PERFORMANCE OF ADMINISTRATORS IN IMPLEMENTING HUMAN IMMUNE DEFICIENCY VIRUS DONOR FUNDED PROJECTS IN PUBLIC INSTITUTIONS: A CASE OF UNIVERSITY OF NAIROBI; KENYA

BY

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DECLARATION

This research project report is my original work and has not been submitted previously in its entirety or in part at any other university or college for any academic award.

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L50/72265/2011

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

Signed …………………………... ………………………………..

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DEDICATION

This project report is dedicated to my parents Mr. Michael Njuguna and the late Mrs. Susan Njuguna. Dad you have taught me to believe in myself and soldier on even when circumstances seem tough. Mama all the virtues you instilled in me continue to bear fruits every moment of my life. All my brothers and sisters: Rosemary, James, Catherine, Jane, Ann, Lucy, Sammy and John. You are a fountain of inspiration. Thank you for believing in me.

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ABBREVIATIONS AND ACRONYMS

AIDS	Acquired Immuno Deficiency Syndrome
AMC	Academic Medical Centre
AMPATH	Academic Model Providing Access to Health Care
ART	Antiretroviral Therapy
CDC	Centres of Disease Control & Prevention
CHIVRI	Centre for HIV/AIDS Prevention and Research
CHS	College of Health Sciences
DACC	District AIDS Control Council
FBO	Faith Based Organisation
FDA	Food and Drug Administration
HIV	Human Immune-Deficiency Virus
HR	Human Resource
HRSA	Health Resources and Services Administration
ICAP	International Centre for AIDS Care and Treatment Programs
JHPIEGO	John Hopkin's Program for International Education in Gynaecology and Obstetrics
KNASP	Kenya National AIDS Strategic Plan
KNH	Kenyatta National Hospital
NACC	National AIDS Control Council
NASCOP	National AIDS and Sexually Transmitted Disease Control Programme
NGO	Non-Governmental Organisations

NIH	National Institutes of Health
PACC	Provincial AIDS Control Council
PMH	Pumwani Maternity Hospital
PEPFAR	President's Emergency Plan for AIDS Relief
PLWHA	People Living with HIV/AIDS
PMTCT	Transmission of Mother-to-Child HIV Transmission
SAMHSA	Substance Abuse and Mental Health Services Administration
STD	Sexually Transmitted Diseases
UK	United Kingdom
UNAIDS	The Joint United Nations Programme on HIV/AIDS
UNITID	University of Nairobi Institute of Tropical & Infectious Diseases
UMSOM	University of Maryland School of Medicine
UoN	University of Nairobi
USA	United States of America
USAID	United States Agency for International Development
WHO	World Health Organisation

ABSTRACT

Partnerships and collaborations between international and local academic medical centres as well as donor funding agencies are being witnessed all over the world. Out of these partnerships and collaborations, projects of limited size with a focus on general internal medicine are born, which later evolve into some of the largest and most comprehensive HIV/AIDS control systems in sub-Saharan Africa. These centres are charged with the implementation of various aspects of HIV/AIDS under the steering of project administrators. It is therefore important for the administrators to aim at delivering a project to completion at the right stipulated time, with the right quality and optimizing on costs. The aim of this study was to investigate performance of administrators implementing HIV donor funded projects with reference to University of Nairobi. The study endeavoured to examine how managerial skills, systems and processes, role conflict and organisational culture influence effective performance implementation of HIV donor funded projects at the University of Nairobi. To collect necessary data for the study, the researcher used primary data. A target population of 50 respondents was used in a census due to the small population size. Data was collected using survey method, which involved use of structured and unstructured questionnaires. The completed questionnaires were analysed using SPSS and findings were presented using tables' summaries according to the common themes. Multiple regression analysis was done to show the relationship between dependent and independent variables. The study revealed that there is a positive and significant relationship between managerial skills, systems and processes, role conflict and organisational culture and performance in project implementation. The study revealed that most administrators were trained on project management and had supervised several people on project implementation. Systems and processes had a large influence on performance in project implementation and were generally poor in the last five years. The study established that most administrators were implementing more than one project and were also engaged in other activities, which may have hindered effective project implementation as a result of multiple roles played. Organisational culture which forms the organisational values and belief system also affects performance in project implementation, where bureaucracy affects to a great extent. The study concludes that managerial skills, systems and processes, role conflict and organisational culture are significant in explaining the variations in performance in project implementation. The study recommends that organizations need to cultivate a strong relationship between the employer and employees, as well as human resource practices that will help deal with an organization's culture. Executives and managers need to be trained on how to manage organizational culture and how to influence or change it to obtain the best achievement in organizational ownership and performance. The study further recommends that there is need for public universities to incorporate project management education into their undergraduate syllabus. This will facilitate having professional managers who will oversee project implementation and success upon completion. It is also recommended that project managers be taught and trained on role conflict management, to help cope with all the multiple roles engaged in a day.

CHAPTER ONE: INTRODUCTION

1.1 Background of Study

Organizations need highly performing individuals in order to meet their goals, to deliver the products and services they specialize in, and finally to achieve competitive advantage. Performance is also important for the individual. Accomplishing tasks and performing at a high level can be a source of satisfaction, with feelings of mastery and pride. Low performance and not achieving the goals might be experienced as dissatisfying or even as a personal failure. If performance is recognized by others within the organization it is often rewarded by financial and other benefits (Sonnentag & Frese 2001). Performance can be regarded as behaviour, the way in which the organizations, teams, and individuals get work done (Qureshi et al 2010). According to him, performance means both behaviour and outcome; behaviours emit from the performer and convert performance from thought to act. Thus, performance is not defined by the action itself but by judgemental and evaluative processes.   Additionally, only actions which can be measured are considered to constitute performance (Campbell et al 1993). The outcome aspects of performance also depend on factors other than the individual's behaviour.

Performance is a multi-dimensional concept where task performance refers to an individual's proficiency with which he or she performs activities which contribute to the organization's 'technical core'. Contextual performance refers to activities which do not contribute to the technical core but which support the organizational, social, and psychological environment in which organizational goals are pursued (Sonnentag & Frese 2001).Performance is a complex concept that has been explored in numerous studies (Fwaya et al 2012). It has been conceptualized in two fundamental ways, by the drivers of performance and results that are the performance outcomes (Neely, 1998). Researchers have classified the drivers of performance according to internal and external factors and the impact they have on managerial decision-making (Fwaya et al 2012). Understanding the internal and external factors and how they affect an organisation's operations is central to effective performance. The external environment in which an organization operates is often referred to its market that is habitually unpredictable and uncontrollable. Projects do not operate in isolation of these environments, leading to a positive or negative impact on project performance.

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As a result of the deadly Human Immune-Deficiency Virus (HIV)/Acquired Immune Deficiency Syndrome (AIDS) menace in the world, the United States Government in 2003 committed US$15 billion for use over a period of five years to combat HIV/AIDS in developing countries (Denny & Emanuel, 2008) Kenya included. Consequently several projects were funded to deal with different aspects of HIV/AIDS. The Human Immune-Deficiency (HIV) is very dynamic and knows no age, gender, religion, nationality, social status, or advanced technology. The virus affects everyone in one way or the other and is proving to be a formidable challenge besides being one of the greatest trials in the history of humanity. The global HIV/AIDS epidemics are influenced by many factors namely biological, behavioural and cultural. Behavioural factors comprises of sex acts, sexual mixing, needle sharing, lack of condom use, as well as substance use among other factors. Biological factors include viral load on anatomical compartments, disease and treatment status, sexually transmitted infections and other co infections. Cultural factors contributing to HIV/AIDS prevalence include stigma and discrimination, criminalization, poverty, gender inequality, homelessness, migration, imprisonment and lack of education. There is no one known cure for HIV considering the multiple causal channels of disease, its prevention has become a challenge, as it requires focus on all issues hence a call for use of different interventions to prevent its prevalence, transmission and treatment (Aldridge et al, 2009). However, despite these combined strategies, still too many people are acquiring HIV infection, are getting sick and dying from HIV related complications (UNAIDS 2012).

Globally, according to the latest statistics on the world epidemic of HIV/AIDS by a Joint United Nations Programme on HIV/AIDS (UNAIDS 2012), 34 million people are living with HIV. 30.7 million (90%) being adults, 14 million (41.18%) men, 16.7 million (49.12%) women, and 3.3 million (9.71%) children. So far, 1.7 million people have died of HIV in the world 230,000 being children under the age of 15 years.

The burden of the epidemic continues to vary considerably between regions and countries. Experts have detected alarming increase in HIV prevalence in Eastern Europe and Central Asia, as they remain some of the most affected regions with 1.4 million living with HIV, an adult prevalence of 0.8%. Followed closely by North America 1.4 million a prevalence of 0.6% and lastly Latin America with the same number of people living with HIV/AIDS (PLWHA) at a prevalence of 0.4% and approximately 68% on treatment (UNAIDS 2012). Nevertheless, Sub Saharan Africa continues to bear a disproportionate share of the global

HIV burden. This has been accelerated by extreme poverty, conflict, weak institutional & physical infrastructure, deficient health care system and education. It accounts for nearly 1 in every 20 adults (4.9%) of 23.5 million (69%), people living with HIV including (91%) of the world's HIV positive children, among who 58% are receiving treatment (UNAIDS 2012). In 2011, an estimated 1.8 million people in the region became newly infected and estimated 1.2 million adults and children died of AIDS, accounting for (71%) of the world's AIDS deaths. Despite the high number of people dying from AIDS-related causes in sub-Saharan Africa, there is a notable decline of about thirty two per cent from 2005 to 2011, this still accounted for 70% of all the people who died from AIDS in 2011 (UNAIDS 2012). From an estimated 10 million people in need of treatment in 2010, only 5 million of the world's population received it.

It is estimated that 5.6 million people were living with HIV and AIDS in South Africa in 2011, the highest number of people in any other country. In the same year, 270,190 South Africans died of AIDS-related causes. Although this number reflects the huge amount of lives that the country has lost to AIDS over the past three decades, it is 100,000 fewer deaths than in 2001, demonstrating the many lives that have been saved through a massive scale-up of treatment in the last few years. South Africa has a prevalence rate of (17.3%), 460,000 children between the age of 0 – 4 years are positive and 2,100,000 aged 0 – 17 years are orphaned by HIV (UNAIDS 2012).

Nigeria is similarly suffering from the HIV pandemic where 3.4 million people are infected and has a prevalence rate of (3.7%) of adults aged between 15 – 49 years. There are 440,000 children between 0 – 14 years infected with HIV and 2,200,000 orphans aged between 0 – 17 years. In 2011, 210,000 deaths occurred due to HIV according to World Health Organisation (UNAIDS 2012).

Although Uganda has managed to fight the HIV scourge and witnessed decline in deaths, its prevalence rate is still high (7.3%) compared to Tanzania (5.7%) and Kenya at (6.3%). In Uganda, 1,400,000 people are living with HIV, 1,200,000 being children, 670,000 women and 190,000 children aged between 0 – 14 years. UNAIDS, (2012) states that 62,000 deaths resulted from HIV related complication and orphaned children were 1,100,000.

In Kenya, the scene is not any better after diagnosis of the first HIV/AIDS case in 1984 from a victim who had arrived from Rwanda. Kenyans immediate reaction was that HIV/AIDS was a foreign disease because the first patient was non-Kenyan and again the disease was

discovered in America within the homosexuals (Wambugu, 2008). Since this first diagnosis, HIV has continued to have a devastating impact on all sectors of the society. Initially there was generally denial of existence of the epidemic in Kenya and some African countries, where most locals considered HIV to be other people's problem (Prince, 2009). This is because HIV is primarily spread through heterosexual sex in Kenya, a topic that most people shy away from discussing, hence most of the Kenyan communities attributed it to a curse and no one really wanted to converse anything about it. However, declaration of HIV/AIDS as a national disaster was initiated by the World Bank who had an offer of US$50 million AID loan to any African country that was willing to deal with HIV/AIDS (Wambugu, 2008). Even though HIV/AIDS had been left to charitable organisations and external governments for funding, the Kenyan government showed its political will when it declared HIV/AIDS as a national disaster in 1999.

In the same year, the government went ahead to establish the National AIDS Control Council (NACC) under section 3 of the State Corporations Act Cap 446 with a vision of "An HIV free society in Kenya" (NACC, 2009). In the Kenya National AIDS Strategic Plan chapter III (KNASP), the council emphasis that by 2013/14, four impact results will be achieved: a reduction by at least 50% of new infections, 25% reduction of AIDS-related mortality, reduction in HIV-related morbidity and reduced socio-economic impact of HIV/AIDS at household and community level (NACC, 2009). The National AIDS and Sexually Transmitted Disease Control Programme (NASCOP) was formed in 1987to spearhead the Ministry of Health's interventions on the fight against HIV/AID and is complemented by NACC (NACC & NASCOP, 2012).

In addition, the government has had a spirited effort and intensified its HIV/AIDS awareness campaigns which have so far been launched through the donors, non-governmental organisations (NGOs), civil society, church research and training institutions. Some of the prevention measures employed include: providing education for the high risk behaviour, distribution and promoting condom use, provision of voluntary counselling and testing, male circumcision, diagnosing and testing of sexually transmitted diseases (STDs), blood screening and prevention of mother to child HIV transmission (PMTCT). According to (UNAIDS, 2012) 1,600,000 million people are living with HIV, 1,400,000 being adults aged 15 years and above. Of this, 800,000 are women above 15 years and 220,000 children between 0 – 14 years. So far, the HIV epidemic has claimed more than 62,000 lives and made 1,100,000 children orphans aged 0 – 17 years while the prevalence rate is at (6.2%).

NASCOP & NACC (2012) states that cumulatively, the country has more than 530,000 people on anti-retroviral therapy (ART).

1.1.1 University of Nairobi

The inception of University of Nairobi (UoN) is traced back to 1956, with the establishment of the Royal Technical College which admitted its first lot of A-level graduates for technical courses in April the same year. The Royal Technical College was transformed into the second University College in East Africa on 25th June, 1961 under the name Royal College Nairobi and was admitted into special relations with the University of London whereupon it immediately began preparing students in the faculties of Arts, Science and Engineering for award degrees of the University of London. Meanwhile, students in other faculties such as the Faculty of Special Professional Studies (later renamed Faculty of Commerce) and Faculty of Architecture continued to offer diplomas for qualifications of professional bodies/institutions.

On 20th May 1964, the Royal College Nairobi was renamed University College Nairobi as a constituent college of inter territorial, Federal University of East Africa, and henceforth the enrolled students were to study for degrees of the University of East Africa and not London as was the case before. In 1970, the University College Nairobi transformed into the first national university in Kenya and was renamed the UoN. The College of Health Sciences (CHS) can be traced back to 3rd July 1967 when the Faculty of Medicine was created and later established on 7th March 1968, graduating its first doctors in 1972. Although the faculty continued to offer courses in Medicine, Dentistry and Pharmacy for some time, it was not until 1985 that the CHS was created, initially consisting of the faculty of medicine only. However, in July 1995 the faculties of Dental Sciences and Faculty of Pharmacy were created. Later the Institute of Tropical & Infectious Diseases (UNITID) was established in 2003, the School of Nursing Sciences (2005) and the Centre for HIV/AIDS Prevention and Research (CHIVRI) in (2006).

This college is home to almost all the HIV donor funded projects whose existence is through competitive grant applications from the various departments that it houses. Majority of these projects continue to receive funds from the United States President's Emergency Plan for AIDS Relief (PEPFAR/Emergency Plan) using its several implementing agencies: Centres for Disease Control and Prevention (CDC); National Institutes of Health (NIH); Health Resources and Services Administration (HRSA); Food and Drug Administration (FDA); and

Substance Abuse and Mental Health Services Administration (SAMHSA) among others according to the Office of U.S. Global AIDS Coordinator and the Bureau of Public Affairs.

1.1.2 HIV donor funded projects through University of Nairobi

College of Health Sciences houses most of the HIV donor funded projects domiciled in different faculties, within the University's functional departments (see appendix III). Together with other implementing partners, funds are disbursed to the projects through the University to deal with all the various aspects of HIV prevention, care, treatment, capacity building, quality improvement and infrastructure development projects. The University implements projects in many different parts of the country – Nairobi, Kiambu, Kirinyaga, Nakuru, Kisumu, Mombasa, Machakos and Bondo counties.

1.2 Problem Description

This section is divided into two parts, first dealing with the background of the problem and statement of the problem.

1.2.1 Background of the problem

Transparency and accountability concerns in NGOs have increased over the past two decades due in part to a series of highly publicised scandals that have eroded public confidence in NGOs coupled with a rapid growth in NGOs around the world (Gibelman & Gelman, 2001). As a result donors have restructured their funding strategies, preferring to work with the government and its agencies.

Each year, billions of dollars are donated to funding agencies and (NGOs), to implement various aspects of health services, where implementation stage involves the actual "work" of the project, which has a life cycle (Adams and Barndt 1983; King and Cleland 1983). UoN CHS is a recipient of these funds, where all the donor funded projects are born from submission of solicited competitive applications to funding agencies by the lectures and through partnerships and collaborations. Despite this huge funding, partnerships and collaborations formation at UoN, there is no follow up done to assess performance of administrators implementing HIV donor funded projects in public institutions. However, a lot of research has been conducted addressing the factors that contribute to project implementation failure (Oladipo 2008, Oleribe 2009 and Kyriakopoulos 2011). Previous research has mainly focused on what causes delays in project implementation and cost overruns. Nevertheless, there is need to be proactive in the examination of administrators performance in project implementation. UoN projects have in the past operated without

paying particular attention to performance of the people who are responsible for the implementation of these projects.

Researchers in the field of HIV implementation performance in Kenya have focused on HIV/AIDS community health workers performance (Onyango, 2009), while others have focused on HIV/AIDS curriculum implementation in secondary schools and challenges facing administrators implementing them (Wambugu, 2008; and Mango, 2009). Most of these studies were carried out in different contexts, using different populations and in diverse years each presenting varied performance experiences and challenges encountered. It is upon this background that this study sought to establish administrators' performance in implementing HIV donor funded projects in public institutions.

1.2.2 Statement of problem

This research sought to establish the performance of administrators in project implementation and show the extent to which performance is dependent on management capacity to work within time, budget and specifications. To the best knowledge of the researcher, none of the studies so far have focused on performance of administrators implementing donor funded HIV projects in public institutions in Kenya, a gap that this study aimed to fill.

1.3 Purpose of the study

The purpose of this study was to establish how administrators perform when implementing HIV donor funded projects through public institutions and UoN specifically which is predominately a higher institute of learning.

1.4 Objectives of the study

The general objective of the study was to investigate the performance of administrators in implementing HIV donor funded projects through public institutions.

The specific objectives of the study were to:

1. Assess the extent to which project managerial skills affect administrators performance in implementing donor funded HIV projects

2. Determine the extent to which systems and processes affect administrators performance in implementing donor funded HIV projects

3. Establish the effect of role conflict on administrators performance in implementing donor funded HIV projects

4. Determine the extent to which organisational culture affects administrators performance in implementing donor funded HIV projects

1.5 Research Questions

This study sought to answer the following research questions:

1. To what extent do project managerial skills affect administrators' performance in implementing donor funded HIV projects through public institutions?
2. How do systems and processes affect administrators' performance in implementing donor funded HIV projects through public institutions?
3. To what extent if any does role conflict affect administrators' performance in implementing donor funded HIV projects through public institutions?
4. To what extent does organisational culture affect administrators' performance in implementing donor funded HIV projects through public institutions?

1.6 Significance of the study

This study was of utmost importance as it aimed to address one of the vital needs - health according to Maslow's hierarchy that is safety in the second level of human needs. Without good health services a country's development is at stake since a population that is unwell cannot work due to the burden of disease.

It was hoped that this study would be important to the management and employees of UoN, by ensuring they have a deeper understanding of the fact that projects are time bound, require use of resources and must have a definite scope. By presenting how managerial skills are important in project implementation, how systems and processes can positively or negatively affect performance in project implementation, the extent to which role conflict among administrators would influence their performance and in what manner organisational culture propels or derails project implementation. From the study UoN would be in a position to employee the right people with the right managerial skills, improve on its systems and processes to facilitate efficiency, manage role conflict and change or cope with its cultural values to improve on organisational commitment and ownership.

From the study it was hoped that all donor agencies funding UoN, partners and other collaborators would extend their time lines by a few weeks bearing in mind that UoN is a public institution that is prone to bureaucratic structures and other government rules and regulations.

It was also expected that the study would help other researchers conducting similar research in performance of administrators implementing HIV donor funded projects to better understand the causal chain and what part of the chain is weak.

1.7 Limitations of the study

The research involved administrators working at the UoN's CHS who are often busy with multiple roles and may not be available for a meeting to explain the study. The researcher will call and email explaining about the study and drop and pick questionnaires later.

Financial constrain to facilitate travelling, printing of the questionnaires, telephone calls and emails is anticipated. To minimize this, the researcher ensured that early morning meetings were scheduled with different respondents in a day to reduce the number of visits.

Exogenous factors like lectures strike or introduction of the new university charter that basically paralyses UoN activities may interfere with the data collection time span. However, the researcher dispatched all the questionnaires in good time and agreed with all respondents when to collect a completed questionnaire.

The researcher anticipated that some respondents would not be willing to give information of UoN administrators' performance freely for fear of being exposed to the Management. The researcher tried to delimit this by self-introduction and explaining the purpose of the study.

1.8 Delimitations of the study

The researcher appreciated that there were other administrators in public institutions implementing HIV/AIDS projects. Although the study was confined to administrators in UoN, CHS the findings may be appropriately applicable for generalisation in other public universities and institutions, which had entered into academic and donor partnerships.

1.9 Basic Assumptions of the study

The basic assumption is that respondents were knowledgeable about their experiences and gave accurate, truthful and honest responses to the items in the questionnaire. It was also assumed that more donors and collaborations were entered to fund projects at UoN, government policies will not change and that UoN's management will not change their policies from undertaking donor projects.

1.10 Definition of significant terms used in the study

Administrator   –   someone who is generally in charge of running the operations of a project

Funding   –   acquisition of money for HIV/AIDS purposes or activities

Implementation   –   actual carrying out of an activity, function, policy, coordination of activities among individuals or groups and control of operations so that people do what they are supposed to do and attempts to improve management of projects evaluating its results

Management   -   the act & skill of dealing with something successfully

Performance   –   refers to timely and consistent achievement of results as per the agreed framework of planned goals, standards and competence requirements of an administrator

Prevalence   –   refers to a measure of the total burden of disease including new & old infections

Project   –   a temporary engagement that has a definite start and end date. It must be pursued within a given time, budget and specifications

Stakeholders   –   a group of persons or groups who have some vested interest in HIV/AIDS

Project administrators -   these are people charged with implementing projects

Managerial skills   -   skills necessary to steer and implement a success project to completion

Systems and processes-   activities that work together to benefit an organisation

Role conflict   -   outcome of conflicts from a number of roles performed by an individual

Organisational culture -   learned beliefs, values, and attitudes in an organisation

1.11 Organisation of the study

The proposal was organised into three chapters.

Chapter one contained the introduction including the background of the study, statement of the problem, purpose of study, objectives of the study, research questions of the study,

assumptions of the study, limitations of the study, delimitations of the study and definition of significance terms.

Chapter two represented the relevant literature review of the study on performance of administrators in implementing HIV donor funded projects through public institutions and a conceptual framework.

Chapter three consisted of a detailed description of the research methodology that will be used in the study. This included design, target population, research instruments, instrument validity and reliability, data collection procedures, data analysis techniques and ethical issues.

Chapter four has data analysis, presentation and interpretation of findings. It specifically presents the analysis and interpretation of findings of the study in line with the objectives as outlined in chapter one. It also presents a regression analysis which explains the relationship between the dependent and independent variables.

Chapter five presents summary of findings, discussion, conclusion and recommendations. Each of these sections is arranged as per research objectives. The chapter also presents areas for further studies.

CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

This chapter dealt with the literature review of performance, projects and their life cycle, global HIV implementation, economic impact of HIV, and HIV implementation in Kenya. The themes used for literature on performance of administrators in implementing HIV donor funded projects are managerial skills, systems and process, role conflict and organisational culture.

2.2 Theoretical review of performance

Performance is a multi-dimensional concept. On the most basic level, Borman and Motowidlo (1997) distinguish between task and contextual performance. Task performance refers to an individual's proficiency with which he or she performs activities which contribute to the organization's 'technical core'. Contextual performance refers to activities which do not contribute to the technical core but which support the organizational, social, and psychological environment in which organizational goals are pursued. Contextual performance includes not only behaviours but also making suggestions about how to improve work procedures. Three basic assumptions are associated with the differentiation between task and contextual performance (Borman & Motowidlo, 1997): Activities relevant for task performance vary between jobs whereas contextual performance activities are relatively similar across jobs, task performance is related to ability, whereas contextual performance is related to personality and motivation, task performance is more prescribed and constitutes in-role behaviour, whereas contextual performance is more discretionary and extra-role.

Task performance in itself is multi-dimensional. For example, among the eight performance components proposed by Campbell (1990), there are five factors which refer to task performance: job-specific task proficiency, non-job-specific task proficiency, written and oral communication proficiency, supervision in the case of a supervisory or leadership position—and partly management/administration. Each of these factors comprises a number of sub factors which may vary between different jobs. For example, the management/administration factor comprises sub dimensions such as planning and organizing, guiding, directing, and motivating subordinates and providing feedback, training, coaching, and developing subordinates, communication effectively and keeping others informed (Borman & Motowidlo, 1997). In recent years, researchers paid attention to specific aspects of task performance.

Researchers have developed a number of contextual performance concepts. On a very general level, one can differentiate between two types of contextual performance: performance as dynamic concept behaviours which aim primarily at the smooth functioning of the organization as it is at the present moment, and proactive behaviours which aim at changing and improving work procedures and organizational processes. The 'stabilizing' contextual performance behaviours include organizational citizenship behaviour with its five components altruism, conscientiousness, civic virtue, courtesy, and sportsmanship (Organ, 1988), some aspects of organizational spontaneity include helping co-workers, protecting the organization, and of pro-social organizational behaviour (Brief & Motowidlo, 1986). Thus, contextual performance is not a single set of uniform behaviours, but is in itself a multidimensional concept.

2.2.1 Projects and their Life Cycle

According to Project Management Institute (PMI 2008), a project is "a temporary endeavour undertaken to create a unique product, service or result". Biafore (2011) further says that a project is a unique job with a specific goal, clear-cut starting and ending dates, and in most cases a budget. For more than 50 years, project success has been defined by the criteria of time, budget and deliverables (Irungu, 2009). Sanghera (2010) says that Project management is the usage of knowledge, skills, and tools to manage a project from start to finish with the goal of meeting the project requirements. It involves using the appropriate processes. Additionally, (Patanakul et al, 2010) defines project management as the application of knowledge, skills, tools and techniques to project activities in order to meet stakeholders' needs and expectations from a project. Irungu (2009) argues that the discipline of project management can be described in terms of its components and processes conveniently defined by nine knowledge areas; integration, scope, communication, time, cost, procurement, quality, human resource management and risk.

In all circumstances, projects differ from operations, which tend to be continuous and repetitive while projects last for a specific period.   It is for this reason that provisional project teams are set up to execute plans or to deliver the project (Biafore, 2011). Horine (2009) says executing or implementing a project is the most important and if a plan is not executed, it becomes useless and a waste of time. Additionally Horine goes on to say that implementing means coordinating people and resources to make things happen. By implementing the plan, activities are conducted, performed and inputs compared to output. An administrator's performance is crucial in any project implementation.

Projects have the following characteristics: They are temporary in nature - that is, they have a definite start and a definite end (if a project is long term and never ends, it is likely a program or an on-going operation).As mentioned, projects create a unique product, service, or result (even if the project has been done before, there is something unique about it - location, team members or materials). They have clearly defined goals and objectives (if it is open ended or changes over time, it is likely a program or an on-going operation). The end of the project is reached when its approved objectives have been achieved.

Keyes (2009) say projects are similar to living entities: they are conceived, they live, and then they die. This is why the term life cycle is used. PMI recognizes and endorses five basic process groups (sometimes referred to as domains). These five process groups are performed in the same sequence on each project. They are independent of application areas or industry focus. Angel (2010), further supports this by stating that process groups serve as independent domains (or groups) of processes that are tied to a particular phase of a project. They are often interactive in nature, meaning they build on one another. Each process group has associated project management processes that are linked by respective inputs and outputs; whereby, the output of one process often becomes the input to the next process.

According to Horine (2009), process groups are: Initiating - authorizing the project or phase also referred to as preliminary planning or kicking off. Planning - defining and refining objectives of the project and selecting the best course of developing the plan or action to attain those objectives. Executing - coordinating the people and resources to making it happen, implement the plan, getting it done or coordinating. Controlling - ensuring project objectives are met by tracking progress, monitoring and measuring progress regularly, keeping on course to identify variances from the plan so that corrective actions can be taken. Closing - formalizing acceptance of project or phase (client acceptance) and bringing to an orderly end, transition or closeout.

2.2.2 Global HIV/AIDS Implementation

Implementation is the most important stage in the project life cycle, where the actual "work" of the project is carried out (Adams and Barndt 1983; King and Cleland 1983). Different donor agencies fund different aspects of HIV globally. The Enhanced Comprehensive HIV Prevention Planning (ECHPP) Project is a 3-year demonstration project funded by CDC's Division of HIV/AIDS Prevention (DHAP) for 12 municipalities with the highest number (44%) of people living with AIDS in the United States. As part of the response to the

National HIV/AIDS Strategy (NHAS), the ECHPP project supports the 12 Cities to implement its goals of reducing new HIV infections, link people with HIV to care and treatment and improve health outcomes, reduce HIV-related health disparities, and achieve a more coordinated national response to the HIV epidemic in the United States according to the Office of U.S. Global AIDS Coordinator and the Bureau of Public Affairs.

China continues to suffer from the HIV/AIDS scourge despite its prevalence remaining relatively low. According to (Wu et al, 2011), until 2003, China's HIV/AIDS programmes were mainly supported by international donors. Programmes included bilateral support from countries such as Australia, the United Kingdom of Great Britain and Northern Ireland and the United States of America various United Nations agencies, private foundations and multilateral agencies, especially the Global Fund to fight AIDS Tuberculosis and Malaria (Global Fund), which has contributed more than US$ 400 million, making it the single largest donor for HIV/AIDS-related programmes in China. These bilateral, multilateral and private partnerships have had a major impact on the direction and success of HIV/AIDS response in China leading to the launch of China Comprehensive AIDS Response (China CARES) programme to improve treatment and care for people with HIV/AIDS. The Chinese government has succeeded in integration of all international and domestic HIV/AIDS projects containing relevant components to strengthen these programmes during implementation.

Implementation of Programs for Prevention, Care, and Treatment of HIV/AIDS in Nigeria is currently on going where Pathfinder International in collaboration with CDC started its last year of a five-year grant to establish, strengthen, and scale up prevention of mother to child transmission (PMTCT) and HIV testing and counselling at primary health centres and selected general hospitals in the predominantly rural and underserved communities in Edo and Kano states. Interventions are aimed at reducing the number of infants infected with HIV, reducing the impact of HIV on pregnant women, ensuring effective linkages between PMTCT and HIV care and treatment programs, and building the capacity of facilities to expand and enhance PMTCT and HIV testing and counselling services. In the past year, the project expanded to two additional sites in Edo state and four in Kano, bringing the total number of project sites to twenty. Since the start of project implementation in 2009, more than 92,000 individuals, including at least 38,000 pregnant women, have been reached with HIV testing and counselling services and have received their results. Present focus and emphasis is on implementing sustainability plans at the community and local government levels to carry on activities after the funding period.

According to (Barron et al, 2012) South Africa is implementing a national action framework for PMTCT that covers the 5 years from 2012 to 2016. The framework was tailored to individual districts and provinces and aims to provide a clear understanding of the operational issues that influence the continuous improvement of PMTCT programmes. In addition, there are on-going efforts to increase the ability of local health-care workers to collect high-quality data and use those data to improve the PMTCT programme. If the national action framework for PMTCT is implemented in tandem with the envisaged strengthening of the health-care system, there is a high probability that, within the next 5 years, South Africa will be on the path to achieving the global goal of eliminating mother-to-child HIV transmission by 2015.

Paediatric AIDS Treatment for Africa (PATA) in conjunction with several funding agencies strives to enhance the quality of health care, holistic treatment and comprehensive support for HIV/AIDS children, their families and for communities throughout Africa. Quality care and treatment has been difficult to attain in most countries in sub-Saharan Africa due to the high burden of HIV, health worker shortages, fragmented rather than integrated, holistic service delivery, centralised programmes and weak procurement and supply systems. This has necessitated that PATA focus on implementing innovative best practices to ensure that quality care is delivered in a sustainable and holistic manner to children living with HIV/AIDS.

In Uganda Makerere University Walter Reed Project (MUWRP) is a non-profit partnership between Makerere University and United States of America Military HIV Research Programs (MHRP). MHRP has been conducting HIV research in Uganda since 1998 and expanded its portfolio to include prevention, care and treatment activities in 2005 under the President's Emergency Plan for AIDS Relief (PEPFAR). Implementation has focused on building infrastructure and increasing the capacity of local public and private partners, MUWRP ensures quality services for communities participating in vaccine research and HIV cohort studies.

MHRP's Walter Reed Program–Tanzania (WRP-T) works in collaboration with the Ministry of Health and Social Welfare to advance HIV research, prevention and care in Tanzania. Research is conducted collaboratively with the National Institute for Medical Research, the University of Munich (LMU), the Mbeya Regional Medical Office, and the Mbeya Referral Hospital. Together, these institutions comprise the Mbeya Medical Research Program

(MMRP). MHRP supports both civilian and military counterpart organizations in Tanzania to fight HIV and has recently expanded research efforts on other infectious diseases.

2.2.3 Economic Impact of HIV/AIDS in Kenya

HIV/AIDS has been one of the leading causes of high mortality and morbidity in Kenya. As the survey shows, the affected population is the very productive in the society 15-49 years leading to a lot of concerns about economic impact to the society. HIV/AIDS causes massive premature adult mortality, thereby destroying existing human capital and reducing the labor force on a large scale. The transmission of human capital to future generations is weakened, as children are left orphaned and surviving adults are correspondingly burdened. HIV/AIDS has devastating impact on health and demographic indicators such as life expectancy at birth, healthcare assistance, age and sex distribution, economic indicators like income, work force, and economic growth, education and knowledge acquisition and other indicators like governance, gender inequality and human rights. Consequently, per capita income decreases and communities can less afford to raise and educate children since they live on less than US$2 a day (World Bank, 2010). The level of fertility falls in the immediate aftermath of the outbreak leading to decline in population growth. In a more detailed HIV/AIDS impact on Kenyan economy, the disease continues to increase expenditure towards HIV/AIDS management and reduction in revenues (Onome and Roberts, 2010). There is significant increment on healthcare costs, funeral arrangement, training and recruitment of new employees for replacement. Besides absenteeism from work due to illness or time spent on funerals and training for the replacements, there is also a decrease in revenues (Wamai, 2009).The country ranks 177[th]in per capita gross national income.

2.2.4 HIV/AIDS Implementation Programs in Kenya

In Kenya NASCOP, is an AIDS control Unit under the Ministry of Health (MoH), mainly involved with technical co-ordination of HIV/AIDS programs in the country. NASCOP is the most active unit involved in the implementation of the National HIV/AIDS Strategic Plan in Kenya (NASCOP, 2009). The other collaborators are National Aids Control Council (NACC) Secretariat, AIDS Control Units, Provincial AIDS Control Council (PACCs), District AIDS Control Committee (DACCs), parastatals, private sector including for profit NGO, and faith based organizations (FBO). There are over 4,700 healthcare facilities countrywide and public sector accounts for 51% of these. Public sector consists of: national referral hospitals, provincial general hospitals, district hospitals, health centres and dispensaries that are all supplied with anti-retroviral drugs. NASCOP's major duties are prevention, care and

treatment of HIV/AIDS. The Kenya National AIDS Strategic Plan (KNASP) that was launched for the 2005-2010 is the main unit through which provision of action framework for HIV/AIDS interventions in Kenya takes place. KNASP is mandated with provision of a framework under which HIV/AIDS strategies, plans and budgets are formulated, coordinated and monitored (NACC, 2009).

2.2.5 Implementation of HIV Programs in Kenya through Public Institutions

For a long time, partnerships between academic medical centre (AMCs) in North America and the developing world have been uniquely formed with capability of fulfilling the tripartite needs of care, training, and research required to address health care crises in the developing world, (Einterzet al 2008). Moreover, the institutional resources and credibility of AMCs can provide the foundation to build systems of care with long-term sustainability, even in resource-poor settings. The Academic Model Providing Access to Healthcare (AMPATH) is a partnership between Indiana University School of Medicine, United States Agency for International Development (USAID), Moi University and Moi Teaching and Referral Hospital in Eldoret, Kenya. This partnership demonstrates the power of an academic medical partnership in its response to the HIV/AIDS pandemic in sub-Saharan Africa. Through the Academic Model for the prevention and treatment of HIV/AIDS, the partnership currently has over 140,000 HIV positive patients at 60 urban and rural sites in western Kenya, with a monthly enrolment of 2,000 new HIV positive patients. The partnership has evolved from a program of limited size and a focus on general internal medicine into one of the largest and most comprehensive HIV/AIDS control systems in sub-Saharan Africa. University of Maryland School of Medicine (UMSOM) is similarly in partnership with CDC, UoN and its teaching hospital - Kenyatta National and Referral Hospital (KNH). This partnership continues to cater for various aspects of HIV prevention, care and treatment KNH, Pumwani Maternity Hospital (PMH), Kiambu and Kirinyaga counties with a cumulative total of more than 50,000 patients. In addition UoN has partnered with University of Washington and Toronto for research. The International Centre for AIDS Care and Treatment Programs (ICAP) at Columbia University's Mailman School of Public Health supports programs and research that address HIV/AIDS and related conditions and works with hundreds of thousands of individuals. ICAP currently supports HIV/AIDS prevention, care and treatment programs in collaboration with CDC and UoN in Eastern parts of the country to cater for the most at risk populations. John Hopkin's Program for International Education in Gynaecology and Obstetrics (JHPIEGO) collaborates with UoN, the government, CDC and USAID in prevention, care and treatment of HIV/AIDS.

2.3 Managerial skills in relation to performance in project implementation

Management is as old as man, having started with the hunter-gatherer communities and developed overtime to serve as the cornerstone of ancient civilizations. Primal management was generally implicit and was based on oral rather than literary traditions. Because of man's natural instincts for survival through access to basic necessities such as food, shelter and safety, there was need for cooperation, which in turn required some form of leadership. Such responsibility usually fell upon the head of the family and in the extended family unit, on the oldest member who was deemed wisest. As families grew into tribes, and tribes evolved into nations, a more complex form of leadership was required. He goes on to say this formed the origin of conventional management which traces its origins to the civil, religious and military administration of the resultant ancient civilizations. It began in the workplace with engineers such as Fredrick Winslow Taylor, Henri Fayol and Harrington Emerson developing detailed theories of management.

Project management has been around for decades and has gained its reputation in recent years as a management practice that helps an organisation achieve its business results (Patanakul et al 2010). While there is a broad range of skills needed to effectively manage the people, process, and technical aspects of any project, it becomes clear there is a set of key skills that each project manager should have (Horine, 2009). Even though many times organizations confuse their technical experts as project managers, they mistakenly think that skill and expertise that made them stars in their technical fields, translate into project management skills. This is not necessarily so. Project administrators are generalists with many skills in their repertoires, encompassing every area of management, from budgeting to strategic planning, communication, leadership, supervision, personnel administration, team building, conflict resolution, technical expertise, planning, organization, entrepreneurship, management support, allocation of resources (Kerzner 2003) and more. In addition, Kerzner continues to say the program manager must understand the culture and value system of the organization he is working with.

Project managers must have several key skills: the ability to lead a team and resolve team problems; the ability to communicate and report effectively to a wide variety of customers and stakeholders on technical and project issues; the ability to manage a number of technical assignments all at once; the capacity to deploy project management tools, such as Gantt charts and schedules; a full understanding of the project life cycle; and proficiency in project

management software. Heldman (2009) claim that project managers should possess strong leadership skills, skills in developing people, excellent communication skills, stress management skills, as well as problem solving and time management knowledge. Such knowledge and skills can be inborn or acquired by training. They need to know a little bit about every aspect of management. This statement is further supported by (Heldman2009), who says they are problem solvers who wear many hats. Project managers might indeed possess technical skills, but then technical skills are not a prerequisite for sound project management skills.

Project leadership is one of the most important skills in project management & which has significant impact on the success or failure of projects. It is imperative for projects to be led by professionals who can manage well the strategy, structure, skills and systems (Tasie, 2009). He goes on to say that the Japanese have succeeded by developing their own skills of management, which stem directly from their culture, social values and beliefs.   This view is supported by (Morison and McMullan 2013) whose study found out that development of effective leaders is essential for all healthcare professions and increasingly is becoming a key focus for the UK dental profession. It is therefore essential to start learning about leadership at the undergraduate level. Additionally, Ahari et al, (2013), states that an administrator's management skills impacts on the performance of employees and success of the project. Arain and Tipu (2009) go on to emphasise incorporation of project management education into engineering schools in public universities in Pakistan.   They say by doing this, professional managers will be born to facilitate smooth running of the frequent emerging contracts, collaborative partnerships, new management initiatives and global new product markets. Hazelbaker (2013) acknowledges that there is lack of managerial and leadership training for clinicians in health care professions since educational programs are weighted towards technical skills of care rather than management and leadership. Leadership and management are part of the educational competencies, key to success of projects.

Implementation becomes easy if the project leadership has the right skills to steer the project. As (Thwala & Phaladi 2009) puts it many projects in South Africa have failed for lack of proper leadership and management while (Ayadi, 2009) says many administrators lack the most elementary management skills needed to build and grow successful organizations/projects, leading to African economic growth problems. In his work (Stanley 2006) says that in the United Kingdom (UK), even though nurses seem to be the most

experienced clinical members of wards or unit teams, that does not necessarily make them the most effective managers.

2.4 Systems and Processes in relation to performance in project implementation

Systems and processes have been identified as some of the most salient factors impacting on project implementation today. These two can positively accelerate implementation or derail it altogether. Projects exist within organizations. These organizations already have structures, and the project work is then overlaid on that structure (Desmond, 2004) and which should be followed.

It is known that the traditional functional approach to management did not prioritize on efficiency as a result of its bureaucratic style, innovation was not given any privilege either and the status quo was preferred (Zaheer et al., 2009). Organisations in fast changing environment typically have more loose structures whilst those in slow changing environment have more bureaucratic structures (Kipkoech 2009). Due to the current world competition over limited resources, organizational developments have seen a shift towards a process focus meant to enhance competitiveness and performance. It has therefore become strategically important for organisations to be process oriented to cope with intense competition and to better serve an ever-demanding pool of customers. Researchers have explored various modes of improving business processes within an organization, such as business process re-engineering, business process management, business process analysis, business process efficiency, business process mapping and business process orientation (Zaheer et al., 2009).

Zaheer et al., (2009) assert that changes in systems and processes have been the hallmark of successful implementation in the past few years. A remarkable and important part of this change is the recognition that an organisation's success depends on its ability to understand and manage its processes in order to meet set objectives. There are real benefits from managing projects as a set of interconnected processes, focused on achieving objectives related to the needs of customers and other interested parties.

Although many organisations have been on the fore front of re-organising their structures, processes, procedures, improve documentation and efficiency of their systems, managers still believe that processes have a very strong influence in project implementation since small changes in key business process may result in significant changes of the whole project (Kipkoech, 2009). Emphasis is put on the business process efficiency that defines the level of performance of business processes. The efficiency of business processes is generally

measured using various parameters, such as cost, time, the extent of electronic work over manual processing and the number of people and departments involved in process execution (Skrinjar et al, 2008).

Procedures and processes are recognised as consisting of one or more linked activities that require specific resources and management so as to achieve a specific predetermined output. A system is a series of functions or activities within an organization that work together for the aim of the organization (Deming, 1995). A process is defined by Hoyle (2010) as a set of interrelated or interacting activities which transforms inputs into outputs. Change of systems and processes, has greatly improved the ways in which both public and private sectors operate. Their role has been seen as transitioning from procurement, recruitment, finances, training, administrative and operational functioning.

2.5 Role conflict in relation to performance in project implementation

University teaching has been the desire of many people who are not related to this profession and who often perceive it as a stress free occupation (Fischer, 1994). However the last two decades has seen major changes with a great inflow of many private universities, fast growth has been observed in higher education institutions, particularly those in developing countries. This development, has led to very high and stiff competition, resulting to deterioration of the perceived stress free organizational environment in all the public and private universities (Barkhuizen and Rothmann 2008 and Rajarajeswari 2010). Just like the corporate sector, in this era of competition, academicians' responsibilities have increased, and faculty members are supposed to assume many other roles besides their traditional roles of teaching and research (Abbas et al, 2012).

Many governments are now offering research grants and most universities use research outputs to appraise their lecturers. International universities are similarly collaborating with local ones to address diverse issues. It therefore becomes inevitable to balance between teaching, research and other roles. Faculty members who are unable to do this, experience role conflict which may lead to failure in realisation of either their primary roles including implementation of any donor funded projects they could be managing or secondary as well as other roles. Furthermore, (Abbas et al 2012) identified role conflict as a reservoir of organisational and personal stress, which is also emphasised by (Safaria 2012).

Pandit and Upadhaya (2012) define role conflict as an outcome of conflicts in a number of roles performed by an individual.   (House and Rizzo 1972, Kahn et al 1964, Pandey and Kumar, 1997) describes role conflict as the simultaneous occurrence of two or more sets of pressures, such that compliance with one would make compliance with the other more difficult. Onyemah, (2008) says role conflict is a feeling of being torn in multiple directions, unable to find a way to make every role partner satisfied. Most employees are involved in multiple roles within and without the organisation. In such a scenario, role conflict is likely to occur, affecting one's performance.

2.6 Organisational Culture in relation to performance in project implementation

Organizational culture influences many aspects of business. This influence can be strong or weak, direct or indirect (Nikolic et al 2011) can also be positive or negative. The study of an organization's culture is important for the implementation of an organization's strategies (Bashir et al 2012). Lately organisations are trying their best to keep pace with the changes dictated by market dynamics and which impact on the organisational culture.

Employees play a key role in achieving an organization's goals, and to gain an edge over competitors in today's dynamic environment. The human resource (HR) practices used in organizations directly affect an employee's attitude in terms of, motivation, job satisfaction, commitment, ownership and performance. For organisations to achieve their goals, it is necessary to cultivate a strong relationship between the employer and employees, as well as HR practices and organization's culture. The study of an organization's cultural values helps to choose the best HR practices to create an environment in which employees feel motivated, satisfied and show an organizational commitment that increase a firm's performance (Bashir et al 2012). He further continues to say that culture formation is not a single day's process. It takes decades for culture to form and change.

Organizational culture develops through interaction of employees with each other in performance of organizational tasks and achieving organizational goals. The employees learn different attitudes, behaviours, beliefs and values from each other that lead to some common attitudes, behaviours, beliefs and values. Culture determines the actions and outlook of individuals and corporations. All behaviour such as greetings, table manners, sleeping habits, how people ride an escalator, run a meeting, or reach a consensus, is part of a culture. These forms of behaviour are transmitted from generation to generation and evolve over time (Zeybek et al., 2003 & Kumar 2012). Wang (2010) says executives and managers desire to

know how to manage organizational culture and how to influence or change it to obtain the best achievement in organizational performance.

Safi et al (2011) say organizational culture develops through interaction of employees with each other in performance of organizational tasks and achieving organizational goals. The employees learn different attitudes, behaviours, beliefs and values from each other. Culture is thus the system of shared beliefs, values, customs, behaviours and artifacts that the members of society use to cope with their world, with one another and transmitted from generation to another through learning. Organizational culture is the set of beliefs, values and norms, together with symbols like dramatized events and personalities that represents the unique character of an organization, and provides context for action in it and by it (Gareth, 1997). He goes on to describe culture as an active living phenomenon through which people jointly creates and recreates world in which they live. For Gareth, the three basic questions for cultural analysts are: First what are the shared frames of reference that make organizations possible? Second where do they come from? And third how are they created, communicated and sustained?

Organisational culture can also be looked at as a system. An organisation system has been defined by (Zeybek et al 2003) as a set of interested and interacting processes that drive the behaviour of individuals, teams and groups in an organisation towards a goal or a set of objectives. Organizational culture can be thought of as the attitudes, experiences, norms, beliefs and values of an organization (Summerill et al., 2010). Organizational culture consists of shared meanings, beliefs, and values that ultimately shape employees' behaviours (Kumar 2012). Summerill (2010) propose that organizational culture is a set of shared mental assumptions that guide interpretation and action in organizations by defining appropriate behaviour for various situations.

Researchers have presented empirical studies to characterize the impact of various organizational culture aspects. Braunscheidel et al. (2010) the impact of organizational culture on supply chain integration was examined and it was confirmed that organizational culture had a significant impact on both internal and external integration practices. Shieh (2010) found that corporate culture showed a significantly positive correlation with supply chain management and organizational innovation. Matin et al (2009) pointed at the importance of improving organizational culture in customer-oriented companies and thus

increasing customer satisfaction. From the studies conducted so far, organisational culture therefore has a great impact on organisations.

2.7 Conceptual framework

The conceptual framework presents the frame of reference for this study. The major concepts underlying this study are HIV/AIDS and performance of administrators in implementing HIV donor funded projects. The dependent variable in this study was performance in project implementation while independent variables were managerial and leadership skills, systems and processes, role conflict and organisational structure.

Moderating variables

Project managerial skills -Trainings undertaken -Duration of training -Number of years after training, experience	-Political environment -Government policies -Donor policies	*Performance in project implementation* -Appropriate use of resources -Achievement of targets -Timely execution of activities
Systems and processes -Process time -Process levels -Process automation		
Role conflict -Number of grants -Private practice -Participation in stakeholders boards	-Global economy -Technology	
Organisational culture -Decision making -Management support -Middle level support		

Independent variables   **Intervening variables**   **Dependent variable**

Figure 1: Conceptual framework

Independent variables – Effective administrators performance in implementation of HIV donor funded projects is determined by managerial and leadership skills, systems and

processes, role conflict and organisational culture. Project administrators play a significant role in implementing HIV donor funded projects.

Intervening variables – These variables also have implications on administrators' performance. They form a go between on the variables contributing to performance and are often out of control of the project yet whether they are positive or not, can determine whether the desired level of performance is obtained. These include the global economy and technology that despite the efforts put in place they affect administrators' performance.

Moderating factors – These include political environment, government and donor policies which expect that input to the project meets certain conditions. These requirements and conditions sometimes do not fall neatly into the context and can affect implementation beyond active involvement of administrators' performance.

2.8   Summary of literature review

Managerial skills will have a positive impact on performance implementation of donor funded projects, since the implementers will have capability to manage and run the affairs of the project to the satisfaction of all stakeholders. Systems and processes have been identified as some of the most salient factors impacting on project implementation today. These two can positively accelerate implementation or derail it altogether, as projects exist within organizations. These organizations already have structures, and the project work is then overlaid on that structure and which should be followed. As a result of the current stiff competition in all sectors of the economy, individual's responsibilities have increased, and members are supposed to assume many other roles besides their traditional roles of in the organisation. It therefore becomes inevitable to balance different roles to avoid conflict and personal stress. Organizational culture is a very powerful tool in the process of performance implementation. This is because culture shapes the way employees do their work. Shared believes and values are very strong attributes when it comes to organization performance. Therefore, if employee believes and values are well managed, then the implementation of projects becomes smooth and effective.

CHAPTER THREE: RESEARCH METHODOLOGY

3.1 Introduction

This chapter presented the methodology that was used to carry out the study, which includes research design, target population, data collection methods and data analysis.

3.2 Research Design

This study adopted both quantitative and qualitative approach using a descriptive survey design to investigate performance in implementing HIV donor funded projects. The qualitative approach facilitates a researcher to assume the role of providing a voice to those who are being studied (Mugenda & Mugenda, 2003, Chamber, 1985). Descriptive survey design is preferred for it establishes the associations between variables hence its primary intention will be describing the variables in the study (Zechmeister and Shaughnesy, 1994), which will answer the questions as well as give a clear descriptive study of the outcome.

3.3 Target Population

The target population in this study were 50 administrators, comprising the following: project principal investigators, directors, coordinators, managers and administrators of various HIV donor funded projects of UoN, CHS identified at the time of this study. Therefore, a total population of fifty respondents will be targeted for the study. With the unit analysis covering 50 administrators, a census was carried out by distributing questionnaires to respondents identified for the purpose of the study as indicated in Table 3.1.

Table 3.1:   Distribution of Respondents

Position	Number of Respondents
Principal Investigators	10
Project Directors	8
Project Coordinators	8
Project Managers	12
Project Administrators	12

3.4   Data collection methods

Data was collected using questionnaires that have structured (close ended) and unstructured (open ended) questions. The structured questions were used in an effort to save on time and facilitate easy analysis for they can be used immediately. Unstructured questions were used

so as to encourage the respondent to give in-depth response without holding back any information. These types of questions gives a respondent's insights into his feelings, back ground, hidden motivation, interests and gives as much information as possible without holding back. Administration of the questionnaire will be on a drop and pick later basis. The researcher was available to clarify any required information. The questionnaire was dispatched to the entire CHS selected respondents.   Where electronic communication is available it will be used to hasten the process. An introductory letter was attached to each questionnaire requesting the respondent to fill it.

3.5 Validity of the research instrument

Validity refers to the degree to which a test or other measuring device is actually measuring what was intended to measure. Validity means that the research findings truly represent the phenomenon the study is trying to measure (Mugenda & Mugenda, 2003). Content validity helped the researcher to ascertain whether s/he has included or represented all the content of the research in the study.

3.6 Reliability of the research instrument

Reliability of a research instrument means that the instrument yields the same results on repeated trials. According to Walliman, (2001), reliability refers to the consistency of measurement and is frequently assessed using the test–retest reliability method. To ensure reliability of the research instruments, the researcher conducted a pilot study to ensure that the questions are relevant, clearly understandable and make sense. The pilot study aims at determining the reliability of the questionnaire including the wording, structure and sequence of the questions (Ngechu, 2004).

3.7 Data analysis methods

Quantitative analysis was conducted to determine the nature of relationship between all variables under consideration. Data collected during the study was analysed descriptively using mean, standard deviation and percentages. Data was coded, tallies made and frequencies used to determine each factor. Use of data analysis tool of Statistical Package for Social Scientists (SPSS) will be used to estimate coefficients of model parameter to establish the extent to which various variables affect administrators' performance in implementing HIV donor funded projects. Regression analysis was used to assess relationships between independent and dependent variables. A regression function is a mathematical function that is used when a researcher is interested in finding out whether an independent variable predicts a

given dependent variable (Mugenda & Mugenda, 2003). Multiple regression model is of the form $\beta_o + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_4 X_4 ... \beta_n X_n + \mathcal{E}$

where:

	Y	-	is the dependent variable (performance)
	X_{1-n}	-	are the independent variables
	β_o	-	is the constant
	β_{1-n}	-	is change induced in Y by each X
	$\mathcal{E}$	-	is the error

3.8 Ethical issues

Consent was obtained from each respondent before the interview is conducted and questionnaire issued out. The subjects were informed on the nature and purpose of the study. All respondents' information and identities were kept confidential and information gathered was used for the purposes of study only.

Table 3.2:   Operationalization of variables

Objectives	Indicators	Measurement	Measurement of scale	Data collection Tools	Type of analysis
Independent: Managerial skills	-Trainings undertaken	Type, number	Nominal	Structured and unstructured Questionnaires	Descriptive
	-Years of experience -Number of staff supervised	Number	Nominal	Structured and unstructured Questionnaires	
Systems & processes	-Time	Days, weeks	Ordinal	Structured and unstructured Questionnaires	Descriptive
	-Structure	Number of levels	Ordinal		
	-Automation	Number of automated processes	Nominal	Structured and unstructured Questionnaires	
Role conflict	-Number of grants implementing	Number awarded	Nominal	Structured and unstructured Questionnaires	Descriptive
	-Private practice	Number of clinics	Nominal	Structured and unstructured Questionnaires	

	-Meeting membership	Number of meetings	Nominal	Structured and unstructured Questionnaires	
Organisational culture	-Bureaucracy	Leadership Style used	Nominal	Structured and unstructured Questionnaires	Descriptive
	-Individualism	Organisational interest	Nominal	Structured and unstructured Questionnaires	
	-Integrity	Reliability			
Dependent: Performance	-Appropriate use of resources -Timely execution of activities -Achievement of targets	Number of completed projects	Nominal	Structured and unstructured Questionnaires	Descriptive
		Number of successful projects	Nominal	Structured and unstructured Questionnaires	Correlation Multiple regression
Moderating	-Donor policies	Number of successful project	Nominal	Structured and unstructured Questionnaires	Descriptive
Intervening	-Global economy	Funding availability	Nominal	Structured and unstructured Questionnaires	Descriptive

CHAPTER FOUR: DATA ANALYSIS, PRESENTATION AND INTERPRETATION

4.1 Introduction

This chapter presents analysis to establish how administrators perform when implementing HIV donor funded projects through public institutions and UoN specifically which is predominately a higher institute of learning. This chapter also discusses the presentation and interpretation of the findings as well as the major findings and results of the study.

4.1.1 Response rate

This research study had a sample size of 50 respondents who were project administrators. Out of this sample size 42 questionnaires were filled and returned to the researcher which represents a sample size of 84% response rate. The response rate was adequate for this analysis and conforms to Babbie (2002) stipulation that any response of 50% and above is adequate for analysis.

4.1.2 Reliability analysis

A pilot study was carried out to determine reliability of the questionnaires. The pilot study involved sample respondents from University of Nairobi. Reliability analysis was subsequently done using Cronbach's Alpha which measures the internal consistency by establishing if certain item within a scale measures the same construct.

Gliem and Gliem (2003) established the Alpha value threshold at 0.6, thus forming the study's benchmark. Cronbach Alpha was established for every objective which formed a scale. The table shows that managerial skills had the highest reliability (α= 0.805), followed by systems and processes (α=0. 740), Role conflicts (α=0. 713) and culture (α=0. 706). This illustrates that all the four variables were reliable as their reliability values exceeded the prescribed threshold of 0.6.

Table 4.1:   Reliability analysis

Scale	Cronbach's Alpha	Number of Items
Managerial skills	0.805	4
Systems and processes	0.740	5
Role conflict	0.713	4
Culture	0.706	5

4.2   Demographic information

In an effort to determine the general information of the respondents the researcher requested them to indicate their gender, age bracket, designation, years of experience at the university and experience with UoN HIV donor funded projects.

Table 4.2:   Respondents gender

	Frequency	Percent
Female	27	64.3
Male	15	35.7
Total	42	100.0

The findings in Table 4.2 below shows the gender of the respondents, majority of the respondents were female as indicated by 64.3% while 35.7 % were male.

Table 4.3:   Age

	Frequency	Percent
20-29 years	6	14.3
30-39 years	16	38.1
40-49 years	12	28.6
50-59 years	5	11.9
60 and above	3	7.1
Total	42	100.0

On the age of the respondents, 38.1% of the respondents indicated that they were aged between 30-39 years, 28.6% were aged between 40 – 49 years, 14.3% were aged between 20 – 29 years, 11.9% were aged between 50 – 59 years while 7.1% were aged above 60 years.

Table 4.4:   Designation

	Frequency	Percent
Project Investigators	7	16.7
Project Directors	8	19.0
Project Coordinators	6	14.3
Project Managers	11	26.2
Administrators	10	23.8
Total	42	100.0

The Table 4.4 above shows the designation of the respondents. From the findings, 26.2% of the respondents were project managers, 23.8% of the respondents were administrators, 19% were project directors, followed by 16.7% who were project investigators and finally 14.3% being project coordinators. Majority of the respondents were project managers although the respondents were evenly distributed across the different project management positions.

Table 4.5:   Years of experience with UoN

	Frequency	Percent
0 - 5 years	18	42.9
6 – 10 years	9	21.4
11 – 15 years	10	23.8
16 and above	5	11.9
Total	42	100.0

On the years of experience at the university, 42.9% of the respondents had been in the university for between 0-5 years, 21.4% of the respondents had been in the university for between 6-10 years, 23.8% of the respondents had been in the university for between 11-15 years while 11.9% of the respondents had been in the university for above 16 years.

Table 4. 6:   Experience with UoN HIV donor funded projects

	Frequency	Percent
0 - 5 years	14	33.3
6 – 10 years	16	38.1
11 – 15 years	12	28.6
Total	42	100.0

According to the findings, 33.3% of the respondents indicated that they had an experience of between 0-5 years with UoN HIV donor funded projects, 38.1% of the respondents indicated that they had an experience of between 6-10 years with UoN HIV donor funded projects while 28.6% of the respondents indicated that they had an experience of between 11-15 years with UoN HIV donor funded projects.

4.3:   Managerial skills in relation to performance

The study sought to find out in what areas of project management the respondents had been trained in, relevant experience in donor funded projects and leadership skills.

4.3.1:   Whether trained in project management

In determining whether the respondents were trained in project management, Table 4.5 below shows that, 64.3% of the respondents had been trained in project management while 35.7% indicated that they had not been trained. These findings show that majority of the administrators had been trained in project management.

Table 4.7:   Whether trained in project management

	Frequency	Percent
Yes	27	64.3
No	15	35.7
Total	42	100.0

4.3.2: Area of training

On the area of training, 19 (45.2%) of the respondents had been trained on project management, 5 (11.9%) on project finance and administration, 3 (7.1%) on project monitoring and evaluation while 15 (35.7%) had been trained on grants management. From these findings, it is evident that a majority of the respondents had been trained in project management and grants management which could be largely attributed to the fact that the projects are financed through grants which require that administrators possess skills in these two areas.

Table 4.8: Area of training

	Frequency	Percent
Project management	19	45.2
Project finance & administration	5	12.0
Project monitoring and evaluation	3	7.1
Grants management	15	35.7
Totals	42	100

4.3.3: Position in any expired UoN HIV donor funded

With regard to the position held in any expired UoN HIV donor funded project. 26.2% of the respondents indicated that they held the position of a project manager, 23.8% of the respondents indicated that they were administrators while 16.7% of the respondents indicated that they were project coordinators, project directors and project investigators respectively.

Table 4.9:   Position in any expired UoN HIV donor funded

	Frequency	Percent
Project Investigators	7	16.7
Project Director	7	16.7
Project Coordinator	7	16.7
Project Manager	11	26.2
Administrator	10	23.7
Total	42	100.0

4.3.4:   Members of staff supervised/led in project implementation

The study sought to find out the number of staff the respondents had supervised/led in project implementation. From the findings, 26.2% of the respondents indicated that they had supervised/led less than 10, 11 – 20 and above 31 members respectively while 21.4% of the respondents indicated that they had supervised/led 21 – 30 members.

Table 4.10:   Members of staff supervised/led in project implementation

	Frequency	Percent
Less than 10 members	11	26.2
11 – 20 members	11	26.2
21 – 30 members	9	21.4
31 and above members	11	26.2
Total	42	100.0

4.4   Systems and processes in relation to performance

The researcher was keen to establish how systems and processes affect administrators in project implementation.

4.4.1 Characteristic of systems and processes

In determining the characteristic of systems and processes of service at UoN in the last 5 years in relation to project implementation, 33.3% of the respondents indicated that the systems and processes of service at UoN in the last 5 years were poor, 21.4% of the respondents indicated that the systems and processes of service at UoN in the last 5 years were very poor and fairly good respectively, 16.7% of the respondents indicated that the systems and processes of service at UoN in the last 5 years were good while 7.1% of the respondents indicated that the systems and processes of service at UoN in the last 5 years were very good.

Table 4.11:   Characteristic of systems and processes

	Frequency	Percent
Very poor	9	21.4
Poor	14	33.4
Good	7	16.7
Fairly good	9	21.4
Very Good	3	7.1
Total	42	100.0

4.4.2 Whether systems and processes affect project implementation performance

The study sought to find out whether systems and processes affected project implementation performance. From the findings, all the respondents (100%) indicated that systems and processes affected project implementation performance.

Table 4.12:   Whether systems and processes affect project implementation performance

	Frequency	Percent
Yes	42	100.0
Total	42	100.0

4.4.3 Extent to systems and processes affect project implementation performance

In determining the extent to which systems and processes affected project implementation performance, 45.2% of the respondents indicated that systems and processes affected project

implementation performance to a moderate extent, 31% of the respondents indicated that systems and processes affected project implementation performance to a very great extent while 23.8% of the respondents indicated that systems and processes affected project implementation performance to a small extent.

Table 4.13:   Extent to systems and processes affect project implementation performance

	Frequency	Percent
Small extent	10	23.8
Moderate extent	19	45.2
Very great extent	13	31.0
Total	42	100.0

4.4.4 Systems and processes offered by UoN

The study sought to rate how the following systems and processes offered by UoN affect project implementation.

Table 4.14: Systems and processes offered by UoN

	Mean	Std. Deviation
Recruitment	4.3846	.9898
Procurement	4.3846	1.0416
Processing of payments	4.1538	.8748

From the findings, majority of the respondents indicated that recruitment and procurement affected project implementation to a very great extent as indicated by a mean of 4.3846 and a standard deviation of 0.9898 and 1.0416 respectively. The respondents indicated that processing of payments affected project implementation to a great extent as indicated by a mean of 4.1538 and a standard deviation of 4.1538.

4.5   Role conflict in relation to performance

The study sought to examine to what extent role conflict affect administrators performance in project implementation

4.5.1 Projects being implemented

In determining the number of projects being implemented by administrators, 40.6% of the respondents indicated that they were implementing 2 projects only, 33.3% of the respondents indicated that they were implementing 1 project only, 16.6% of the respondents indicated that they were implementing 4 projects only, 7.1% of the respondents indicated that they were implementing   more than 5 projects while 2.4% of the respondents indicated that they were implementing 3 projects only.

Table 4.15: Projects being implemented

	Frequency	Percent
1 only	14	33.4
2 only	17	40.5
3 only	1	2.4
4 only	7	16.6
more than 5	3	7.1
Total	42	100.0

4.5.2 Chair/seat in any National HIV implementing boards

The study sought to establish whether the respondents chaired any national implementing boards. The findings were as shown in the Table 4.16.

Table 4. 16: Chairing any National HIV implementing boards

	Frequency	Percent
Yes	15	35.7
No	27	64.3
Total	42	100.0

From the findings, majority 64.3% of the respondents did not chair any national HIV implementing committee while a minority 34.7% of the respondents chaired a national HIV implementing committee.

4.5.3   Activities engaged in by the respondents

Findings on how the respondents spend most of their time was collected and tabulated as shown in the Table 4.17 below:

Table 4.17: Activities engaged in

	Frequency	Percent
Teaching	13	31.0
Research	9	21.4
Policy advice	15	35.7
Clinical practice	14	33.3
Project management	11	26.2
Administrative duties	21	50.0
Mentorship	10	23.8
Other	3	7.1

From the findings shown in Table 4.17 above, 31% of the respondents were involved in teaching, 21.4% were involved in research, 35.7% were involved in policy advice, 26.2% were involved in project management while a minority 23.8% were involved in mentorship. Other respondents were involved in other activities like clinical practice and administrative duties. These findings show that the respondents had many activities to engage in hence may not have had enough time to concentrate on project implementation. It also shows that all respondents engage in different activities hence the percentage does not add up to one hundred percent.

4.6   Organizational culture in relation to performance

All organisations subscribe to their own cultural believes and values. The researcher sought to find out how culture affects administrators performance in donor funded projects.

4.6.1   Effects of UoN culture on project implementation and performance

With regard to whether UoN culture affected project implementation, from the findings, all the respondents (100%) indicated that UoN culture affected project implementation.

Table 4.18:   Effects of UoN culture on project implementation and performance

	Frequency	Percent
Yes	42	100.0
Total	42	100.0

4.6.2   Extent to which UoN culture affects project implementation performance

In determining the extent to which UoN culture affected project implementation performance. 40.5% of the respondents indicated that UoN culture affected project implementation performance to a moderate extent, 28.6% of the respondents indicated that UoN culture affected project implementation performance to a very great extent,19.0% of the respondents indicated that UoN culture affected project implementation performance to a small extent, 9.5% of the respondents indicated that UoN culture affected project implementation performance to a great extent while 2.4% of the respondents indicated that UoN culture affected project implementation performance to a very small extent.

Table 4.19:   Extent to which UoN culture affects project implementation performance

	Frequency	Percent
Very small extent	1	2.4
Small extent	8	19.0
Moderate extent	17	40.5
Great Extent	4	9.5
Very great extent	12	28.6
Total	42	100.0

4.6.3   Characteristics of culture

The study sought to rate the effect of the following dominant characteristics of culture at UoN on project implementation.

Table 4.20:   Characteristics of culture

	Mean	Std. Deviation
Bureaucratic culture	4.5897	.9095
Individualism	3.2051	1.1738
Integrity	4.0256	1.2245

From the findings, majority of the respondents indicated that bureaucratic culture affected project implementation to a very great extent as indicated by a mean of 4.5897 and a standard deviation of 0.9095. The respondents indicated that integrity affected project implementation to a great extent as indicated by a mean of 4.0256 and a standard deviation of 1.2245. The respondents indicated that individualism affected project implementation to a moderate extent as indicated by a mean of 3.2051 and a standard deviation of 1.1738.

4.6.4   Usefulness of projects to UoN

In determining how useful projects were to UoN, 64.2% of the respondents indicated that the projects were extremely useful 31.0% of the respondents indicated that the projects were useful while 4.8% of the respondents indicated that the projects were very useful.

Table 4.21:   Usefulness of projects to UoN

	Frequency	Percent
Extremely useful	27	64.2
Very useful	2	4.8
Useful	13	31.0
Total	42	100.0

4.7 Extent to which the four factors affected project implementation

Extent to which the four factors (managerial skills, systems and processes, role conflict and organizational culture) affected project implementation was as presented in the Table 4.22 below:

Table 4.22:   Extent to which the four factors affected project implementation

Extent	Frequency	Percent
Very great extent	6	14.4
Great extent	21	50.0
Moderate extent	8	19.0
Small extent	4	9.5
Very small extent	3	7.1
Total	42	100.0

From the findings, majority 50% of the respondents indicated that the four factors affected project implementation to a great extent followed by 19% who indicated moderate extent, 14.3% very great extent and 7.1% indicated very small extent.

4.8   Regression analysis

In this study, a multiple regression analysis was conducted to test the influence among predictor variables. The researcher used statistical package for social sciences (SPSS V 17.0) to code, enter and compute the measurements of the multiple regressions

Table 4.22:   Results of multiple regressions between ownership (dependent variable) and the combined effect of the selected predictors

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.793	.756	.678	.2076

a. Predictors: (Constant), managerial skills, Systems and processes, role conflicts and Culture.

R-Square (coefficient of determination) is a commonly used statistic to evaluate model fit. R-square is 1 minus the ratio of residual variability. The adjusted R^2, also called the coefficient of multiple determinations, is the percent of the variance in the dependent explained uniquely or jointly by the independent variables. The 75.6% of changes in the performance in project implementation variables could be attributed to the combined effect of the predictor variables.

Table 4.23: **Summary of one-way ANOVA results of the regression analysis between ownership and predictor variables**

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	12.213	4	6.1065	2.3743	.001
	Residual	102.876	38	2.5719		
	Total	115.089	42			

a. Predictors: managerial skills, systems and processes, role conflicts and culture

b. Dependent variable: performance in project implementation

The probability value of 0.001 indicates that the regression relationship was highly significant in predicting how managerial skills, systems and processes, role conflicts and culture affected performance in project implementation. The F critical at 5% level of significance was 2.271 since F calculated is greater than the F critical (value = 2.343), this shows that the overall model was significant.

Table 4.24: **Regression coefficients of the relationship between ownership and the four predictive variables**

Model		Unstandardized coefficients(B)	Sig.
1	(Constant)	17.770	0.000***
	Managerial skills	+0.632	0.015**
	Systems and processes	+0.541	0.036**
	Role conflicts	-0.433	0.025**
	Culture	+0.342	0.021**

** Significant at 5%

*** Significant at 10%

Writing the "b" coefficients in standard algebraic form, the unstandardized regression equation is:

PPI= 17.770 + 0.632MS+ 0.541SP-0.433RC+ 0.342C

Where PPI is performance in project implementation, MS is managerial skills, SP is Systems and processes, RC is role conflict and C is culture.

The regression equation above has established that taking all factors into account (managerial skills, systems and processes, role conflict and culture) as zero, performance in project

implementation will be 17.770. The elasticity of the model parameters indicate that a unit percentage increase in managerial skills will increase performance in project implementation by 0.632 (nearly two-thirds percent), a unit percentage increase in systems and processes will increase performance in project implementation by 0.541 (nearly half percent), a unit percentage increase in organisational culture will increase performance in project implementation by 0.342 (nearly one-third percent), while a unit percentage increase in role conflict will decrease performance in project implementation by 0.433 percent.

CHAPTER FIVE: SUMMARY OF FINDINGS, DISCUSSIONS, CONCLUSIONS AND RECOMMENDATIONS

5.1   Introduction

This chapter presented the discussion of key data findings, conclusions drawn from the findings and recommendations made. The conclusions and recommendations drawn were focused on addressing the objectives of this study which were: assess the extent to which project managerial skills affect administrators performance in implementing donor funded HIV projects; determine the extent to which systems and processes affect administrators performance in implementing donor funded HIV projects; establish the effect of role conflict on administrators performance in implementing donor funded HIV projects and determine the extent to which organisational culture affects administrators performance in implementing donor funded HIV projects

5.2   Summary of key findings

The study revealed that an overwhelmingly majority of the administrators were trained in project management. The study also revealed that there is a positive and significant relationship between managerial skills and performance in project implementation. The study further revealed that the administrators had supervised/led members of staff.

The study established that there is a positive and significant relationship between systems and process and performance in project implementation. The study also established that systems and processes affected project implementation performance. The study further revealed that the systems and processes of service at UoN in the last 5 years were poor. The study found out that recruitment, procurement and processing of payments affected project implementation.

The study revealed that a positive and significant relationship exists between role conflict and performance in project implementation. The study found out that majority of the administrators were implementing 2 projects only. The study also found out that some administrators chaired and sat in national HIV implementing boards. The study also revealed that the administrators spend most of their time on teaching, research, policy advice, clinical practice, project management, administrative duties and mentorship.

The study found out that a positive and significant relationship exists between culture and performance in project implementation. The study revealed that culture affected project implementation. The study established that bureaucratic culture, individualism and integrity affected project implementation. The study also established that projects were extremely useful.

5.3   Discussions of key findings

This section focuses on a detailed discussion of the major findings of the study which also entails comparing the study findings to the literature in order to come up with comprehensive conclusion.

5.3.1   Managerial skills in relation to performance

The study revealed that an overwhelmingly majority of the administrators were trained in project management. According to Patanakul et al (2010), project management has been around for decades and has gained its reputation in recent years as a management practice that helps an organisation achieve its business results. Horine (2009) observes that while there is a broad range of skills needed to effectively manage the people, process, and technical aspects of any project, it becomes clear there is a set of key skills that each project manager should have. The study further revealed that the administrators had supervised/led members of staff. The findings agree with Heldman, (2009) who claims that project managers should possess strong leadership skills, skills in developing people, excellent communication skills, stress management skills, as well as problem solving and time management knowledge. Such knowledge and skills can be inborn or acquired by training. They need to know a little bit about every aspect of management.

5.3.2   Systems and processes in relation to performance

The study also established that systems and processes affected project implementation performance. Desmond (2004) argues that systems and processes have been identified as some of the most salient factors impacting on project implementation today. These two can positively accelerate implementation or derail it altogether. Projects exist within organizations. These organizations already have structures, and the project work is then overlaid on that structure and which should be followed. The study further revealed that the systems and processes of service at UoN in the last 5 years were poor. According to Zaheer et al (2009). It is known that the traditional functional approach to management did not prioritize on efficiency as a result of its bureaucratic style, innovation was not given any

privilege either and the status quo was preferred. The study found out that recruitment, procurement and processing of payments affected project implementation. Kipkoech (2010) argued that although many organisations have been on the fore front of re-organising their structures, processes, procedures, improve documentation and efficiency of their systems, managers still believe that processes have a very strong influence in project implementation since small changes in key business process may result in significant changes of the whole project.

5.3.3   Role conflict in relation to performance

The study found out that majority of administrators were implementing 2 projects only. Pandey and Kumar, (1997) describes role conflict as the simultaneous occurrence of two or more sets of pressures, such that compliance with one would make compliance with the other more difficult. The study also found out that administrators chaired and sat in national HIV implementing boards. According to Abbas et al (2012), just like the corporate sector, in this era of competition, academicians' responsibilities have increased, and faculty members are supposed to assume many other roles besides their traditional roles of teaching and research. The study also revealed that the administrators spend most of their time on teaching, research, policy advice, clinical practice, project management, administrative duties and mentorship. According to Abbas et al (2012), many governments are now offering research grants and most universities use research outputs to appraise their lecturers. International universities are similarly collaborating with local ones to address diverse issues. It therefore becomes inevitable to balance between teaching, research and other roles. Faculty members who are unable to do this, experience role conflict which may lead to failure in realisation of either their primary roles including implementation of any donor funded projects they could be managing or secondary as well as other roles.

5.3.4   Organizational culture in relation to performance

The study revealed that culture affected project implementation. These findings are in line with Nikolic et al (2011) who argues that organizational culture influences many aspects of business. This influence can be strong or weak, direct or indirect; can also be positive or negative. The study established that bureaucratic culture, individualism and integrity affected project implementation. According to Safi et al (2011) say organizational culture develops through interaction of employees with each other in performance of organizational tasks and achieving organizational goals. The employees learn different attitudes, behaviours, beliefs and values from each other. Culture is thus the system of shared beliefs, values, customs,

behaviours and artifacts that the members of society use to cope with their world, with one another and transmitted from generation to another through learning.

5.4 Conclusions

This study concludes that there is a positive and significant relationship between managerial skills and performance in project implementation. Project leadership is one of the most important skills in project management & which has significant impact on the success or failure of projects. It is imperative for projects to be led by professionals who can manage well the strategy, structure, skills and systems.

The study revealed that there is a positive and significant relationship between systems and process and performance in project implementation. This is to mean that systems and processes have been identified as some of the most salient factors impacting on project implementation today. Due to the current world competition over limited resources, organizational developments have seen a shift towards a process focus meant to enhance competitiveness and performance.

The study deduced that a positive and significant relationship exists between role conflict and performance in project implementation. Most employees are involved in multiple roles within and without the organization. In such a scenario, role conflict is likely to occur, affecting one's performance.

The study concludes that a positive and significant relationship exists between culture and performance in project implementation. Organizational culture develops through interaction of employees with each other in performance of organizational tasks and achieving organizational goals. The employees learn different attitudes, behaviours, beliefs and values from each other that lead to some common attitudes, behaviours, beliefs and values.

5.5 Recommendations

Based on the findings and conclusion, the study recommends that:

Organizations need to cultivate a strong relationship between the employer and employees, as well as HR practices and organization's culture. The study of an organization's cultural values helps to choose the best HR practices to create an environment in which employees feel motivated, satisfied and show an organizational commitment that increase a firm's performance.

Executives and managers should be trained on how to manage organizational culture and how to influence or change it to obtain the best achievement in organizational ownership and performance.

Public universities should incorporate project management education into their undergraduate syllabus. By so doing, professional managers will be born to facilitate smooth running of the frequent emerging contracts, collaborative partnerships, new management initiatives and global new product markets.

Project administrators should be trained on role conflict management to help them cope with the multiple roles they engage in and to enhance their performance.

5.6   Recommendations for further studies

From the study and related conclusions, the researcher recommends further studies in the area of challenges facing administrators in project implementation processes in other public institutions.

It is also recommended that studies in this area need to be taken at different points in time for comparison purposes to be able to generalize the findings on performance.

REFERENCES

Abbas, S. G., Roger, A., & Asadullah, M. A. (2012). Impact of organizational role stressors on faculty stress & burnout. (An exploratory analysis of a public sector university of Pakistan).4ème colloque international (ISEOR - AOM), Lyon: France.

Adams, J. R. and Barndt, S. E. (1983).Behavioural Implications of the Project Life Cycle, in Project Management Handbook, ed. Cleland, D. I. and King, W. R. Van Nostrand Reinhold. New York, page 209-221.

Aldridge, I. D., Carlos F., Jaime M., & Robert W. (2009). Determining a cost effective intervention response to HIV/AIDS in Peru. BMC Public Health.

Angel, G. G. (2010). PMP Certification, A beginner's guide, London, McGraw-Hill Companies.

Ahari M. B., Mehrabi J., & Keymasi A. (2013). The Managerial Skills among the Heads of National Bank Branches in the Province of Lorestan Melli employees. Journal of Basic and Applied Scientific Research 3(2)123-125.

Arain, F. M. & Tipu, S. A. (2009).Status of project management education in Pakistan, Educational Research and Review Vol. 4 (4), pp. 148-155.

Arshad, Z., Kashif Ur R., & Muhammad A. K. (2010). Development and testing of a business process orientation model to improve employee and organisational performance. African Journal of Business Management.

Ayadi, F. M. (2009). Towards Better African Business Schools: The Case for the inclusion of health care management education programs. International Journal of African Studies, 2: 222-244.

Babbie, E. (2002). The basics of social research. Belmont, CA: Wadsworth Publishing.

Barkhuizen, N. & Rothmann, S. (2008). Occupational stress of academic staff in South African higher education institutions, SA Journal of Psychology, 28: 321-336.

Barron P., Pillay Y., Doherty T., Sherman G., Jackson D., Bhardwaj S., Robinson P., & Goga A. (2012). Eliminating mother-to-child HIV transmission in South Africa, Bulletin of the World Health Organization 91:70-74.

Bashir, M., Jianqiao, L., Abrar, M., & Ghazanfar, F. (2012). The Organization's Cultural Values: A Study of Public Sector Universities in Pakistan. African Journal of Business Management Vol. 6(10), pp. 3686-3693.

Biafore, B. (2011). Successful Project Management, Applying Best Practices and real-world techniques with Microsoft Project. O'Reilly Media, Inc. 1005 Gravenstein Highway North.

Borman, W. C., & Motowidlo, S. J. (1997). Task performance and contextual performance: The meaning for personnel selection research. Human Performance, 10, 99–109.

Braunscheidel, M. J., Suresh, N. C., Alicia, D., & Boisnier, A. D. (2010). Investigating the impact of organizational culture on supply chain integration. Human Resource Management, 49 (5) 883-911.

Brief, A. P.,&Motowidlo, S. J. (1986). Prosocial organizational behavior. Academy of Management Review, 11, 710–725.

Campbell, J. P. (1990). Modelling the performance prediction problem in industrial and

Campbell, J. P., McCloy, R. A., Oppler, S. H., & Sager, C. E. (1993). A theory of performance. In E. Schmitt, W. C. Borman, & Associates (Eds.), Personnel selection in organizations 35–70. San Francisco: Jossey-Bass.

Chambers, R. (1985). Rural Development: Putting the Last First. London: Longman Publishers.

Deming, W. E. (1995). The New Economics for industry, government and education. Second Edition MIT Press.

Denny, C. C., & Emanuel, E. J. (2008). US Health AID Beyond PEPFAR ama-assn.org.

Desmond, C. L. (2004). Project management for telecommunications managers. New York Kluwer Academic Publishers.

Einterz, R. M., Kimaiyo S., Mengech H. N. K., Khwa-Otsyula O. B., Esamai F., Quigley F., & Mamlin J. J. (2008). Responding to the HIV Pandemic: The Power of An Academic Medical Partnership, Academic Medicine, Vol. 82, No. 8.

Fischer, S. (1994). Stress in academic life: The mental assembly line, Buckingham, UK: Open University Press.

Fwaya, E. V. O., Odhuno E., Kambona O. O. & Othuon O. L. (2012). Relationships Between Drivers And Results Of Performance In The Kenyan Hotel Industry, Journal of Hospitality Management and Tourism Vol. 3(3), pp. 46-54.

Gareth, M. (1997). Images of Organization; Thousand Oaks, CA: Sage Publications.

Gibelman, M., & Gelman, S.R. (2001). Very public scandals: An analysis of how and why nongovernmental organizations get in trouble. *Voluntas, 12*(1), 49-66.

Gliem, J., and R. Gliem. (2003). Calculating, Interpreting, and Reporting Cronbach's Alpha Reliability Coefficient for Likert Type Scales. In Midwest Research to Practice Conference in Adult, Continuing and Community Education. Columbus, OH., USA.

Hazelbaker, C. B. (2013). Perceived Skills and Abilities Required by Athletic Trainers in Hospital and Clinical Management Positions: A Delphi Study. Journal of Athletic Training, 48 (1) 87–91.

Heldman, K. (2009). Project Management Professional Exam, Study Guide, Fifth Edition. USA, Wiley Publishing, Inc., Indianapolis.

Horine, G. M. (2009). Absolute Beginner's Guide to Project Management. Indianapolis, Que Publishing.

House, R. J., & Rizzo, J. R. (1972).Role conflict and ambiguity as critical variables in a model of organizational behaviour. Organizational Behavior and Human Performance, Vol. 7, pp. 467-505.

Hoyle D. (2009). ISO 9000 Quality Systems Handbook Butterworth – Heinmann. Ilgen & E. D. Pulakos (Eds.). The changing nature of job performance: Implications for staffing, motivation, and development (pp. 56–86). San Francisco, CA Bass.

Irungu D. N. (2009). Analysis of factors that contribute to successful implementation of projects. The case of Anglican Church of Kenya, Mt. Kenya Region Unpublished MA Project: School of Continuing & Distance Education, University of Nairobi.

Joint United Nations Programme on HIV/AIDS (UNAIDS 2012). Global Report on the Global AIDS Epidemic.

Kahn, R., Wolfe, D., Quinn, R., Snoek, J. and Rosenthal, R. (1964), Organizational Stress: Studies in Role Conflict and Ambiguity, New York, NY, Wiley.

Kerzner, H. (2003). Project Management: A System Approach to Planning, Scheduling And Controlling. Eighth Edition, John Wiley & Sons.

Keyes, J. (2009). Leading IT Projects.The IT Manager's Guide. CRC Press Taylor & Francis Group, LLC.

King, W. R. and Cleland, D. I. (1983). Life Cycle Management. New York, Van Nostrand Reinhold In Cleland, D. I, & King, W. R. (ed), Project Management Handbook pp. 222-244.

Kipkoech, B. C. (2009). Challenges facing implementation of ISO 9001:2000 quality standard in institutions of higher learning in Kenya; A case of University of Nairobi; Kenya. Unpublished MBA Project: School of Business & Economics, Moi University.

Kumar, K. A. (2012). Developing work culture with high performance work organisation. African Journal of Business Management Vol. 6 (39), pp. 10472-10476, June 2011.

Kyriakopoulos, G. L. (2011). Project Management (PM) Prosperity: A Second Half of the 20th Century Literature Review, Journal of Management and Sustainability Vol. 1, No. 1. Lexington, MA: Lexington.

Mango, S. (2009). Challenges facing effective implementation of HIV/AIDS control. Unpublished MA Project: School of Continuing & Distance Education, University of Nairobi.

Matin, H.Z., Jandaghi, G., Khanifar, H., & Heydari, F. (2009). Designing a competent organizational culture model for customer oriented companies. African Journal of Business Management, 3(7) 281-293.

Morison, S., & McMullan, C. (2013). Preparing for the future: challenges and opportunities for management and leadership skills. British Dental Journal 214, E2.

Motowidlo, S. J., & Schmit, M. J. (1999). Performance assessment in unique jobs. In D. R.

Mugenda O. M. & Mugenda A. G. 2003). Research Methods: Qualitative and Quantitative Approaches. Nairobi, Press African Centre for Technology Studies (ACTS) Press.

National AIDS and STI Control Programme (2009). HIV/AIDS Decentralization Guidelines.

National AIDS Control Council (2009). Kenya National AIDS Strategic Plan 2009/10 – 2012/13: Delivering on Universal Access to Services.

National AIDS Control Council and the National AIDS and STD Control Programme (2012). The Kenya AIDS Epidemic Update 2011.

Neely, A. (1998). Measuring business performance. London, Profile Books limited.

Ngechu. M. (2004), Understanding the research process and methods. An introduction. Star bright Services, Nairobi.

Nikolic et al (2011). The impact of organizational culture on economic indices – A study in Serbian companies. African Journal of Business Management Vol. 5 (11), pp. 4622-4635.

Oladipo, J. A. (2008). Project Planning and Implementation at the Local Government Level: Lessons of Experience. European Journal of Social Sciences, Vol. 6, (4) 83-91.

Oleribe, O. E. (2009). Management of Nigerian health care institutions: A cross sectional survey of selected health institutions in Abuja Nigeria. Journal of public administration and policy research Vol. 1(4) 063-067.

Onome, D. O,. & Roberts T. (2010). Economic evaluation, human immunodeficiency virus infection and screening: A review and critical appraisal of economic studies. The Bridge Clinic, University of Birmingham. International Journal of Technology Assessment in Health Care, 26:3 301–308.

Onyango, V. O. (2009). Factors motivating performance of community Health workers in HIV VCT services uptake promotion: Case of Matayos Division, Kenya. Unpublished MA Project: School of Continuing and Distance Education, University of Nairobi.

Onyemah, V. (2008). Role Ambiguity, Role Conflict, and Performance: Empirical Evidence of an Inverted-U Relationship, Journal of Personal Selling & Sales Management, Vol. 28, No. 3, 299 – 313.

Organ, D.W. (1988). Organizational citizenship behavior: The good soldier syndrome. Organizational psychology. In M. D. Dunnette & L. M. Hough (Eds.), Handbook of industrial and organizational psychology. Palo Alto: Consulting Psychologists Press. orientation model to improve employee and organizational performance, African Journal of Business Management Vol.4 (2), pp. 149-161.

Pandey, S., & Kumar, E.S. (1997).Development of a measure of role conflict International Journal of Conflict Management, Vol. 8 No. 3, pp. 187-215.

Pandit, S., & Upadhaya, S. (2012).Role Conflict and its effect on Middle Class Working Women of India. Journal of Business and Management, Vol 4, (1)35-37.

Patanakul, P., Iewwongcharoen, B., & Milosevic, D. (2010). An empirical study on the use of project management tools and techniques across project life-cycle and their impact on project success, Journal of General Management, Vol. 35 No. 3.

Prince, R. (2009).The Invisible Cure: Africa, the West, and the Fight Against AIDS (review). Bulletin of the History of Medicine Vol, 83, No. 1, 237-238.

Project Management Institute (2008). A Guide to the Project Management Body of Knowledge, Fourth Edition Project Management Institute, Global Standard, Newtown Square, PA page 5 & 13.

Qureshi J. A, Shahjehan A., Rehman Z., & Afsar B. (2010). Performance Management Systems: A comparative Analysis, African Journal of Business Management Vol. 4(9), pp. 1856-1862.

Rajarajeswari, S. (2010). Role stress among the aided and self-financing college teachers: A discriminant analysis, Global Management Review, 4 (4) 73-86.

Safaria, T., Othman, A., & Muhammad, N. A. W. (2011). Role Ambiguity, Role Conflict, the Role of Job Insecurity as Mediator toward Job Stress among Malay Academic Staff: A SEM Analysis, Current Research Journal of Social Sciences 3 (3) 229-235.

Safi, S. H., Jamal, W., & Ahmad, S. (2011). A study of employee satisfaction in terms of organization culture. African Journal of Business Management Vol. 5 (34) 13309-13315.

Sanghera, P. (2010). Project Management Professional Study Guide For The PMP, Wiley Inc., Indiana, USA.

Shieh, C. J. (2010). Supply chain management, organizational innovation and corporate culture: The impact of relatedness. African Journal of Business Management, 4 (9)1736-1744.

Skrinjar, R., Vulksic, V. B., & Stemberger, M. I. (2008). The impact of business process orientation on financial and non-financial performance. Business Process Management Journal 14 (5) 738-754.

Sonnentag S. & Frese M. (2001). Performance Concepts and Performance Theory. Psychological Management of Individual Performance, John Wiley & Sons, Ltd.

Stanley, D. (2006). Nursing Management, Vol 13 No 5.

Summerill C., Pollard, S. J. T., & Smith, J. A. (2010). The role of organizational culture and leadership in water safety plan implementation for improved risk management. Science of the Total Environment, 408(20):4319-4327.

Tasie, G. O. (2009). Can Japanese management styles be applied to Africa? African Journal of Business Management Vol.3 (4), pp. 233-240.

Thwala, W. D., & Phaladi, M. J. (2009). An exploratory study of problems facing small contractors in the North West province of South Africa University of Johannesburg, Department of Construction Management and Quantity Surveying, Johannesburg, South Africa. African Journal of Business Management Vol. 3 (10), 533-539.

Walliman, Nicholas. (2001), Your Research Project: A Step-by-Step Guide for the First-time Researcher. London: Sage Publications Inc.

Wamai, R. G. (2009). The Kenya Health System—Analysis of the situation and enduring challenges. International Medical Community, Vol. 52, No. 2, 134–140.

Wambugu, J. W. (2008). Constraints faced by Primary School Headteachers in implementing HIV/AIDS Program in Kamkunji Division, Nairobi North District, Kenya. Unpublished MEd Project: School of Education, University of Nairobi.

Wang, C., & Abdul-Rahman, H. (2010). Decoding organizational culture: A study of Malaysian construction firms. African Journal of Business Management Vol. 4 (10) 1985-1989.

Williams, M. (2008).The Principles of Project Management. Australia, Cambridge, Site Point Pty Ltd.

World Bank (2010).World Development Indicators 2010. Washington DC: World Bank.

Wu Z., Wang Y., Mao Y., Sullivan S. G., Juniper N., & Bulterys M. (2011). The integration of multiple HIV/AIDS projects into a coordinated national programme in China, Bulletin of the World Health Organization 89:227-233

www.mmrp.org, (27/02/2013). History of Mbeya Medical Research Program

www.pathfinder.org/international, (20/02/2013). Evidence-based Planning for Sustainability of Government Reproductive Health Services

www.pepfar.gov, (19/02/2013). The United States President's Emergency Plan for AIDS Relief (PEPFAR).

www.uonbi.ac.ke, (02/02/2013), History of the University of Nairobi.

Zaheer A., Rehman K. & Khan M. A. (2009). Development and testing of a business process

Zechmeister, E. B., & Shaughnesy, J. J. (1994).A Practical Introduction to Research Methods in Psychology.2nd Ed. McGraw-Hill, Inc.

Zeybek, A., Y., O'Brien M., Griffith, D. A. (2003). Perceived Cultural Congruence's Influence on Employed Communication Strategies and Resultant Performance: Transitional Economy International Joint Venture Illustration. International Business Review, 12 (4) 499-521.

APPENDICES

Appendix I: Introductory Letter to Respondents

Nancy Wanjiru Njuguna
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NAIROBI

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24th May 2013

Principal Investigator/Project Director/Project Coordinator/Project Manager/Project

Administrator

University of Nairobi

College of Health Sciences

Dear Prof./Dr./Mr./Mrs./Ms…………………………….

RE: QUESTIONAIRRE ON PERFORMANCE OF ADMINISTRATORS IN IMPLEMENTING HIV DONOR FUNDED PROJECTS IN UNIVERSITY OF NAIROBI

I am currently pursuing a master's degree in Project Planning and Management at the University of Nairobi. In order to successfully finish the course, I am expected to carry out research on a given topic.

I am writing this letter to inform you that I am carrying out a research to evaluate performance of administrators in implementing HIV donor funded projects in University of Nairobi. I promise that any information you provide will be accorded full confidentiality and the outcome of this research will be availed to you once completed. Please try to answer all the questions as objectively and truthfully as possible.

Thanks, in anticipation.

Yours faithfully,

Nancy W. Njuguna

Appendix II: Primary Data Questionnaire

Dear Respondent,

My name is Nancy Njuguna a student at the University of Nairobi. I am conducting a research study on **"Performance of Administrators in Implementing HIV Donor Funded Projects in Public Institutions: A case of University of Nairobi".** This study is being carried out in partial fulfilment of the requirements for the award of a Master of Arts in Project Planning and Management Degree, School of Continuing and Distance Education, University of Nairobi.

This questionnaire has been designed to collect information from the personnel of University of Nairobi, College of Health Sciences. The information generated will be used only for the purposes of the study and will be treated in strict confidentiality. Do not write your name on the questionnaire. Please give your honest opinion by ticking (√) the correct answer or by writing in the space provided.

Thank you for your support.

PART 1: BACKGROUND INFORMATION

A: Personal Details

1. What is your gender?

    Female   ( )   Male   ( )

2. What is your age in years?

    20 – 29   ( )   30 – 39   ( )

    40 – 49   ( )   50 – 59   ( )

    60 and above   ( )

3. What is your designation?

    Project Investigators   ( )   Project Director   ( )   Project Coordinator ( )

    Project Manager   ( )   Administrator ( )

4. Please indicate your experience with the university.

    0 - 5 years   ( )   6 – 10 years   ( )

    11 – 15 years   ( )   16 and above   ( )

B: Information on managerial skills, systems and processes, role conflict and organisational culture on administrators' performance

5. Please indicate your experience with UoN HIV donor funded projects.

    0 - 5 years   ( )   6 – 10 years   ( )

    11 – 15 years   ( )   16 and above   ( )

6. Have you ever been trained in project management?

    Yes   ( )   No   ( )

7. If your answer for (5) above is yes, please indicate the area of training by ticking all that apply.

    Project management   ( )   Project finance & administration   ( )

    Project monitoring and evaluation   ( )   Grants management   ( )

8. Please indicate your position in any expired UoN HIV donor funded.

    Project Investigators ( )   Project Director   ( )   Project Coordinator ( )

    Project Manager   ( )   Administrator ( )   Other (specify)…………..

9. How many members of staff do you supervise/lead in project implementation?

    Less than 10   ( )   11 – 20   ( )

    21 – 30   ( )   31 and above   ( )

10. What in your opinion has been characteristic of systems and processes of service at UoN in the last 5 years in relation to project implementation?

    Very poor   ( )   Poor   ( )

    Good   ( )   Fairly good   ( )

    Very Good   ( )

11. In your own opinion, do systems and processes affect project implementation performance?

    Yes   ( )   No   ( )

12. If yes to what extent

    Very small extent   ( )   Small extent   ( )

    Moderate extent   ( )   Great extent   ( )

    Very great extent   ( )

13. On a scale of 1 – 5 please rate how the following systems and processes offered by UoN affect project implementation. **5 = To a very great extent, 4 = To a great extent, 3 = To a moderate extent, 2 = To a small extent, 1 = To a very small extent**

	1	2	3	4	5
Recruitment					
Procurement					
Processing of payments					

14. What would you suggest to improve systems and processes at UoN to enhance performance?

………………………………………………………………………………………

………………………………………………………………………………………

15. How many projects are you implementing?

1 only ( )   2 only ( )   3 only ( )   4 only ( )   more than 5 ( )

16. Do you chair or sit in any national HIV implementing boards?

Yes   ( )   No   ( )

17. What activities comprise your day to day routine? (please select all that apply)

Teaching ( ) research ( ) policy advice ( ) clinical practice ( ) project management ( ) administrative duties ( ) mentorship ( ) others (please specify) ( )

18. In your own opinion, what can be done to improve role conflict and performance among project administrators?

………………………………………………………………………………………

………………………………………………………………………………………

19. Does UoN culture affect project implementation performance?

Yes   ( )   No   ( )

20. If yes to what extent?

Very small extent   ( )   Small extent   ( )

Moderate extent   ( )   Great extent   ( )

Very great extent   ( )

21. On the scale of 1 – 5 please rate the effect of the following dominant characteristics of culture at UoN for project implementation. **5 = To a very great extent, 4 = To a great extent, 3 = To a moderate extent, 2 = To a small extent, 1 = to a very small extent**

	1	2	3	4	5
Bureaucratic culture					
Individualism					
Integrity					

22. In your own opinion, what can be done to enhance organisational culture in project implementation?

…………………………………………………………………………………………….

…………………………………………………………………………………………..

23. How useful are projects to UoN?

Extremely useful ( ) Very useful ( )

Useful ( ) Not Useful ( )

24. In your own opinion what would you recommend to improve administrators performance?

…………………………………………………………………………………………..

…………………………………………………………………………………………..

25. To what extent do the four factors (managerial skills, systems and processes, role conflict and organizational culture) affect project implementation?

Very small extent ( ) Small extent ( )

Moderate extent ( ) Great extent ( )

Very great extent ( )

Thank you very much for your time and God bless

Appendix III: **List of Projects in College of Health Sciences**

CRISSP	-	Central Province Integration Strengthening & Sustainability Project
DCC	-	Discordant Couples Centre
HAPI	-	HIV & Pregnancy Intention Study
KACP	-	Kenya AIDS Control Project
KAVI	-	Kenya AIDS Vaccine Initiative
MARPS	-	Most At Risk Populations
MEPI	-	Medical Education Partnership Initiative
MEPI Linked	-	Mental Health Research Training for Improved Health Outcomes in Kenya
MEPI Linked	-	Strengthening Maternal, New-born and Child Health Research Training in Kenya
MP3 Study	-	Gender Specifics Combination HIV Prevention in High Burden Settings
MVS	-	Measles Vaccine Study in HAART
OPH	-	Optimising Paediatrics HAART
PACE	-	Partnership for Advanced Clinical Education
PACT – CoE	-	Partnership in Advanced Care & Treatment, Centres of Excellence
PACT Nairobi	-	Partnership in Advanced Care & Treatment, Nairobi
PrEP	-	Post Exposure Prophylaxis
PRIME K	-	Partnership in Innovative Medical Education in Kenya
PUSH	-	Post Stabilization versus Urgent Start of HAART
UNITID Fellowship	-	University of Nairobi Institute of Tropical and Infectious Diseases