of its low content of data manipulation and because the population that was to be used is homogeneous in nature. Kerlinger (1973) described descriptive research design as a systematic empirical inquiry into which the researcher does not have direct control of independent variables as their manifestation has already occurred or because they inherently cannot be manipulated.

3.3 Target Population

Population referred to an entire group of individuals which are the concern for the study within the area of the study (Kothari, 2004). According to Ngechu (2004), a population is a well-defined or set of people, services, elements, events, group of things or households that are to be investigated. The study targeted a total population of 48 members of staff working with doctors without borders based in Embu according to the organisation's human resources manager.

3.4 Sample Size and Sampling Procedures.

The section discussed the number of respondents sampled and the procedure used in picking the sample. A sample is a smaller group or sub-group obtained from the accessible population (Kothari, 2004). The sample is selected in such a way as to ensure that certain sub-groups in the population are represented in the sample proportion. Since the targeted population is small the researcher employed census which involved capturing the entire population as a sample size which is 48

participants. In a census data was collected on the entire population hence the sample size is equal to the population size.

3.5 Data Collection Methods

This study used questionnaires for data collection. Questionnaires increased the chances of getting honest responses since they ensured anonymity of the respondent. The questionnaire used open ended and closed ended questions. The use of open ended questions offered flexibility for the respondent to provide more details. Closed ended questions allowed for quantitative analysis. This balance was useful for a comprehensive analysis. (Frey & Oishi 1995).

3.6 Validity of Research Instruments

Validity is the accuracy and meaningfulness of inferences, which are based on the research results pretesting questionnaires helps the researcher find ways to increase participants' interest; helps in discovering question content, wording and sequencing problems before the actual study and also helps in exploring ways of improving overall quality of study (Kothari, 2004). To establish the validity of the research instrument the researcher sought opinions of experts in the field of study especially the lecturers in the department of project management. This facilitated the necessary revision and modification of the research instrument thereby enhancing validity. Expert opinions were requested to comment on the representativeness and suitability of questions and gave suggestions of corrections to be made to the structure of the research tools. This helped to improve the content validity of the data which was collected. Content validity was obtained by asking for the opinion of the supervisor, lecturers and other professional on whether the questionnaires and interviews were adequate.

3.7 Reliability of Research Instrument

Reliability of Instruments on the other hand is the extent to which a research instrument produces similar results on different occasions under similar conditions. It's the degree of consistency with which it measures whatever it is meant to measure (Bell, 2010). Reliability is concerned with the question of whether the results of a study are repeatable. A construct composite reliability co-efficient (Cronbach alpha) of 0.8 was achieved.

3.8 Data Analysis

The researcher edited the data collected through questionnaires, for the purpose of checking on completeness, clarity and consistency in answering research questions. The data then was coded, tabulated and analysed using Statistical Package for Social Sciences based on study objectives. Descriptive statistics is computed, and study findings presented using tables and percentages and interpretations made.

3.9 Ethical Issues

Ethical considerations issued are important when dealing with people with diverse cultural backgrounds. Rules and regulations should be to guide conduct of researcher when collecting data for the study from people in various fields and areas. Ethical consideration required that research ethics be observed and respected when relating with people in research undertakings especially in field data collection and in research reporting. The researcher sought permission from County government while and consent from research respondents. Confidentiality was assured and data collection instruments shall not bear their names and those not willing to participate in the study were not be forced to do so.

3.10 Operational definition of variables

According to Martyn (2008) operationalization was defined as the process of strictly defining variables into measurable factors. Operationalization is achieved by looking at behavioural dimensions, indicators, facets or properties denoted by the concept, translated into observable and measurable elements to develop an index of the concept. Measures can be objective or subjective.

Table 1.1 Operational Frameworks

Objectives	Type of Variable	Variable	Indicators	Scale	Tools of analysis	Type of analysis
To assess how funding for HIV/AIDS project influence implementation of HIV/AIDS projects	Independent	Funding	<ul style="list-style-type: none"> • Funds allocated • Committed contracts • Number of donors 	Ordinal	Percentages Mean score	Descriptive statistics
To establish how stakeholder involvement in HIV/AIDS projects influences implementation of HIV/AIDS projects	Independent	Stakeholder involvement	<ul style="list-style-type: none"> • Stakeholder analysis • Stakeholder meetings • Involvement in policy decisions 	Interval	Percentages Mean score	Descriptive statistics Regression analysis
To determine how planning in HIV/AIDS projects influence implementation of HIV/AIDS projects	Independent	Planning	<ul style="list-style-type: none"> • Work breakdown structure • Annual plan • Resource allocation 	Ordinal	Percentages Mean score	Descriptive statistics
	Dependent	Implementation of HIV/AIDS projects	<ul style="list-style-type: none"> • Completed on time • Delivered to or within a budget • Delivered to funders satisfaction • Satisfied stakeholders 	Ordinal	Percentages Mean score	Descriptive statistics

CHAPTER FOUR

DATA ANALYSIS AND, PRESENTATION AND INTERPRETATION

4.1 Introduction

This chapter presents the data analysis, presentation and discussions of the findings of the research study. The findings are presented under the following themes namely: response profile and on each of the investigative questions that the research sought to answer.

4.2 Questionnaire Return Rate

The study targeted a sample size of 48 respondents; from that sample size 42 respondents filled in and submitted the questionnaires making a response rate of 88 % while 6 respondents never filled the questionnaires making a response rate of 12%. The results are presented in Table 4.2

Table4.2 Response Rate

Response Rate	Frequency	Percentage
Returned	42	88
Not returned	6	12
Total	48	100

The findings in Table 4.2 shown that 42 (88%) respondents returned the questionnaires. That was good and representative and conforms to Mugenda and Mugenda (1999) stipulation that a response rate of 50% is adequate for analysis and reporting; a rate of 60% is good and a response rate of 70% and over is excellent. This implies that majority of the respondents filled the questionnaires and the return rate was appropriate for data analysis.

4.3 Demographic characteristics of the respondents

The study sought to establish the demographic characteristics of the respondents based on gender, age, education level and working experience. The importance of this to know whether the employees are well educated and have knowledge and skills on implementation of HIV AIDS projects, all this are further discussed in sub thematic areas.

4.3.1 Distribution of Age of the respondents.

The researcher sought to establish the ages of the respondents as he embarked on the study. The various age of respondents who participated in the study. The results is represented in Table 4.3

Table 4.3 Distribution of Age of the respondents

Age	Frequency Rate	Percentage
21 - 25	1	2
26-30	5	11
31-35	7	16
41-45	10	23
46-50	8	19
51-55	6	14
Over 55	5	11
Total	42	100

From the study presented in Table 4.3 it shows that out of 42 respondents who participated in the study 1(2%) were aged 21-25 years,5(11%) 26-30 year,7(16%) 31-35 years, 10(23%) 41-45 years,8(19%) 46-50 years,6(14%) 51-55 years and 5(11%) over 55 years. The findings of this study imply that majority of the participants were within the age of 41-45 years.

4.3.2 Education level of the Respondents

The study also sought to establish the highest level of education of the respondents. The findings are as presented in Table 4.4.

Table 4.4 Education level

Education	Frequency	Percentage
Diploma	5	12
Bachelor Degree	21	50
Master's Degree	12	29
Phd	4	9
Total	42	100

According to the findings in Table 4.4 5(12%) respondents had diploma level of education, 21(50%) respondents had a bachelor's degree, 12(29%) had master's Degree and 4(9%) were PhD holders. Majority of the participants holds bachelor's degree, this indicates that 21(50%) of the respondents who participated in the study are well educated holding Degree therefore are expected to have enough knowledge and skill to influence implementation of HIV/AIDS projects managed by Ngos in health sector.

4.3.3 Years of Experience

The study also sought to establish the Years of Experience of the respondents. The findings are as presented in Table 4.5

Table 4.5 Years of Experience

Years of Experience	Frequency Rate	Percentage
1-5 Years	5	12
6-10 Years	18	42
10-15 Years	12	29
Above 16 Years	7	17
Total	42	100

According to the findings in Table 4.5 5(12%) respondents had 1-5 years of experience, 18 (42%) 6-10 years had years of experience, 12(29%) had 10-15 years of experience and 7(17%) had 16 years and above of experience. This implies that employees working at Doctors without Borders in Embu had a lot of experience dealing with HIV/AID Projects. Employee experience is, therefore, a critical investment every leader should consider, no matter the environment they are working in.

4.4 Implementation of HIV/AIDS projects .

The researcher sought to determine the level of agreement to the statement relating to implementation of HIV/AIDS projects managed by the Doctors without Borders in Embu County. Likert scale for rating questionnaires was employed: 5- Strongly Agree, 4 - Agree, 3 - Neutral, 2 – Disagree and 1 - Strongly Disagree.

4.4.1 Implementation of HIV/AIDS projects in Kenya

The study sought to find out the implementation of HIV/AIDS projects in Kenya. The results are shown in the Table 4.6

Table 4.6 Implementation of HIV/AIDS projects

	Strongly Agree		Agree		Neutral		Disagree		Strongly Disagree	
	F	%	F	%	F	%	F	%	F	%
Projects completed on time are an indicator of project implementations	21	50	15	36	4	10	1	2	1	2
Projects delivered within budget are an indicator of projects implementation	18	43	13	31	8	19	2	5	1	2
Projects delivered to funders satisfaction are an indicator of project implementation	30	72	10	24	1	2	1	2	0	0
Satisfied stakeholders are an indicator of project implementation	23	55	10	24	5	12	3	7	1	2

The findings in Table 4.6, 21(50%) of the participants strongly agreed that projects completed on time are an indicator of project implementation, 15(36%) agreed, 4(10%) were neutral and 1(2%) disagree with the matter. This implies that majority of the respondents did agree that projects completed on time was an indicator of projects implementation. On the statement whether projects delivered within budget as an indicator of projects implementation 18(43%) strongly agreed, 13(31%) agreed, 8(19%) were neutral and 2(5%) disagreed on the matter while the remaining 1(2%) strongly disagreed on the matter. This implies that majority of the respondents agreed that projects delivered within budget is an indicator of projects implementation .On the statement on whether projects delivered to funders satisfaction are an indicator of project implementation, 30 (72%) strongly agreed, 10(24%) agreed, 1(2%) were neutral on the matter, 1(2%) disagreed .This implies that majority of the respondents agreed that projects delivered to funders satisfaction are an indicator of projects

implementation. On the last statement whether satisfied stakeholders are an indicator of project implementation 23(55%) strongly agreed, 10(24%) agreed on the matter, 5(12%) were neutral on the matter, 3(7%) disagreed while the remaining 1(2%) of the respondents strongly disagreed.

This goes in line with (Boles, 2002) Project implementation in organizations appears to be the most difficult aspects of a manager’s job. The purpose of project management is to forecast or anticipate potential dangers and problems that may jeopardize the success of a project and then to plan; organize and control activities that will lead to the successful completion of projects in spite of all the envisaged risks. However, in practice more than 80% of projects run late or over budget. The consequences of ineffective implementation of projects are also likely to have a poorly motivated workforce (Lock, 2003).

4.5 Funding and implementation of HIV/AIDs projects

The first objective was to assess how Funding influences implementation of HIV/AIDs projects managed by doctors without boundaries; Likert scale for rating questionnaires was employed. Scale: 5- Strongly Agree, 4 - Agree, 3 - Neutral, 2 – Disagree and 1 - Strongly Disagree.

4.5.1 Organization Funding

The study sought to find out if the organisation had adequate funding. The results are shown in Table 4.7

Table 4.7 Organization Funding

Response	Frequency	Percentage
Yes	39	93
No	3	7
Total	42	100

From table 4.7, 39 (93%) of the respondents agreed that they had adequate funding while the remaining 3 (7%) of the respondent said that they had no enough funding. This implies that majority of the respondents expressed that the organisation had

adequate funding and Project Managers need to be more financially savvy. Not only must projects be on time and on budget, but they also need to contribute to both shareholder value and the long-term financial success of the project.

4.5.2 Sources of funding for your projects

The study sought to find out the sources of funding for HIV/AIDs projects. The results are shown in the table below table 4.8

Table 4.8 Funding sources for projects

	Frequency	Percentage
Thro' Donor	30	71
Thro' Fundraising	7	17
Thro' Government	3	7
Other	2	5
Total	42	100

From Table 4.8, 30 (71%) of the respondents said that their funding sources were from donors, 7(17%) were thro' fundraising, 3(7%) were thro' government while the others 2(5%) said that the funding were from other sources. This implies that majority of the respondents agreed that most of the funding was from donors.

4.5.3 Funds implementation and HIV/AIDs projects

Respondents were required to state their agreement on different statements. The responses were shown in Table 4.9

Table 4.9 Funds implementation and HIV/AIDs projects

	Strongly Agree		Agree		Neutral		Disagree		Strongly Disagree	
	F	%	F	%	F	%	F	%	F	%
Funds allocated to a project influence implementation of HIV/AIDs related projects	23	55	9	21	4	10	3	7	3	7
Signed / committed donor contracts influence implementation of HIV/AIDs related projects	19	45	12	29	8	19	2	5	1	2
Number of donors and partners influence the implementation of HIV/AIDs related projects	27	64	8	19	4	10	3	7	0	0

From Table 4.9 on whether funds allocated to a project influence implementation of HIV/AIDs related projects, 23(55%) of the respondents strongly agreed, 9 (20%) of the respondents agreed, 4 (10%) were neutral on the matter, 3 (7%) disagreed on the matter while the remaining 3 (7%) strongly disagreed. This implies that majority of the respondents agreed that funds allocated to a project did influence implementation of HIV/AIDs. On whether committed donors contracts influenced implementation of HIV/AIDs related projects, 19(45%) of the respondents strongly agreed, 12(29%) of the respondents agreed, 8(19%) were neutral on the matter, 2(5%) of the respondents disagreed while the remaining 1(2%) strongly disagreed. This implies that majority of the respondents agreed with the statement that committed donor contracts influenced implementation of HIV/AIDs related projects. The last statements on whether the number of donors and partners influence the implementation of HIV/AIDs related projects 27(64%) strongly agreed, 8(19%) agreed, 4(10%) were neutral while the remaining 3(7%) of the respondents agreed. Majority of the respondents agreed that the number of donors and partners influence the implementation of HIV/AIDs related projects.

This goes in line with Price Waterhouse Coopers (2014) who identified important success factors as ‘clearly establishing project costs, committed funding, and a deliberate project centred financial management framework that includes cost

monitoring and reporting. Stein Fort and Walker (2007) in their study note that ‘sufficient financial and non-financial resources being specifically dedicated for the project based on details obtained from a well thought out project plan’ as a success factor.. Secure financing goes hand in hand with managing project costs and budget throughout the project’s phases to ensure that expected results and benefits are yielded within the predetermined resource constraints. Many project funders tend to prefer financing short term specific issue projects since they have higher impact; Effective aid, however usually requires core unrestricted funding over a longer period in order to empower local institutional strengthening.

4.5.4 Extent to which adequate funding influences the implementation of HIV/AIDs Projects

The study sought to find out the extent to which adequate funding influences the implementation of HIV/AIDs projects. The response is as shown in Table 4.10

Table 4.10 Extent to which adequate funding influences the implementation of HIV/AIDs Projects

	Frequency	Percentage
To a very great extent	26	62
To a great extent	10	24
To a moderate extent	3	7
To a low extent	2	5
To a very low extent	1	2
Total	42	100

From Table 4.10, on the extent to which adequate funding influences the implementation of HIV/AIDs 26(62%) agreed that it did at a great extent, 10(24%) of the respondents agreed to a great extent, 3(7%) of the respondents agreed at a moderate extent, 2(5%) of the respondents agreed are a low extent while the remaining 1(2%) of the respondents agreed that it did at a low extent. This implies that majority of the respondents agreed that adequate funding influences the implementation of HIV/AIDs projects.

4.6 Stakeholder involvement and Implementation of HIV/AIDs Projects

The second objective was to assess how stakeholder involvement influences implementation of HIV/AIDs projects managed by doctors without boundaries; Likert scale for rating questionnaires was employed. Scale: 5- Strongly Agree, 4 - Agree, 3 - Neutral, 2 – Disagree and 1 - Strongly Disagree.

4.6.1 Stakeholder involvement

The respondents were required to state their agreement on different statements relating to stakeholder’s involvement and its influence on implementation of HIV/AIDs projects. The responses were as shown in Table 4.11

Table 4.11 Stakeholder involvement

Statement	Strongly Agree		Agree		Neutral		Disagree		Strongly Disagree	
	F	%	F	%	F	%	F	%	F	%
Stakeholder analysis influences implementation of HIV/AIDs projects	25	59	10	24	4	10	3	7	0	0
Stakeholder meetings influence implementation of HIV/AIDs	17	41	13	31	9	21	2	5	1	2
Stakeholder involvement in policy decisions influence implementation of HIV/AIDs	21	50	11	26	5	12	4	10	1	2

From Table 4.11, on the response on whether stakeholder analysis influences implementation of HIV/AIDs projects 25(59%) of the respondents strongly agreed, 10(24%) of the respondents agreed, 4(10%) were neutral on the matter, while the remaining 3(7%) of the respondents disagreed on the matter. This implies that majority of the respondents agreed that stakeholder analysis influences implementation of HIV/AIDs projects. On whether 17(41%) of the respondents

strongly agreed, 13(31%) of the respondents agreed, 9(21%) of the respondents were neutral on the matter 2(5%) of the respondents disagreed on the matter while the remaining 1(2%) of the respondents strongly disagreed. This implies that majority of the respondents agree that stakeholder meetings influence implementation of HIV/AIDs. The last statement that stated that stakeholder involvement in policy decision influence implementation of HIV/AID, 21(50%) of the respondents strongly agreed, 11(26%) of the respondents agreed, 5(12%) of the respondents were neutral on the matter, 4(10%) of the respondents disagreed on the matter while the remaining 1(2%) of the respondents strongly disagreed. This implies that majority of the respondents agreed that stakeholder involvement in policy decision influence implementation of HIV/AIDs.

This concurs with (Aaltonen, K.2011) Many of these organizations recognize that stakeholder consultation should be about looping them in from pre-planning to inception so that their views and ideas shape the project to be implemented and the benefits that emanate from the project. The main factors and challenges to consider when developing a framework for community involvement in health projects include: the community should be empowered to take up certain responsibilities such as diagnosis and surveillance through community health workers, putting in place communication channels that facilitate community participation, facilitate sharing of information to enable learning that helps improve future project design, using community opinion leaders to encourage condom use, reducing stigma for the affected and adopting use of ARVs in managing HIV/AIDS (Hershey, M 2011)Analysis of questions arising from stakeholder analysis enables the identification of relationships which should be enhanced or tackled avoid negative effects on the project and enhance positive ones. Stakeholder has over time proved to be a key tool in enhancing performance of health projects including HIV/AIDS ones (Chan, P. 2004).

4.6.2 Extent to which stakeholders involvement influences the implementation of HIV/AIDS projects

The respondents were requested to indicate the extent to which stakeholders' involvement influences the implementation of HIV/AIDs projects. The response was as shown in Table 4.12.

Table 4.12 Extent to which stakeholders involvement influences the implementation of HIV/AIDS projects

Extent	Frequency	Percentage
To a very great extent	29	69
To a great extent	5	12
To a moderate extent	3	7
To a low extent	3	7
To a very low extent	2	5
Total	42	100

From table 4.12, on what extent did stakeholder involvement influence the implementation of HIV/AIDS projects, 29(69%) of the respondents said it did influence to a very great extent, 5(12%) of the respondents said it did influence to a great extent, 3(7%) to a moderate extent, 3(7%) to a low extent while the remaining 2(5%) of the respondents agreed to a very low extent. This implies that majority of the respondents agreed that stakeholder involvement did influence the implementation of HIV/AIDS projects.

4.7 planning and implementation of HIV/AIDS projects

The third objective was to assess how effective planning influences implementation of HIV/AIDS projects managed by doctors without boundaries; Likert scale for rating questionnaires was employed. Scale: 5- Strongly Agree, 4 - Agree, 3 - Neutral, 2 – Disagree and 1 - Strongly Disagree.

4.7.1 organisation plan for its project

The study sought to find out if the organisations did plan for their projects. The response is as shown in Table 4.13

Table 4.13 Does your organization plan for its project

	Frequency	Percentage
Yes	40	95
No	2	5
Total	42	100

As per Table 4.13, on whether the organisation planned for its project, 40(95%) of the respondents agreed that their organisation did plan for their projects while the remaining 2(5%) of the respondents disagrees by saying that their organisations did not plan for their projects. This implies that majority of the respondents agreed that their organisation did plan for implementation of HIV/AIDs projects.

4.7.2 Planning

The respondents were required to state their agreement on different statements relating to effective planning and its influence on implementation of HIV/AIDs projects. The responses were as shown in Table 4.14

Table 4.14 Planning and implementation of HIV/AIDs Projects

	Strongly Agree		Agree		Neutral		Disagree		Strongly Disagree	
	F	%	F	%	F	%	F	%	F	%
Work breakdown structure influences of HIV/AIDs projects	18	43	10	24	7	17	4	10	3	7
The annual plan/ strategic plan influences the implementation of HIV/AIDs projects	25	60	7	17	6	14	3	7	1	2
Does resources allocation influence the implementation of HIV/AIDs	27	64	11	27	3	7	1	2	0	0

From Table 4.14, on whether work breakdown structure did influences HIV/AIDs 18(43%) of the respondent strongly agreed, 10(24%) of the respondents agreed , 7(17%) of the respondents were neutral on the matter , 4(10%) of the respondents

disagreed while the remaining 3(7%) of the respondents strongly disagreed. This implies that majority of the respondents agreed that work breakdown structure influences of HIV/AIDS projects. On whether the annual plan/ strategic plan influences the implementation of HIV/AIDS projects, 25(60%) of the respondents strongly agreed, 7(17%) of the respondents agreed, 6(14%) of the respondents were neutral on the matter, 3(7%) of the respondents disagreed while the remaining 1(2%) of the respondents strongly disagreed. This implies that the annual strategic plan did influence the implementation of HIV/AIDS projects. On whether resource allocation did influence the implementation of HIV/AIDS projects, 27(64%) of the respondents strongly agreed, 11(27%) agreed, 3(7%) were neutral on the matter while the remaining 1(2%) of the respondents disagreed. This implies that majority of the respondents agreed that resource allocation influenced the implementation of HIV/AIDS projects.

This goes in line with the statement that states, project performance factor has been supported by other researchers among them (Agheneza, 2009) and (Khang, & Moe, 2008). They indicated that the process of project planning and implementation is able to resolve inherent challenges ranging from conceptual differences about the projects if there are well thought out and capture proper technical and economic considerations. Further, they should have the necessary basic information obtained through sufficient investigation and surveys to adequate project monitoring throughout the project lifecycle and in-depth evaluation exercise. Where all the above factors are considered, development projects such as health projects tend to have strong links between sectoral planning and project identification, /feasibility and formulation, and between project preparation/project appraisal and project implementation (Golini & Landoni, 2013).

4.7.3 Extent to which planning of projects influences the implementation of HIV/AIDS projects

The study sought to find out the extent to which effective planning of projects influences the implementation of HIV/AIDS projects. The responses were as shown in Table 4.15.

Table 4.15 Extent to which effective planning of projects influences the implementation of HIV/AIDs projects

Extent	Frequency	Percentage
To a very great extent	30	71
To a great extent	7	17
To a moderate extent	2	5
To a low extent	2	5
To a very low extent	1	2
Total	42	100

As per Table 4.15, on the extent to which effective planning of projects influences the implementation of HIV/AIDs 30(71%) agreed that it did affect to a very great extent, 7(17%) to a great extent, 2(5%) to a moderate extent, 2(5%) to a low extent while the remaining 1(2%) of the respondents said it did influence at a very low extent. This implies that effective planning influences the implementation of HIV/AIDs projects.

CHAPTER FIVE

SUMMARY OF FINDINGS, DISCUSSIONS, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

This chapter entails a summary of findings, discussion of findings, conclusions and recommendations of the study based on the objective of the study. This entails a synthesis of key issues of the objectives of the study as deduced from the entire study

5.2 Summary of the Findings

This section gives a summary of the findings generated in chapter four based on the objectives of the study.

5.2.1 Funding and Implementation of HIV/AIDS

The first objective was to assess how Funding influences implementation of HIV/AIDS projects managed by doctors without boundaries 39(93%) of the respondents agreed that they had adequate funding while the remaining 3 (7%) of the respondent said that they had no enough funding. This implies that majority of the respondents expressed that the organisation had adequate funding and Project Managers need to be more financially savvy. Not only must projects be on time and on budget, but they also need to contribute to both shareholder value and the long-term financial success of the project.30 (71%) of the respondents said that their funding sources were from donors, 7(17%) were thro' fundraising, 3(7%) were thro' government while the others 2(5%) said that the funding were from other sources. This implies that majority of the respondents agreed that most of the funding was from donors.

Respondents were required to state their agreement on different statements on whether funds allocated to a project influence implementation of HIV/AIDS related projects, 23(55%) of the respondents strongly agreed, 9 (20%) of the respondents agreed, 4 (10%) were neutral on the matter, 3 (7%) disagreed on the matter while the remaining 3 (7%) strongly disagreed. This implies that majority of the respondents agreed that funds allocated to a project did influence implementation of HIV/AIDS. On whether committed donors' contracts influenced implementation of HIV/AIDS related projects, 19(45%) of the respondents strongly agreed, 12(29%) of the respondents agreed, 8(19%) were neutral on the matter, 2(5%) of the respondents

disagreed while the remaining 1(2%) strongly disagreed. This implies that majority of the respondents agreed with the statement that committed donor contracts influenced implementation of HIV/AIDs related projects. The last statements on whether the number of donors and partners influence the implementation of HIV/AIDs related projects 27(64%) strongly agreed, 8(19%) agreed, 4(10%) were neutral while the remaining 3(7%) of the respondents agreed. Majority of the respondents agreed that the number of donors and partners influence the implementation of HIV/AIDs related projects.

5.2.2 Stakeholder Involvement and Implementation of HIV

The second objective was to assess how stakeholder involvement influences implementation of HIV/AIDs projects managed by doctors without boundaries; Likert scale for rating questionnaires was employed. The respondents were required to state their agreement on different statements relating to stakeholder's involvement and its influence on implementation of HIV/AIDs projects. On whether stakeholder analysis influences implementation of HIV/AIDs projects 25(59%) of the respondents strongly agreed, 10(24%) of the respondents agreed, 4(10%) were neutral on the matter, while the remaining 3(7%) of the respondents disagreed on the matter. This implies that majority of the respondents agreed that stakeholder analysis influences implementation of HIV/AIDs projects. On whether 17(41%) of the respondents strongly agreed, 13(31%) of the respondents agreed, 9(21%) of the respondents were neutral on the matter 2(5%) of the respondents disagreed on the matter while the remaining 1(2%) of the respondents strongly disagreed.

This implies that majority of the respondents agree that stakeholder meetings influence implementation of HIV/AIDs. The last statement that stated that stakeholder involvement in policy decision influence implementation of HIV/AID, 21(50%) of the respondents strongly agreed, 11(26%) of the respondents agreed, 5(12%) of the respondents were neutral on the matter, 4(10%) of the respondents disagreed on the matter while the remaining 1(2%) of the respondents strongly disagreed. This implies that majority of the respondents agreed that stakeholder involvement in policy decision influence implementation of HIV/AIDs. The respondents were requested to indicate the extent to which stakeholders' involvement influences the implementation of HIV/AIDs projects, 29(69%) of the respondents said it did influence to a very great extent, 5(12%) of the respondents said it did influence to a great extent, 3(7%) to a

moderate extent, 3(7%) to a low extent while the remaining 2(5%) of the respondents agreed to a very low extent. This implies that majority of the respondents agreed that stakeholder involvement did influence the implementation of HIV/AIDS projects.

5.2.3 Planning and Implementation of HIV/AIDS

The third objective was to assess how effective planning influences implementation of HIV/AIDS projects managed by doctors without boundaries; Likert scale for rating questionnaires was employed. The study sought to find out if the organisations did plan for their projects. On whether the organisation planned for its project, 40(95%) of the respondents agreed that their organisation did plan for their projects while the remaining 2(5%) of the respondents disagreed by saying that their organisations did not plan for their projects. This implies that majority of the respondents agreed that their organisation did plan for implementation of HIV/AIDS projects. The respondents were required to state their agreement on different statements relating to effective planning and its influence on implementation of HIV/AIDS projects. From the table above on whether work breakdown structure did influence HIV/AIDS 18(43%) of the respondent strongly agreed, 10(24%) of the respondents agreed, 7(17%) of the respondents were neutral on the matter, 4(10%) of the respondents disagreed while the remaining 3(7%) of the respondents strongly disagreed.

This implies that majority of the respondents agreed that work breakdown structure influences of HIV/AIDS projects. On whether the annual plan/ strategic plan influences the implementation of HIV/AIDS projects, 25(60%) of the respondents strongly agreed, 7(17%) of the respondents agreed, 6(14%) of the respondents were neutral on the matter, 3(7%) of the respondents disagreed while the remaining 1(2%) of the respondents strongly disagreed. This implies that the annual strategic plan did influence the implementation of HIV/AIDS projects. On whether resource allocation did influence the implementation of HIV/AIDS projects, 27(64%) of the respondents strongly agreed, 11(27%) agreed, 3(7%) were neutral on the matter while the remaining 1(2%) of the respondents disagreed. This implies that majority of the respondents agreed that resource allocation influenced the implementation of HIV/AIDS projects.

5.3 Discussion of findings

This section presents the discussion of the findings as drawn from the responses provided by the respondents based on the objectives of the study

5.3.1 Funding

The first objective sought to assess how adequate funding influences implementation of HIV/AIDS projects managed by Doctors without Boundaries. This implies that majority of the respondents expressed that the organization had adequate funding for implementation of HIV/AIDS projects. This implies that majority of the respondents agreed that most of the funding was from donors. Therefore, majority of the respondents agreed that funds allocated to a project did influence implementation of HIV/AIDS. This implies that majority of the respondents agreed with the statement that committed donor contracts influenced implementation of HIV/AIDS related projects. Majority of the respondents agreed that the number of donors and partners influence the implementation of HIV/AIDS related projects.

This goes in line with Price Waterhouse Coopers (2014) who identified important success factors as ‘clearly establishing project costs, committed funding, and a deliberate project centered financial management framework that includes cost monitoring and reporting. Stein Fort and Walker (2007) in their study note that ‘sufficient financial and non-financial resources being specifically dedicated for the project based on details obtained from a well thought out project plan’ as a success factor. Secure financing goes hand in hand with managing project costs and budget throughout the project’s phases to ensure that expected results and benefits are yielded within the predetermined resource constraints. Many project funders tend to prefer financing short term specific issue projects since they have higher impact; Effective aid, however usually requires core unrestricted funding over a longer period in order to empower local institutional strengthening.

5.3.2 Stakeholder Involvement

The second objective was to assess how stakeholder involvement influences implementation of HIV/AIDS projects managed by Doctors without Boundaries. This implies that majority of the respondents agreed that stakeholder analysis influences implementation of HIV/AIDS projects. Therefore, majority of the respondents agree that stakeholder meetings influence implementation of HIV/AIDS projects. This

implies that majority of the respondents agreed that stakeholder involvement in policy decision influence implementation of HIV/AIDs. This concurs with (Aaltonen, K.2011) The organization recognize that stakeholder consultation should be about looping them in from pre-planning to inception so that their views and ideas shape the project to be implemented and the benefits that emanate from the project.

The main factors and challenges to consider when developing a framework for community involvement in health projects include: the community should be empowered to take up certain responsibilities such as diagnosis and surveillance through community health workers, putting in place communication channels that facilitate community participation, facilitate sharing of information to enable learning that helps improve future project design, using community opinion leaders to encourage condom use, reducing stigma for the affected and adopting use of ARVs in managing HIV/AIDS (Hershey, M 2011) Analysis of questions arising from stakeholder analysis enables the identification of relationships which should be enhanced or tackled avoid negative effects on the project and enhance positive ones. Stakeholder has over time proved to be a key tool in enhancing performance of health projects including HIV/AIDS ones (Chan, P. 2004).

5.3.3 Planning

The third objective was to assess how effective planning influences implementation of HIV/AIDs projects managed by Doctors without Boundaries; Likert scale for rating questionnaires was employed. This implies that majority of the organisations did plan for their projects. This implies that majority of the respondents agreed that work breakdown structure influences of HIV/AIDs projects. This implies that the annual strategic plan did influence the implementation of HIV/AIDs projects. This implies that majority of the respondents agreed that resource allocation influenced the implementation of HIV/AIDs projects.

This goes in line with the statement that states, project performance factor has been supported by other researchers among them (Agheneza, 2009) and (Khang, & Moe, 2008). They indicated that the process of project planning and implementation is able to resolve inherent challenges ranging from conceptual differences about the projects if there are well thought out and capture proper technical and economic considerations. Further, they should have the necessary basic information obtained

through sufficient investigation and surveys to adequate project monitoring throughout the project lifecycle and in-depth evaluation exercise. Where all the above factors are considered, development projects such as health projects tend to have strong links between sectoral planning and project identification, /feasibility and formulation, and between project preparation/project appraisal and project implementation (Golini & Landoni, 2013).

5.4 Conclusion

The study makes the following conclusions; lack of adequate funding had a negative influence on the performance of health projects in HIV/AIDS projects. Where HIV/AIDS related projects run out of resources before completion, there is a negative impact on the achievement of intended objectives hence the desired outcomes and impact may not be achieved. The study concludes that stakeholder involvement to a significant extent impacts on the implementation of HIV /AIDs projects by NGOs in the health sector.

Good and clear stakeholder's involvement in implementation of HIV/AIDs projects is of great importance in ensuring smooth implementation of HIV/AIDS projects. Planning promoted the performance of health projects working in HIV/AIDS. Good practice in planning HIV/AIDS prevention programming demands well thought out, rigorous, realistic, objective oriented process that responds to the baseline of the groups most affected by the epidemic, and that are well integrated in the national HIV plan. Project leadership type and style influences project success organizational leadership influences the performance of NGOs working in the health sector and that existence of a team structure influences performance of HIV/AIDS projects.

5.4 Recommendations

The study made the following recommendations:

- i. Fund-raising leaders and resource mobilization teams should consider the financial resources needed to finish the project and match this with the project design and work plans. This will help eliminate the potential of discontinuing the project for lack of resources. Project managers must build contingency monitoring so that interventions are preferably on or under budget and with a minimal number of problems along the way. The Local resource mobilization should be enhanced to shield the projects from shifting foreign donor

priorities. The study recommends that the sustainability must be a key consideration when designing HIV/AIDS programmes.

- ii. The study also recommends that stakeholders should be included in all pre-implementation and inception meetings as well as their views being incorporated in planning and execution. This will increase the acceptability and create a bridging social investment for the HIV/AIDS projects, well as enriching the project with more ideas. The study recommends enhancing a team approach in implementing projects since it was found to be a strong enabler of project performance. Further, the study found that given the various phases through which a project goes, situational leadership which emphasizes flexibility is more suitable since direction by manager will depend on the type of situation.
- iii. The study also recommends that There are several forms of planning and sustainability that should be taken in to account including financial, institutional and community so that with donor aided projects coming to an end does not condemn the community back to the adverse effects that the intervention sought to address. Risk management should be incorporated in to the implementation with projects being implemented as per the proposal with simplified work breakdown and cost breakdown structures supporting the work plan. The study recommends that the project management office or committee should continuously assess stakeholder interests; this will help to promote their buy-in and eliminate intergroup conflicts thereby improving project performance.

5.5 Suggestions for further studies

The following suggestions are offered for future research as a result of the findings

- i. Factors influencing sustainability of HIV/AIDS project
- ii. Factors influencing performance of HIV/AIDS projects managed by government
- iii. Influence of effective planning on implementation of HIV/AIDS projects

REFERENCES

- Aaltonen, K. (2011). Project Stakeholder Analysis and Environmental Interpretation Process. *International Journal of Project Management*, 29(2), 165-183.
- Agheneza (2009) the moderating effect of risk on the relationship between planning and success. *International Journal of Project Management*, 32, pp. 435-441.
- Baker, B.N., D.C. Murphy, and D. Fisher, Factors Affecting Project Success, in *Project Management Handbook*. 2008, John Wiley & Sons, Inc. p. 900-920.
- Bechange, S. (2010). “Retracted: Determinants of Project Success among HIV/AIDS Non- Governmental Organizations (NGOs) in Rakai, Uganda” *The New African*, September, 2010 pp 47-52.
- Bernal, V. (2014). *Theorizing NGOs: States, Feminisms and Neo liberalism*, Duke University Press, Durham
- Birdsall, (2004). Logical framework approach mutually exclusive or complementary tools for planning *Journal of Development in practice*
- Brass, J.N (2012). “Blurring Boundaries: The Integration of NGOs into Governance in Kenya”, *Governance*, Vol. 25, No. 2, pp. 209-235
- Brown, L. & Timmer, V. (2013). “Role of Civil Society as Catalysts for Transnational Social Learning”, *Voluntas: International Journal of Nonprofit Organizations*, Vol.17, No.1, pp.1-16
- Boles (2002) *A Companion to the American South*. Malden, Mass. and Oxford, UK: Blackwell Publishers.
- Boyce and Haddad (2001), Strategic implementation: five approaches to an elusive phenomenon, *Strategic Management Journal*, Vol. 5 pp.241-64.
- Chan, P.L. (2004), Critical success factors for delivering health care projects in Hong Kong. Hong Kong Polytechnic University (Hong Kong): Ann Arbor. P. 453-453p.
- Crawford, P, & Bryce P. (2011). Enhancing project success: A method of enhancing the efficiency and effectiveness of aid project implementation. *International Journal of project management*, 21(5):363-373
- Cleland, D.I. & Gareis, R. (2009). *Global project management handbook*. McGraw - Hill Professional

- Cooper, R.D., &Schindler, S.P (2006). Business Research Methods, 9th Edition. McGraw Hill.
- Darrell, Myrick. (2013). A Logical Framework for Monitoring and Evaluation: A Pragmatic Approach to M&E
- Dwivedi, U., (2010), Earned Value Management Explained (Online) Available: www.projectsmart.co.uk (retrieved 19.05.2015)
- First and walker, (2007). "Operations research to improve financial sustainability in NGOs," *frontiers Final Report*, Population Council Washington, DC.
- Frey, J.H. and Oishi, S.M. (1995). How to conduct interviews by tele-phone and in person. Thousand Oaks, CA: Sage Publication
- Friedman and mile, (2006), "The convergence of planning and execution: improvisation in new product development", *Journal of Marketing*, Vol. 62 pp.1-20.
- Fleischer, D., &Christie, C. (2009). Evaluation use: Results from a survey of U.S. American Evaluation Association members. *American Journal of Evaluation*, 30(2), 158–175.
- Goatham, R. What is Project Success? Accessed on September 16, 2016 from <http://calleam.com/WTPF/?p=3501>. 2013.
- Golini, R., & Landoni, P. (2013). *International Development Projects: Peculiarities & Managerial Approaches*: Project Management Institute, Inc.
- Gruskin, S. (2010). Rights-based Approaches to Health Policies and Programs: Clarifications and explanations, *Journal of Public Health Policy*, Vol. 31, No. 2, and pp. 129-145
- Harding, J. (2012) *Avoiding Project Failures*. *Chemical Engineering*, 2012. 119(13):p. 51-54. Hermans, V., et al., (2013) How to manage international development (ID) projects successfully. *International Journal of Project Management*, Vol. 31(1): p. 22-30.
- Hersey & Blanchard (1996). *Situational Leadership Theory* Seltzer & Bass, (1990). *Theory of Transformational Leadership*.

- Hershey, M.(2011). NGOs and community participation in Kenya's fight against HIV/AIDS, ProQuest, UMI Dissertations Publishing
- Ika, L.A. (2012). Project management that facilitates sustainable development in Africa: The reason why projects are having challenges and possible mitigation. *Project management journal*, 47, pp. 32-35.
- Kahsay, H.M. (2004). The role of civil society in district health systems: hidden resources, WHO Resources.
- Kaleeba, N (2013). Contribution of Civil Society Organizations to Health in Africa, An AMREF Publication
- Kerzner, H.R., & Saladis, F.P. (2009). *Value Driven Project Management*. International Institute for Learning
- Kerlinger, F.N. (1973). *Foundation of Behavioural Research*. New York. Holt. Rinehand and Hinston.
- Khang, D.B. & T.L. Moe (2008). *Success Criteria and Factors for International Development*
- Kothari and Kruger, S. J (2001). *Research methodology for the business and administrative sciences*. International Thompson, Johannesburg.
- Moira, (2015). *Financial capacity building for NGO Sustainability*, frontiers Program, Washington, DC.
- Projects: A Life-Cycle-Based Framework. *Project Management Journal*, 2008. 39(1):p. 72-84.
- Kenya National Bureau of Statistics (2009) Kenya Demographic and Health Survey, 2008 – 2009. PP 8 – 45
- Kenya National Bureau of Statistics, (2015) Kenya Demographic and Health Survey, PP 17 – 21
- Kim, Y. (2011). The Unveiled Power of NGOs: How NGOs influence states' foreign policy behaviors

- Kraeger, P. (2011). NGO Mission Success. E Field Office Perspective, ProQuest, UMIDissertations Publishing
- Kothari, C.R (2004). Research Methodology-Methods and Techniques. New Age International (P) Ltd
- Kloppenbotg (2009), *Business unit strategy, managerial characteristics and business unit effectiveness at strategy implementation*, Academy of Management Journal, Vol. 27 No.1, pp.25-41.
- Lock (2003) Roles? NGO-Government relations for community-based sanitation in South Asia'', Public Administration and Development, Vol. 31, No.4, PP. 282-293
- Martyn (2008). Planning for information systems integration: some key challenges*, Journal of Information Science
- Müller, R. and Turner, J.R. (2007) Matching the Project Manager's Leadership Style to Project Type. International Journal of Project Management,
- National Aids Control Council, (2015), Kenya HIV Estimates 2015 ,PP 28 – 32
- National Aids Control Council, (2016), Kenya HIV Estimates 2015, PP 1 – 6
- Naomi, T. (2014). Indicators of NGOs Success & Impacts on NGOs Role in HIV Policy Process in Kenya
- WHO (2017) Non-Governmental Organizations Coordination Board National validation survey report
- Price Water House (2014) National Public Health Leadership Institute: Evaluation of a Team- Based Approach to Developing Collaborative Public Health Leaders." American Journal of Public Health, Vol. 95, No. 4, pp. 641–44.
- Project Management Institute, (2000) Critical success factors in projects. International Journal of Managing Projects in Business, 5, pp. 757-775.
- UNAIDS, (2007). "Feasibility, acceptability, effectiveness and cost of models of integrating counselling and testing for HIV within family planning services in Kenya," *Frontiers Final Report*.

World Bank, (2008). *Sustainability reporting: A comparative study of NGOs and MNCs. Corporate Social Responsibility and Environmental*

APPENDICES

Appendix I: Letter of Transmittal

Dear Respondent,

RE: REQUEST TO RESPOND TO THE STUDY QUESTIONNAIRE

I am a student at University of Nairobi pursuing a degree of Master of Arts in Project Planning and Management. As part of this course requirement, I am expected to carry out a research on **FACTORS INFLUENCING IMPLEMENTATION OF HIV/AIDS PROJECTS MANAGED BY NGOS IN HEALTH SECTOR; A CASE OF HIV/AIDS PROJECTS IN EMBU COUNTY**. I therefore, humbly request for your assistance and cooperation in responding to the questions attached herewith. The information given will be treated with utmost confidentiality and will be used only for the purpose of this study. Looking forward for your response and cooperation

Yours faithfully,

ESTON NJAGI NYAGA

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Appendix II: Research Questionnaire

SECTION A: GENERAL INFORMATION

1) What is your Age Group?

- | | | | |
|---------------|-----|---------------|-----|
| 21 – 25 years | [] | 41 – 45 years | [] |
| 26 – 30 years | [] | 46 – 50 years | [] |
| 31 – 35 years | [] | 51 – 55 years | [] |
| 36 – 40 years | [] | Over 55 years | [] |

2) What is your highest level of education? {Please tick one (√)}

- Certificate [] Diploma []
- Bachelor Degree [] Post Graduate Degree [] other (specify) []

3) How long have you worked in this department

- 1-5 years [] 6 – 10Years []
- 10 – 15Years [] Above 16Years []

4) Gender.....

SECTION B: IMPLEMENTATION OF HIV/AIDS PROJECT

5) Kindly indicate your level of agreement to the statement relating to implementation of HIV/AIDS project in your NGO. Use a scale of 1-5, where 1- strongly disagree, 2- disagree, 3- neutral, 4- agree, 5- strongly agree

Statements	1	2	3	4	5
Projects completed on time are an indicator of project implementations					
Projects delivered within budget are an indicator of project implementation					
Projects delivered to funders satisfaction are an indicator of project implementation					
Satisfied stakeholders are an indicator of project implementation					

SECTION C: FUNDING

6). Does your organization have adequate funding for its HIV/AIDS projects?

Yes [] No

7) What are the sources of funding for your projects?

Thro’ Donors [] Thro’ Fundraising [] Thro’ Government [] other (please specify).....

8) Indicate your level of agreement to the statement below relating to adequate funding and its influence on successful project completion in your NGO. Use a scale of 1-5, where 1-strongly disagree, 2-disagree, 3-neutral, 4- agree, 5- strongly agree.

Statement	1	2	3	4	5
Funds allocated to a project influence implementation of HIV/AIDS related projects					
Signed/ committed donor contracts influence implementation of HIV/AIDS related projects					
Number of donors and partners influence the implementation of HIV/AIDS related projects					

9) In your own opinion, indicate the extent to which adequate funding influences the implementation of HIV/AIDS projects?

To a very great extent [] To a great extent [] To a moderate extent [] To a low extent [] To a very low extent []

SECTION D: STAKEHOLDER INVOLVEMENT

10) Indicate your level of agreement to the statement below relating to stakeholder’s involvement and its influence implementation of HIV/AIDS projects. Use a scale of 1-5, where 1-strongly disagree, 2-disagree, 3- neutral, 4- agree, 5- strongly agree.

Statement	1	2	3	4	5
Stakeholder analysis influences implementation of HIV/AIDS projects					

Stakeholder meetings influence implementation of HIV/AIDS					
Stakeholder involvement in policy decisions influences implementation of HIV/AIDS projects					

11) Indicate the extent to which stakeholder involvement influences the implementation of HIV/AIDS projects?

- To a very great extent To a great extent
 To a moderate extent To a low extent
 To a very low extent

SECTION E: PLANNING

12) Does your organization plan for its projects?

- Yes No

13) Kindly indicate your level of agreement to the statement relating to effective planning and its influence on implementation of HIV/AIDS projects. Use a scale of 1-5, where 1-strongly disagree, 2-disagree, 3- neutral, 4- agree, 5- strongly agree.

Statement	1	2	3	4	5
Work breakdown structure influences of HIV/AIDS projects					
The annual plan/ strategic plan influences the implementation of HIV/AIDS projects					
Does resource allocation influence the implementation of HIV/AIDS projects					

14) Indicate the extent to which effective planning of projects influences the implementation of HIV/AIDS projects?

- To a very great extent To a great extent To a moderate extent
 To a low extent To a very low extent

15) In your own opinion, what can you say on the role of NGO on implementation of projects

16. What do you think should be done to improve HIV/AIDS PROJECTS?
