ST. MARY'S UNIVERSITY

SCHOOL OF GRADUATE STUDIES

ASSESSMENT OF FACTORS ASSOCIATED TO MONITORING AND EVALUATION SYSTEM: MINISTRY OF HEALTH

BY

TESFA YETUM

JUNE, 2021

ADDIS ABABA, ETHIOPIA

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DECLARATION

I, the undersigned, declare that this thesis entitled "Assessment of Factors Associated to Monitoring and Evaluation System: Ministry of health" is my original work, prepared under the guidance of the research advisor. All sources of materials used for the thesis have been duly acknowledged. I further confirm that the thesis has not been submitted either in part or in full to any other higher learning institution for the purpose of earning any degree.

TESFA YETUM   _____

St. Mary's University, Addis Ababa, Ethiopia June, 2021

ENDORSEMENT

This is to certify that this thesis work, "Assessment of Factors Associated to Monitoring and Evaluation System: Ministry of Health" undertaken by Tesfa Yetum for the partial fulfillment of Masters of Project Management at St. Mary's University, is an original work and not submitted earlier for any degree either at this University or any other University.

Mohammed Mohammednur (Asst. Prof)   _____

             Advisor   **Signature**

St. Mary's University, Addis Ababa, Ethiopia June, 2021

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LIST OF ABBREVIATIONS AND ACRONYMS

CDF :   Constituency Development Fund

DFID :   Department for International Development

GTZ :   German Agency for Technical Cooperation

HSS :   Health Sysstem Strengthening

M & E :   Monitoring and Evaluation

MoH :   Ministry of Health

NGOs :   Non Governmental Organizations

RBM :   Results Based Management

SGS :   School of Graduete Studies

SPSS :   Statistical Package for Social Scinece

UNDP :   United Nations Development Programme

WHO :   World Health Organization

ABSTRACT

Effective Monitoring and Evaluating of health program enables the improved management of the outputs and outcomes while encouraging the allocation of effort and resources in the direction where it will have the greatest impact. This study sought to Assess Factors Associated to Monitoring and Evaluation System: Ministry of health.The research was guided by the following objectives; to assess Staff Ttraining on Monitoring & Evaluation, to assess Stakeholder's Participation on Monitoring & Evaluation System, to assess Budget Allocation for Monitoring & Evaluation.The study targeted 96 employees of Ministry of Health working under different directorates that are related with the research.The response rate was 93.8%. The study utilized a questionnaire in collecting primary data. A Cronbach alpha test was conducted to measure the internal consistency and reliability of the data collection instruments and was found out to be 0.856 meaning the instruments were reliable. Collected data was edited, sorted, cleaned and coded for data analysis using SPSS statistical package 20. The findings were analyzed using means, standard deviation, percentages and frequencies then presented using tables and charts. The study concluded that there dequate training was provided on Monitoring and Evaluation, there is adequate Monitoring and Evaluation experience among staffs. There was no allocation of sufficient staff time for M & E activities and formal Monitoring and Evaluation training in place, that there was no stakeholders participation in community project identification and selection and budget was allocated for Monitoring and Evaluation activities.The study recommended that Ministry of health should allocate sufficient staff time for Monitoring and Evaluation activities as well as arrange formal Monitoring and Evaluation training system, involve stakeholders at the planning stage, allow stakeholders participate in identify and solve problems related to M & E programs, involve stakeholders in the community project identification and selection stages and there should be reduced organizational bureaucracy and management to approve and release budget on time.

Key Words: Monitoring and Evaluation, Staff Training, Stakeholders Participation, Budget Allocation,

CHAPTER ONE

INTRODUCTION

1.1 Background of the Study

Monitoring and evaluation (M & E) is an essential part of any program, large or small. It can tell us whether a program is making a difference and for whom; it can identify program areas that are on target or aspects of a program that need to be adjusted or replaced. Information gained from M & E can lead to better decisions about program investments. Additionally, it can demonstrate to program implementers and funders that their investments are paying off (Peersman & Rugg, 2010).

Effective Monitoring and Evaluating of health program enables the improved management of the outputs and outcomes while encouraging the allocation of effort and resources in the direction where it will have the greatest impact. M & E can play a crucial role in keeping projects on track, create the basis for reassessing priorities and create an evidence base for current and future projects through the systematic collection and analysis of information on the implementation of a project (DFID and GTZ, 2008).

Monitoring is a regular systematic collection and analysis of information to track the progress of program implementation against pre-set targets and objectives whereas evaluation is an objective assessment of ongoing or recently completed project, program or policy, its design, implementation and results (DFID and GTZ, 2008).In addition, the basic terminology and frameworks for monitoring and evaluation handbook explains monitoring as Monitoring is the routine tracking and reporting of priority information about a project or program: its inputs, activities, outputs, outcomes and impacts whereas Evaluation is the systematic collection of information about the activities, characteristics and outcomes of a specific program to determine its merit or worth (Peersman & Rugg, 2010).

Monitoring and evaluation ideas are not new; everyone applies monitoring and evaluation practices to some extent in their work and home lives. However, we are currently witnessing an increase in the amount of systematic attention and study being applied to the field of Monitoring and Evaluation (M & E). This is a very interesting and exciting

development as the practice of M & E can contribute to sound governance in a number of ways: improved evidence-based policy making (including budget decision making), policy development, management, and accountability. Many governments around the world have realized much of this potential, including most first world countries and a small but growing number of developing countries (African, n.d.2010).

There are a number of strategic priorities but key amongst these has been the challenge of increasing effectiveness, so that a greater developmental impact can be achieved. One important way in which to increase effectiveness is by concentrating on M & E (African, n.d.2010)

Although Monitoring and Evaluation is used mainly for checking the impact of the project as well as establish whether it meets its objectives, they are also a mandatory requirement for donor sponsored projects where donors use them to determine effective use of their funds by organizations (NGOs).

According to WHO (2010), every country needs to have a strong M & E system in place as the foundation for national health sector strategic planning. It should cover and guide the implementation of all major programmes and health activities. The system should not only address the need for better data, but it should be central to ensuring effective management and accountability. However, many countries do not have strong M & E systems, thus decreasing their ability to effectively use these systems.

Considering the role that Monitoring and Evaluation plays achieving project goals and objectives, different organizations set and conduct Monitoring and Evaluation activities in their program or project interventions. Similarly, health projects that are funded by non-governmental organizations that work with ministry of health follow Monitoring and Evaluation system of the organization.

1.2 Background of the Organization

Ministry of Health (MoH) is a government ministry of Ethiopia, responsible for public health concerns. Its head office is on Sudan Street in Addis Ababa. The ministry has a total of more than 1000 staffs. The Ministry has 1minister, 3 state of ministers, 3 general

directorates and 25 directorates. The study only focused on total of 96 project focused employees working on Monitoring and Evaluation programmes with different health projects implemented at different capacities from ten directorates namely: Medicine and Medical Equipment, Policy plan, Monitoring and Evaluation, Mothers and Child Health, Disease Prevention And Control, Health Extension and Primary Health Services, Hygiene and Environmental Health, Women, Youth And Children Affair, Human Resources Development, Finance and Procurement, Partnership and Cooperation Directorate.

The study provides information on the Assessment of Factors Associated to Monitoring and Evaluation System of the organization.

1.3 Statement of the Problem

Monitoring and Evaluation when carried out correctly and at the right time and place are two of the most important aspects of ensuring the success of many projects. Unfortunately, these two although known to many project developers tend to be given little priority and as a result they are done simply for the sake of fulfilling the requirements of most funding agencies without the intention of using them as a mechanism of ensuring the success of the project.

However, organization's projects mostly failed to attain their goals and objectives because of inadequate and weak Monitoring and Evaluation practices. Conducting project Monitoring and Evaluation requires well qualified staff with sound knowledge and expertise in the area. Besides, this organization needs to have good infrastructure for conducting M & E, as project Monitoring and Evaluation is so critical to the success of the project. There are many reasons why a project fails, and understanding them will give us insights into how to avoid future failures (Birhanu, 2010).

Callistus and Clinton (2016) identified various factors that inhibit projects effectiveness, weak institutional capacity, limited resources and budgetary allocations for monitoring & evaluation, weak linkage between planning, budgeting and monitoring & evaluation, weak demand for and utilization of Monitoring and Evaluation results and poor data quality, data gaps and inconsistencies presented a challenge to project delivery in Ghana (Callistus & Clinton, 2016).

Lack of proper training on M & E and inappropriate tools inhibit proper Monitoring and Evaluation. The study found that untrained staff will have a challenge in implementation of M & E thus poor results whereas trained and knowledgeable teams or stakeholders are key in ensuring quality M & E and implementation of all projects on keys issues like quality feedback and information on program planning and design(Yusuf, Muchelule; Otonde, Mbawi Geoffrey; Achayo, 2017).

Different researchers indicated that there was a gap in stakeholders' involvement and there was poor participation on M & E system. In addition, adequate information is not provided to the stakeholders' pertaining projects and thus stakeholder participation was poor in CDF projects. On the other hand, there was a challenge in involving of staff in the process of its M & E sharing of the disseminated result (Management, Tesfaye, No, & Teklemariam, 2019).

The study done by Njama (2015) indicated that there was no independency in the budgetary decisions for the Monitoring and Evaluation unit and utilization of the funds. In addition, allocation of insufficient financing is a major factor in poor maintenance of M & E processes which, in turn, is often cited as a reason for project failure (Njama, 2015).

 Training can influence on the effectiveness of M & E. The study done by (Joseph Kimani Mwangi, 2015) revealed that an increase in one unit of technical competency of the Monitoring and Evaluation team accounted for 28% increase in effectiveness of the Monitoring and Evaluation programs. On the other hand, a study done on effectiveness of M& E by (Mutua, 2015) indicated that since the committee of the project team members were not trained on Monitoring and Evaluation of projects, the effectiveness of M & E was not effective.

A study done by (Njama, 2015) indicated that stakeholders' participation has a positive influence on effectiveness of M & E system. However, it was noted that participation is only limited to some lower level activities and stakeholders are not adequately involved in

key areas and higher level activities. Decreased stakeholders' participation results to decreased in effectiveness of M & E system.

A study done by T. Zergibachew (2019) indicated that the current M & E practices applied in the ISSD projects are, field visit, project reports, and no any other extra M & E practices identified, out of four M&E tools identified was poor, this was due to the challenges facing the M&E practice, including low budget allocated by the managers for M & E activities in the projects, also there was a serious problem of absence of qualified technical experts on M&E, low community participation is also another challenge, whereas communities are not fully participated in designing, implementing, monitoring and evaluating of the project in whole project life. In addition, there was lack of regular trainings and capacity building program and data management, given to data collectors for whom related to the M & E, so as to have adequate skills or capabilities on how to monitor and evaluate the projects in an effective way and also poor back stopping or formal field visit as part of M & E tool. It was proposed on the use of participatory approach, that seeks to involve local communities and other key stakeholders(T. ZERGIBACHEW, 2019).

According to Mikias et al. (2017), limitation of knowledge management for the utilization of M & E purpose of programme implementation is another gap found from their research.According to the research, majority of the key informants asserted that M & E knowledge creation, sharing & dissemination is not yet in practice in the organization. Moreover, the study showed poor access to and organization of the M & E technical resources and tools needed to plan and conduct program monitoring and evaluation. (Mikias, 2017).

A lot of donors' resources are provided to NGOs in Ethiopia to implement different health projects. Despite the huge amount of resources provided to the NGOs to implement various health projects and the fact that these projects play a significant role in the fight against poverty in the community, it is highly significant to assess clearly how Monitoring and Evaluation have been done on those projects which have been implemented by NGOs. The preliminary research reviewed by the student researcher shows that problems have occurred due to lack of expertise due to inadequate training, inadequate management

information system, lack of favorable enabling environment, lack of well-designed Monitoring and Evaluation indicators and lack of baseline data on those projects.

Annual reports indicated the presence of gaps in Monitoring & Evaluation.However, there is no research done on this area.
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Therefore, the purpose of this study is Assessment of Factors Associated to Monitoring and Evaluation System in the ministry and to forward possible solutions by raising the following core questions:

1.4 Basic Research Questions

1. Is there Staff Training on Monitoring & Evaluation?
2. Does Stakeholder's Participate in Monitoring & Evaluation System
3. Is there Budget Allocation for Monitoring & Evaluation System?

1.5 Objectives

1.5.1 General Objective

The general objective of this study is Assessment of Factors Associated to Monitoring and Evaluation System: Ministry of Health

1.5.2 Specific Objectives.

Specifically, the objectives of the study include the following:
1. To assess Staff Ttraining on Monitoring & Evaluation
2. To assess Stakeholder's Participation on Monitoring & Evaluation System
3. To assess Budget Allocation for Monitoring & Evaluation

1.6 Significance of the Study

This finding may help Ministry of Health's governing body to pin point Assessment of Factors Associated to Monitoring and Evaluation System. Furthermore, the findings of the study will contribute to health professionals in Monitoring and Evaluation of development projects/programs and to development policy makers. The study will also help as empirical

inputs for the improvement of the existing problems related to M & E system of health projects. It may further serve as reference for other interested researcher who wants to engage in similar topic in different contexts and/or development projects/programs. It will be important for development practitioners to provide research-based informed knowledge and skills for M & E of development projects. In addition, the empirical findings may serve as a starting tool for further studies on similar topic in different context or on different subjects in any parts of the country.

1.7 Delimitation (Scope of the Study)

Delimitation of the study refers to the boundaries of the study. The study was carried out in Addis Ababa, Ethiopia. The organization where the research study carried out was Ministry of Health of Ethiopia. The study comprised of a total of 96 project focused employees working with different health projects implemented at different capacities from 10 directorates namely: Medicine and Medical Equipment, Policy plan, Monitoring and Evaluation, Mothers and Child Health, Disease Prevention And Control, Health Extension and Primary Health Services, Hygiene and Environmental Health, Women, Youth and Children Affair, Human Resources Development, Finance and Procurement and Partnership and Cooperation Directorates. The reason behind selecting these programs is that they directly practice with Monitoring and Evaluation of health programmes.

1.8 Definition of Significant Terms used in the Study

Effectiveness of Monitoring and Evaluation System: The measure or the ability of M & E system to meet its intended or set objectives. It is the ability of the system to produce expected and relevant findings or results.

Health project: A project has a defined beginning and an end. Artto et al (2006) defined a project as a unique entity that aims at a previously defined goal, constitutes of complex interrelated tasks, and is limited by time, costs and its scope. A health project is defined as a set of interrelated tasks that are geared towards ensuring the wellbeing of people.

Evaluation: Evaluation is the episodic or periodic assessment, usually midterm of an ongoing project and after completion of a project to determine its actual impact against the expected impact,efficiency, sustainability and effectiveness.

Monitoring: Monitoring is the routine continuous tracking of the key elements of the project implementation process, inputs activities and outputs through methods like record keeping and regular reporting.

Stakeholders' participation: The process where organizations involve people who may be affected by decisions it makes or can influence the implementation of its projects.

Budget allocation: the act of providing resources (monetary, time or expertise) towards a given course/project.

1.9 Limitation of the Study

The research was limited contextually to the factors that affect the effectiveness of Monitoring and Evaluation. This might have limited the scope of the factors that the researcher could have assessed in relation to their influence on Monitoring and Evaluation systems. The research was further limited geographically to health programs that are found in Ministry of Health head office only. This might have impeded the number and variability of the respondents that the study could have targeted. Some respondents were unavailable and others didn't have enough time to give required information due to their busy schedule which hindered effective data collection and findings. However, the researcher addressed this problem by making a follow-up to allow them respond at their most convenient time.

Data collection, analysis and other activities during the study required huge time & financial outlays largely due unforeseen activities which were not budgeted and this may have impeded the effectiveness of the study. Lastly, the research might have been limited by aspects of confidentiality and availability of the respondents. The researcher observed that some respondents were unwilling to avail their feedback due to fear of victimization from their superiors.

1.10 Organization of the paper

The research covered five chapters. The first chapter deals with the introductory part which includes: background of the study, background of the organization, statement of the problem, basic research questions, objectives of the study, significance of the study, delimitation (scope of the study), limitation of the study and organization of the paper.

The second chapter focused on the review of related literature that provides about theoretical review, empirical review, and conceptual frame work.

The third chapter consisted of the research design and methodology used in the study that treats introduction, research design, population and sampling technique, types of data and tools/instruments of data collection, validity and reliability of research instruments, procedures of data collection, methods of data analysis and ethical consideration

The fourth chapter provided data presentation, analysis and interpretation, introduction, response rate, demographic information of the respondents, independent variables information, dependent variable information, inferential statistics, discussion of the findings.

Finally, chapter five presented conclusion & recommendations that included summary of findings, conclusions and possible recommendations followed by references and appendix.

CHAPTER TWO

LITERATURE REVIEW

Intrroduction

This chapter sought to present a review of relevant literature on Assessment of Factors Associated to Monitoring and Evaluation System health projects in relation to the research questions being analyzed. The literature review was guided by the three objectives of the study, that is to assess Staff Ttraining on Monitoring & Evaluation, to assess Stakeholder's Participation on Monitoring & Evaluation System, to assess Budget Allocation for Monitoring & Evaluation.Moreover, the literature looked at theoretical and empirical reviews that form the basis of the subject under study and finally the section concluded with a conceptual framework.

2.1 Theoretical Review

The theoretical framework is the "blueprint" for the entire research inquiry. It serves as the guide on which to build and support a research study, and also provides the structure to define how to approach a research philosophically, epistemologically, methodologically, and analytically as a whole. It relates to the philosophical basis on which the research takes place and forms the link between the theoretical aspects and practical components of the problem under investigation (Grant & Osanloo, 2014).

2.1.1 Definition of Monitoring and Evaluattion

2.1.1.1 Monitoring

Monitoring refers to ongoing assessment of our progress. It should be set up as part of our routine programme management and is ideally done by both programme and community members together. It uses the record systems built into the programme (Lankester & Grills, 2019).

2.1.1.2 Evaluattion

.*Evaluation* refers to a systematic review of the programme outcomes and impact often at the end of a funding cycle. It often involves an outside evaluation team (Lankester & Grills, 2019).

Therefore, Monitoring and Evaluation (M&E) are the techniques that are used to find out how well health programme is achieving what it set out to do. We will originally have set objectives, i.e. the results we are aiming to achieve and may have recorded on the logframe. M & E enables us to see how effectively we have reached those objectives. The techniques of M & E are one way to measure success. (Lankester & Grills, 2019).

Programmes and projects with strong Monitoring and Evaluation components tend to stay on track. Additionally, problems are often detected earlier, which reduces the likelihood of having major cost overruns or time delays later (Nations & Programme,2009).

2.1.2 Importance of Monitoring and Evaluating the Health Programme

To the community
M & E helps the community to see how the programme is working, and shows the benefits it is bringing. Community members will work with the project team in the process. The programme will also regularly feed M & E reports back to the community as a means of promoting understanding of the whole process. Findings and results will need to be presented in such a way that the community sees the benefits (and problems) and is motivated to participate in improvements.

To donors, sponsors and a wider audience
In practice, evaluations are often carried out because donors want confirmation that their money is being well spent. But all stakeholders, programme, community, donors, and government should benefit from evaluation if it is well planned and carried out. An evaluation showing good results can help the programme to become better known and a model for other programmes. The programme team can use Twitter, Facebook and other forms of social media to make findings known to wider audiences.

To government

Governments may want to know what results the programme is achieving and whether it is reaching district and national targets.

2.1.3 The Components of Monitoring and Evaluating System

M & E system has four components: monitoring of inputs and activities; monitoring of outputs and outcomes; monitoring of risks and assumptions; and evaluation. Although the monitoring and the evaluation functions are closely related within the country office system, they are of a different nature and should be assessed separately (Nations, 2013)
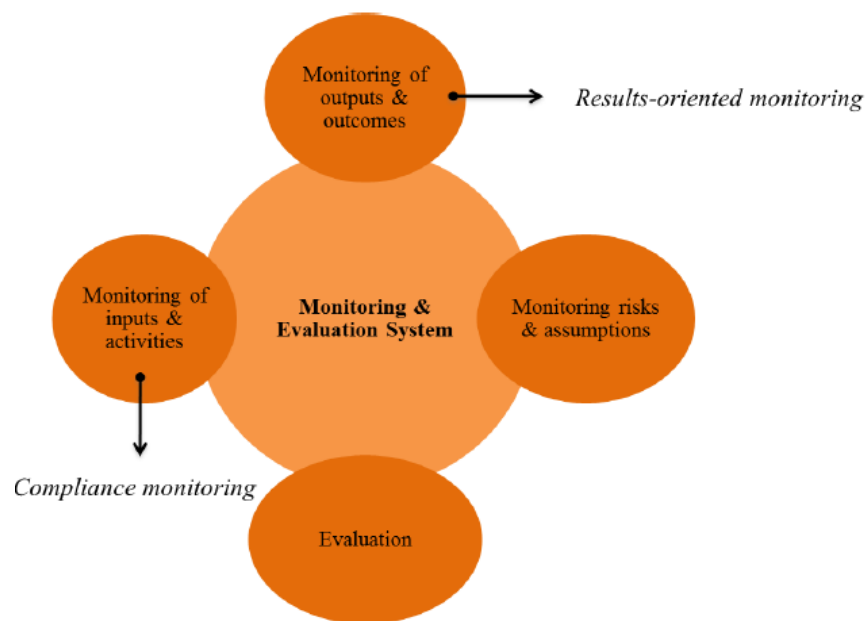
Figure 1: Components of the M & E System
(Source : Nations, 2013)

The **monitoring of inputs and activities** refers to the day-to-day monitoring tasks carried out by programme officers (Nations, 2013).

The **monitoring of outputs and outcomes is** closely associated to results-oriented monitoring, which, in turn, is an essential part of results-based management (Nations, 2013).

The **monitoring of risks and assumptions** is another important level to be covered. The improvement of risks management is one of the elements to take into account to strengthen results based management (Nations, 2013).

The **evaluation** component corresponds to the evaluation function within the country office and encompasses the process of planning, conducting and using the results of evaluation exercises (Nations, 2013).

2.1.4 Results-Based Management(RBM)

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

2.1.5 Framework for M & E of Health Systems Strengthening

The results framework for HSS Monitoring and Evaluation comprises four major indicator domains: 1) system inputs and processes, 2) outputs, 3) outcomes, and 4) impact. System inputs, processes and outputs reflect health systems capacity. Outputs, outcomes and impact are the results of investments and reflect health systems performance (Boerma et al., 2009).

Monitoring & Evaluation of health systems reform /strengthening

	Inputs & processes	Outputs	Outcomes	Impact
Indicator domains	Governance / Financing / Infrastructure / ICT / Health workforce / Supply chain / Information	Intervention access & services readiness / Intervention quality, safety and efficiency	Coverage of interventions / Prevalence risk behaviours & factors	Improved health outcomes & equity / Social and financial risk protection / Responsiveness
Data collection	Administrative sources: Financial tracking system; NHA Databases and records: HR, infrastructure, medicines etc. Policy data	Facility assessments	Population-based surveys: Coverage, health status, equity, risk protection, responsiveness	
		Facility reporting systems: Service readiness, quality, coverage, health status		
				Vital registration
Analysis & synthesis	Data quality assessment; Estimates and projections; Use of research results; Assessment of progress and performance; Evaluation			
Communi-cation & use	Targeted and comprehensive reporting; Regular country review processes; Global reporting			

Figure 2: Monitoring and Evaluation Framework for Systems Strengthening
(Source: Boerma et al., 2009)

2.1.6 Training of Staffs

Many people feel afraid of evaluation, especially those working at project level. There are good reasons for this. A key purpose of evaluation is to check that projects are being done well. As a result of evaluation, donors can stop or change the projects they fund and staff may lose or be asked to change their role. For those at the centre of the changes, this can be frightening! But another, higher purpose to evaluation is learning. When individuals or organizations become self-reflective, succeed at their job, spend money wisely and help young people effect positive change in their lives, this is ultimately what good children and youth development projects aim for. (Jacobs Foundation, 2011).

2.1.7 Stakeholder Participation

When stakeholders such as farmers and the extension are involved in all stages including the development of the results and activities to be monitored, the indicators that will be monitored, the type of data to be collected and how it will be collected, it leads to a more robust monitoring and evaluation. The involvement of stakeholders in PM & E however requires a lot of negotiation, prioritization of issues and strategic collection of data for PM&E. More often the question has been to what extent or at what level different stakeholders should be involved (Njuki, Chitsikie, & Sanginga, 2006).

2.1.8 Budget Allocation

Data collection, processing, analysis and reporting, as well as capacity building and field support must be costed in terms of time and resources. These costs will be incurred either by International Federation and National Societies and must be included in the operation budget.

Monitoring and Evaluation is a basic management activity and as such should be considered a proportion of time of all staff involved in implementation as well as regular office equipment, facilities, vehicles, travel etc. These are standard budget items for International Federation and National Societies, government and implementing partners and are usually not budgeted separately(International Federation of Red Cross and Red Crescent Societies, 2002).

2.2 Empirical Review

2.2.1 Training of Staffs

Human resource plays a vital role in monitoring andevaluation of public health programs and the project teams hould be composed of specialized staffs that are properly trained to conduct monitoring and evaluation. Properly trained staffs in Monitoring and Evaluation are very useful to programs as they understand the importance of monitoring and evaluation and cooperate to avail data for monitoring purposes. For Monitoring and Evaluation systems to be functional properly,advocacy strategies need to be developed and

supported within the organization. In addition, a culture to support Monitoring and Evaluation should be developed within the organization (Okello & Mugambi, 2015).

A study done by Nalianya Japheth, Micah and Dr. Stephen Wanyonyi Luketero indicated that human resource capacity in M & E influences performance of Maternal Health Projects. This was shown by a fairly strong coefficient correlation of 0.530 established between human resource capacity and performance of Maternal Health Projects (Micah & Luketero, 2017).

Hiring of qualified M & E personnel by organizations and Training & Development plays a vital role in improving the performance of the employees through inculcating the innovative work behaviors which helps in accomplishing non-routine cognitive jobs effectively and innovatively (Kithinji, Gakuu, & Kidombo, 2017; Sheeba & Christopher, 2020).Capacity building on Monitoring & Evaluation increased access on provision of health services to a moderate extent. Technical support increased the knowledge on Monitoring and Evaluation systems to a moderate extent. Core training packages increased the management capacity on provision of health care to a moderate extent (Ooko, Rambo, & Osogo, 2018).

The research conducted by (Joseph Kimani Mwangi, 2015) revealed that an increase in one unit of technical competency of the Monitoring and Evaluation team accounted for 28% increase in effectiveness of the Monitoring and Evaluation programs for Constituency Development Fund (CDF) projects in Laikipia West constituency. This was attributed to the multidisciplinary composition of the team where members of the Monitoring and Evaluation team composed of Accountants, Engineers, surveyors, teachers and other community members with diverse skills (Sulemana & Simon, 2018).

According to T. Zrgibachew (2019), it was indicated that there were lack of regular trainings and capacity building program and data management, given to data collectors for whom related to the M&E, so as to have adequate skills or capabilities on how to monitor and evaluate the projects in an effective way and also poor backstopping or formal field visit as part of M&E tool.

The study conducted by (Melat, 2018) indicated that, though the Authority under study had a dedicated M&E unit, it was not equipped and capacitated since the unit was not staffed well and was not self standing on the M&E system.

According to (Ermias, 2007), the finding found a critical lack of expertise and common understanding about monitoring and evaluation of projects implemented by the public organizations.

2.2.2 Stakeholder's Participation

An Assessment of Stakeholder's participation in Monitoring and Evaluation done by Mohammed Sulemana indicated that effective participation of stakeholders in M & E of projects and programmes can improve transparency, accountability, project and programme sustainability and ensure positive community level stakeholder attitude to projects. This can be achieved by increasing the level of participation of key stakeholders beyond information giving and consultation(Sulemana & Simon, 2018).

On the other hand, the study done by Ndirangu, C., & Gichuhi, D on influence of stakeholders' participation to successful completion of Constituency Development Fund (CDF) projects concluded that stakeholders' involvement should be a key consideration in planning of Constituency Development Fund (CDF) projects. According to the study, the respondents indicated that there was a significant positive stakeholders' involvement in regards to collecting views in project planning steps. There was also a conclusion that the stakeholders supported the Constituency Development Fund (CDF) (Ndirangu, C., & Gichuhi, 2019)

It is the people involved in a development intervention who will make it succeed or fail. Their participation in learning how to improve a project throughout its existence is fundamental. For project and partner staff, this means listening carefully and regularly to the views of different groups – including each other – about what is working and what is not, and hearing reasons for why problems exist and what needs to improve. Learning certainly requires more than only "listening". Opportunities need to be created for staff from the project and implementing partners and primary stakeholders to meet and analyse

their experiences with the project. A good M&E system provides and communicates data to help stakeholders groups analyse(Umhlaba, Development, & Services, 2017).

2.2.3 Budget Allocation

The study conducted by Naomi Nduta Njoroge revealed that allocation of financial resources for Monitoring and Evaluation process has been found basic to enable adequate and timely collection of quality and complete data which when appropriately utilized translates to improved performance (Njoroge, 2018).

In addition, the study done by Tengan Callistus & Aigbavboa Clinton indicated that factors such as weak institutional capacity, limited resources and budgetary allocations for monitoring & evaluation, weak linkage between planning, budgeting and monitoring & evaluation, weak demand for and utilization of Monitoring and Evaluation results and poor data quality, data gaps and inconsistencies presented a challenge to project delivery (Callistus & Clinton, 2016).

However, literatures indicated funds available for M & E of most of the county projects are not adequate, unplanned and that there is no timely disbursement (Victor & Otieno, 2017).

A study done by (Ermias, 2007), indicated that 6% of the respondents responded there was allotted separate budget for the M&E. On the other hand 14.18% of the respondents reported that they have no idea and 79.85% of the respondents reported that there is no separate budget allotted to the M&E activities.

2.3 Conceptual Framework

The conceptual framework is graphical representation of the survey and indicates the dependent and independent variables.

The dependent variable in this research is effectiveness of M & E of health projects which is the goal of any organizational entity with the mandate of bringing a project to life. Effective M & E is influenced by the following factors among others; training of staffs,

stakeholder's participation and budget allocation which are the independent variables as presented in the figure 3 below;

Independent variables   **Dependent variable**

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┌─────────────────────────────┐
│                             │
│                             │
│     Training of Staffs      │
│                             │
│                             │
└─────────────────────────────┘

┌─────────────────────────────┐                ┌─────────────────────────────┐
│                             │                │                             │
│                             │                │  Effectiveness of Monitoring │
│  Stakeholder's Participation │ ──────────────▶│        and Evaluation        │
│                             │                │                             │
│                             │                │                             │
└─────────────────────────────┘                └─────────────────────────────┘

┌─────────────────────────────┐
│                             │
│                             │
│     Budget Allocation       │
│                             │
│                             │
└─────────────────────────────┘
```
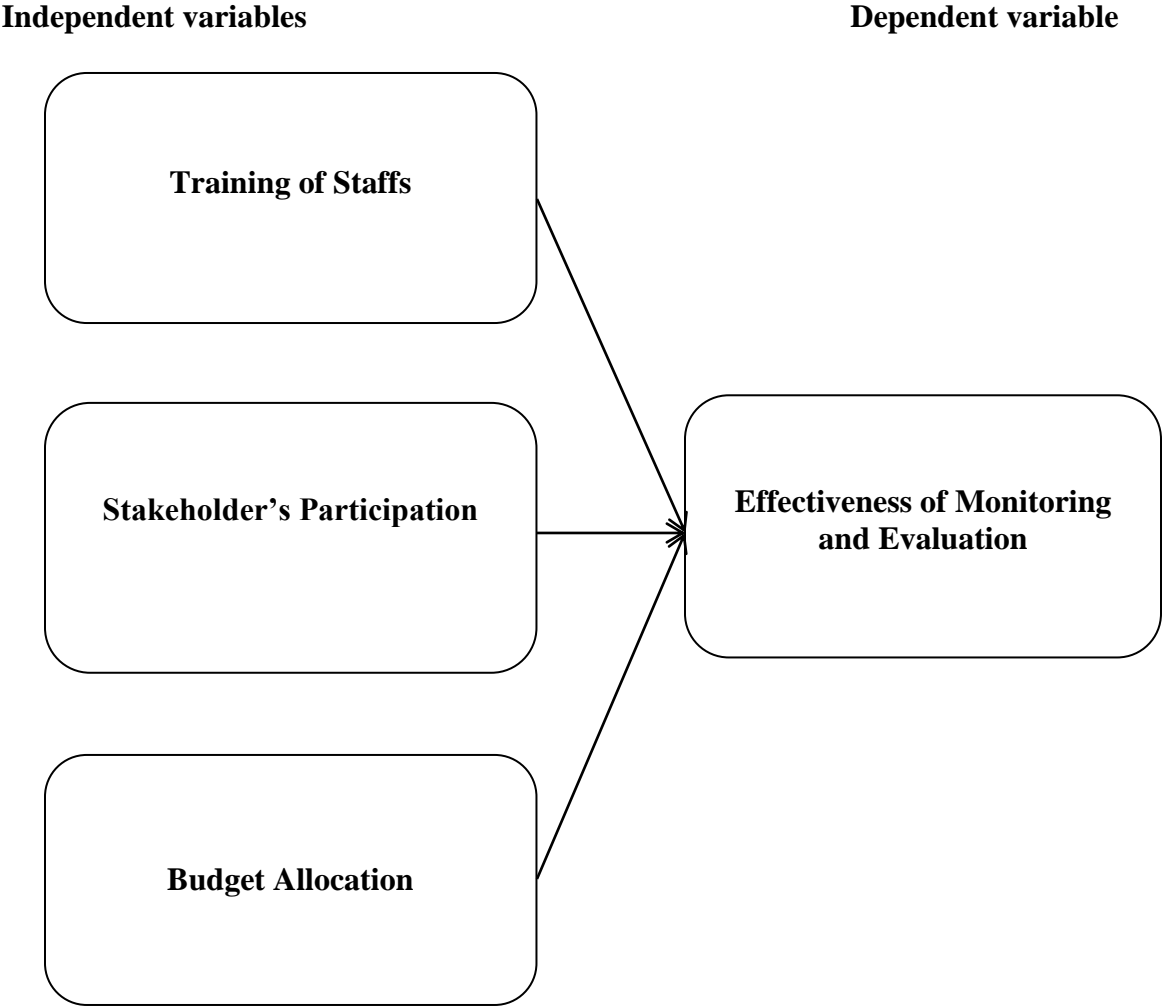
Figure 3: Conceptual Framework
(Source : Adopted from Njama, 2015)

CHAPTER THREE

RESEARCH DESIGN AND METHODOLOGY

3.1 Introduction

This chapter discusses the research methodology used in the study. It specifically addresses the following: research design, target population, sampling size and sampling procedure, data collection instruments, validity and reliability of research instruments, data collection procedure, data analysis techniques, ethical considerations.

3.2 Research Design

The study adopted descriptive type of research design as a main research design to realize and meet the intended objective. Descriptive research design is most appropriate when the research focuses on detailed description of the characteristics and features of the issue under investigation. The reason behind using descriptive research design is because the researcher is interested in describing the existing situation under study.

3.3 Population and Sampling Technique

3.3.1 Target Population

Target population or population of interest refers to the group of people of interest whom the researcher desires and intends to investigate. The target population for this study was staff employed by NGOs seconded to Ministry of Health to work on health projects. There are 96 employees working under Medicine and Medical Equipment, Policy Plan, Monitoring and Evaluation, Mothers and Child Health, Disease Prevention And Control, Health Extension and Primary Health Services, Hygiene and Environmental Health, Women, Youth And Children Affair, Human Resources Development, Finance and Procurement, Partnership and Cooperation directorates.

3.3.2 Sample Size and Sampling Procedure

The questionnaire was distributed to health & other professionals who know the concerned health projects during the specified time. The sample size considered all of the 96 employees that have been working in the above mentioned ten directorates.

3.4 Types of Data and Tools/Instruments of data collection

There are two types of research data collection, primary and secondary data collection. The primary data used in this study are collected through a questionnaire survey. The secondary data used in this research are different information obtained from the organization. A questionnaire is designed from literature review of various factors affecting effectiveness of M & E of health programmes.(Joseph Kimani Mwangi, 2015; Njama, 2015).

The study utilized primary data that was collected using semi-structured questionnaires that had closed-ended questions. The questionnaire consisted two parts. The first part asked about demographic information of the respondents while the second part contained questions about the three independent variables (training of , stakeholder participation and budget allocation) and the dependent variable (Effectiveness of M & E System).

3.5 Validity and Reliability of Research Instruments

3.5.1 Validity of Research Instruments

Validity is defined as the accuracy and meaningfulness of inferences, which are based on the research results. In other words, validity is the degree to which results obtained from the analysis of the data actually represents the phenomena under study (Golafshani, 2003). To check validity of the items, the researcher used that questionnaires were given to three colligues/experts those who have research experience in government organization. Then, vague words and ambiguous statements were corrected and necessary rearrangement and refinement of the questionnaire items was made. Some relevant items were added while irrelevant ones were discarded and some lengthy items were shortened. Unclear ideas were paraphrased based on the comments.

3.5.2 Reliability of Research Instruments

Reliability is defined as a measure of the degree to which a research instrument yields consistent results after repeated trials. A Cronbach alpha test was conducted to measure the internal consistency and reliability of the data collection instruments. Cronbach's Coefficient Alpha is computed using SPSS to determine how items correlate among themselves. Reliability of greater than 0.60 is acceptable for Social Science Research (Mugenda and Mugenda, 2003). The Cronbach's reliability coefficient was 0.856 which was good and therefore the instruments was deemed to be reliable. Table 3.1 below gives the reliability data obtained from SPSS data analysis on Cronbach alpha.

Table 1: Reliability Test Result

Variables	Cronbach's Alpha Values	Comments
Effectiveness of M & E	.831	Accepted
Training of Stafs	.842	Accepted
Stakeholders' Participation	.808	Accepted
Budget Allocation	.785	Accepted

3.6 Procedures of Data collection

The researcher administered the questionnaire personally to the respondents. The advantage of researcher administered questionnaires is that the questions can be clarified to the respondents during the interview. This ensured that the respondents understood the questions, thereby enabling the researcher to obtain the right kind of information required to meet the study objectives. A researcher-administered questionnaire is also a more efficient method of data collection in terms of research time.

3.7 Methods of Data Analysis

The data collected was classified into sub-samples then be edited and cleaned to reduce ambiguity. The cleaned data was coded into SPSS version 20 for subsequent data analysis through descriptive statistics. Quantitative statistical techniques were used to describe and summarize data. The results were then interpreted in the form of frequencies and

percentages. Descriptive statistics were represented using means, standard deviation and percentages.

3.8 Ethical Consideration

The study was conducted in an ethical manner. During the actual data collection time, permission was obtained from Saint Mary's University College, School of Graduate Studies to conduct the study and an official letter was written to Federal Ministry of Health. Furthermore, the researcher explained to the respondents the purpose of the study and assured them that the information given would be treated as confidential, and their names would not be divulged. Informed consent was sought from all the participants that agreed to participate in the research.

CHAPTER FOUR

DATA PRESENTATION, ANALYSIS AND INTERPRETATION

4.1 Introduction

This chapter presents data analysis and interpretation of the research findings. The chapter is presented in three different sections. All three sections present study responses on factors that affect Monitoring and Evaluation, Ministry of Health in Ethiopia. First, the research response rate has been computed and presented. Secondly, the demographic information of the participants has been described. Thirdly, the findings on the three key objective areas of the study have been presented and interpreted. The responses were analyzed using descriptive statistics.

4.2 Response Rate

A total of 96 questionnaires which had been administered to the interviewees, 90 of them were returned for analysis. This translates to 93.8 percent return rate of the respondents. A response rate of more than 80% is sufficient for a study by all experts in data analysis. Table 4.1 shows the response rate.

Table 2: Response Rate

Category	Frequency	Percentage (%)
Responded	90	93.8
Did not respond	6	6.2
Total	**96**	**100%**

Source: Survey data, 2021

4.3 Demographic Information of the Respondents

To conduct this study, 96 questionnaires were distributed for respondents. Among them, 90 respondents participated in filling the questionnaires and 6 were not returned. Accordingly, the 90 respondents were requested to provide information on their gender, age, level of education and work duration.

Table 3: Demographic Information of the Respondents

	Category	Frequency	Percent
Gender	Male	65	72.2
	Female	25	27.8
	Total	**90**	**100.0**
Age group	24-30	7	7.8
	31-35	33	36.7
	36-40	15	16.7
	41-45	16	17.8
	46-50	11	12.2
	51-55	4	4.4
	56-60	3	3.3
	>60	1	1.1
	Total	**90**	**100.0**
Educational level	Diploma	2	2.2
	BSc degree	21	23.3
	MSc degree	62	68.9
	Phd degree	5	5.6
	Total	**90**	**100.0**
Years of service	<3	4	4.4
	3-5	9	10.0
	6-8	24	26.7
	9-11	28	31.1
	12-14	7	7.8
	>14	18	20.0
	Total	**90**	**100.0**

Source: Survey data, 2021

From the findings, majority of the respondents, 72% (65) were male while 28% (25) of the respondents were female. The results indicated that more than two-third of the employees that were involved in filling the questionnaires were male as compared to that of female.

From the findings, majority of the respondents, 53.4% (48), indicated that they were in the age range of 31-40 years. The second larger age group, 27% (30) were between 41-50 years while 7.8% (7) and 8.9% (8) of the respondents indicated that they were of age 24-30 years and above 50 years respectively. The findings therefore indicated that majority of employees at Ministry oh Health are at their most productive age group and are mature people who are advantaged with knowledge in M & E and thus can help in determining effectiveness of Monitoring and Evaluation system of health projects.

From the findings, almost three-fourth of the respondents, 74.5 % (67), indicated that they had achieved postgraduate as their education level while 23.3% (21) indicated that they had attained undergraduate level. Only two respondents (2.2%) indicated that had diploma as the level of education. The findings implied that most of the employees of Ministry oh Health had obtained postgraduate and undergraduate as their highest education level indicating had the knowledge, capacity, skills and management expertise that helps to conduct M & E activities effectively.

From the findings, majority of the respondents, 31.1% (28) stated that they had worked for Ministry of Health for a period of 9-11 years followed by respondents whose time lagged between 6-8 years these were 26.7% (24). Other respondents, 20% (18) and 10% (9),7.8% (7) stated that they had worked for Ministry of Health for a period of >14 years, 3-5 years and 12-14 years respectively. Only four respondents (4.4%) indicated that they had worked for less than 3 years. The results indicated that most employees, 95.6% (86), had worked in Ministry of Health for a long duration of 3 and above years and thus had sufficient information on the organization's M & E processes, Training of Staffs, Stakeholder's Participation and Budget Allocation which influences effectiveness of Monitoring and Evaluation systems.

4.4 Training of Staffs on Monitoring and Evaluation

The study identified staff training as critical pillar for the effectiveness of Monitoring and Evaluation of health projects. The study tried to view the availability of training on the monitoring and evaluation, the researcher further investigated the level of training in

Monitoring and Evaluation that the respondents had. Similarly the study found it valuable to assess the extent to which staff training is important for the effectiveness of Monitoring and Evaluation of health projects.

The final objective in this study was to assess staff training on Monitoring and Evaluation. The study used a scale of 1 – 5 where, 1= strongly disagree, 2 = disagree, 3 = neutral, 4 = agree, 5 = strongly agree.

From the findings, majority of the respondents agreed with the statements that "Trainings are important in enhancing M & E knowledge, Staff members in Monitoring and Evaluation have adequate technical knowledge in the subject matter, adequate training is provided on Monitoring and Evaluation, and there is adequate M & E experience among staffs with a mean score of 4.51, 4.41, 4.34 and 4.31 respectively. Moreover, majority also agreed that the training program brought about knowledge change in M & E staffs, training was given in system that assist staff in capturing, managing and analyzing data and Staff members in Monitoring and Evaluation are competent enough in handling M & E tasks with a mean score of 4.23, 4.10, 4.06 respectively. Some of the respondents were not sure with the statements that staff competency is always upgraded as per necessity, facilities for Monitoring and Evaluation program are accessible at the required time and Monitoring and Evaluation team is equipped with necessary facilities with a mean score of 3.03, 3.02 and 3.01 respectively.

The findings are also indicated that some of the respondents disagreed with the statements that the office allocates sufficient staff time for M & E activities and there is a formal Monitoring and Evaluation training possess with a mean score of 2.43 and 2.28 respectively.

The results therefore indicate that most staff employees working in the Ministry of health disagreed that the office allocates sufficient staff time for M & E activities and there is a formal Monitoring and Evaluation training possess. Therefore, it is necessary to allocate sufficient staff time for M & E activities and there should be a formal Monitoring and Evaluation training possess.The results were presented in table 4.3.

Table 4: Training of Staff on Monitoring and Evaluation

Training of Staffs	Mean	Std. Deviation
There is adequate M & E experience among staffs	4.31	.554
Training was provided on Monitoring and Evaluation	4.34	.584
Trainings are important in enhancing M & E knowledge	4.51	.503
Staff members are competent in handling of Monitoring and Evaluation tasks	4.06	.433
Staff competency is upgraded as per necessity	3.03	.485
Staff members in Monitoring and Evaluation have technical knowledge in the subject matter	4.41	.628
Monitoring and Evaluation team is equipped with necessary facilities	3.01	.571
Facilities for Monitoring and Evaluation program are accessible at the required time	3.02	.670
The office allocate sufficient staff time for M & E activities	2.43	.960
The training program brings about knowledge change in M & E staffs	4.23	.601
Training is given in system that assist staff in capturing, managing and analyzing data	4.10	.654
There is a Formal Monitoring and Evaluation training possess	2.28	1.142

Source: Survey data, 2021

4.5 Stakeholder's Participation and Monitoring and Evaluation System

The findings pointed out the extent to which respondents agree or disagree with the following statements concerning stakeholder's participation onMonitoring and Evaluation system of the organization's projects. The responses were rated on a five point Likert Scale where: 5 – Strongly agree, 4 – Agree, 3 - Neutral, 2 – Disagree, 1 – Strongly disagree. table 4.4 shows the frequency and percentages.

A question was asked to respondents if there was stakeholders' participation in community project identification and selection. The findings showed that 39(43.3%) of respondents were strongly disagree followed by 34(37.8%) of respondents who disagree, 2(2.2%) of respondents agreed that there was stakeholders participation in community project identification and election, 1(1.1%) of respondents were strongly agree and 14(15.2%) of posed were neutral. Therefore, the findings indicated that there was stakeholders participation.

Similarily, respondents were asked if stakeholders were involved in Planning, Monitoring and Evaluation programs. The study findings showed that 23(25.6%) of respondents were strongly disagree following 40(44.4%) of respondents who disagree, 12(13.3%) of respondents agreed and 15(16.7%) neutral.

As it can be seen from table 4.4 item (3) below, respondents were asked whether there was adequate stakeholder group representation in the Monitoring and Evaluation team. They provided their answere as 23(25.6%) agree, 19(21.1%0 disagree and 48(53.3%) neutral.

As it can be seen from the same table, item (4) that 15(16.7%) of respondents strongly disagree, 37(41.1%) disagree, 24(26.7%) neutral, 13(14.4%) agree and 1(1.1%) strongly agree. The implies that stakeholders didn't participate in identifying and problem solving related activities of M & E programs.

Findings from item(5) of table 4.4 show that out of the total respondents, 15(16.7%) strongly disagree, 33(36.7%) agree, 28(31.1%) neutral, 13(14.4%) agree and 1(1.1%) strongly disagree. The result indicated that stakeholders participation was not well devised at the planning stage to avoided disputes.

Findings from item(6) of table 4.4 show that, 31(34.4%) strongly agree, 57(63.3%) agree and 2(2.2%) neutral. The finding indicated stakeholders were helping to improve M & E programs.

It can be seen from the same table, item (7) below, respondents were asked whether the project team undertook capacity building of stakeholders or not, the result indicated that, 4(4.4%) strongly agree, 29(32.2%) agree, 31(34.4%) neutral, 21(23.3%) diagree and 5(5.5%) strongly disagree. The result indicated that respondunts were reluctant to give the right answere for the question that the project team undertakes capacity building for stakeholders.

Respondents were also asked that whether there was resources, and time that could be enough for stakeholders' engagement. The findings show that 7(7.8%) strongly disagree, 48(53.3%) disagree, 24(26.7%) neutral,6(6.7%) agree and 5(5.6%) strongly agree. The finding indicated that there was noadequate resources, and time that could be enough for stakeholders' engagement.

Therefore, as it has been indicated from the findings, it is good to have adequate resources and time in place, it is advisable to involve stakeholders at the planning stage, stakeholders to participate in identify and solve problems related to M & E programs, involve stakeholders in the community project identification and election stages.

Table 5: Stakeholder's participation and Monitoring and Evaluation(n=90)

S. No	Questions	Strongly Aagree		Agree		Neutral		Disagree		Strongly Disagree	
		No	%	No	%	No	%	No	%	No	%
1	There is stakeholders participate in community project identification and election	1	1.1	2	2.2	14	15.2	34	37.8	39	43.3
2	Stakeholders are involved in planning of Monitoring and Evaluation programs	-	-	12	13.3	15	16.7	40	44.4	23	25.6
3	There are adequate stakeholder group representation in the Monitoring and Evaluation team	-	-	23	25.6	48	53.3	19	21.1	-	-
4	Stakeholders participate in identify and solve problems related to m & E programs	1	1.1	13	14.4	24	26.7	37	41.1	15	16.7
5	Stakeholders participation is well devised at the planning stage to avoided disputes	1	1.1	13	14.4	28	31.1	33	36.7	15	16.7
6	Stakeholders are helping to improve M & E programs	31	34.4	57	63.3	2	2.2	-	-	-	-
7	The project team undertakes capacity building for stakeholders	4	4.4	29	32.2	31	34.4	21	23.3	5	5.5
8	There is adequate resources, and time that can be enough for stakeholders' engagement	5	5.6	6	6.7	24	26.7	48	53.3	7	7.8

Source: Survey data, 2021

4.5.1 Stakeholder's Participation and Monitoring and Evaluation System

The survey found out 2% (figure 4.1) of respondents' strongly disagreed, 3% strongly agreed that stakeholders influence decision making and problem solving processes during M & E programs.while 20%, 25% and 50% of respondents agreed, disagreed and held neutral position to the influence of stakeholders on decision making and problem solving process during m & E programs. Hence, it is evident from the analysis that ¼ of the respondents disagreed with the statement. Similarily, half of respondents took undecided position whether stakeholders influence decision making and problem solving processes during M & E programs or not. Thus, it signifies the need to participate stakeholders influence on decision making and problem solving processes during M & E programs.
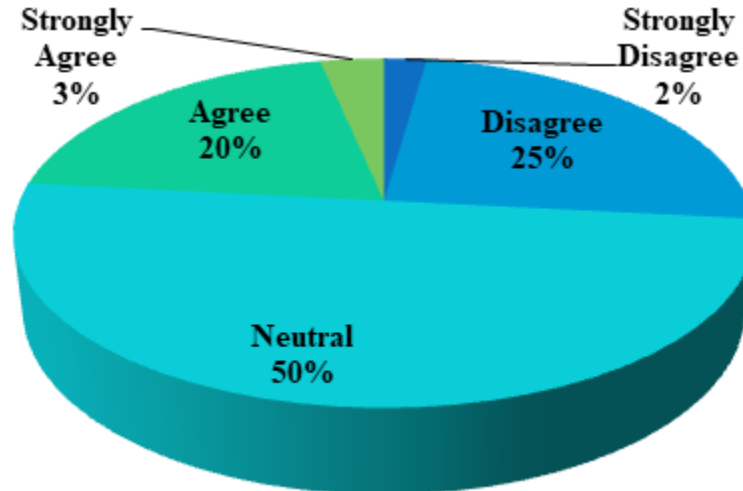
Figure 4: Stakeholders' Influence Decission Making and Problem Solving
Source: Survey data, 2021

4.5.2 Stakeholder's Participation and Monitoring and Evaluation System

The survey analysis show that 38.9 % (figure 4.2) of respondents strongly agreed and 34.4% agreed that stakeholder's engagement helped for M&E while 17.8% neutral, 5.6% disagree and 3.3% strongly disagree. Thus, the engagement of stakeholders for effective M & E program is required.
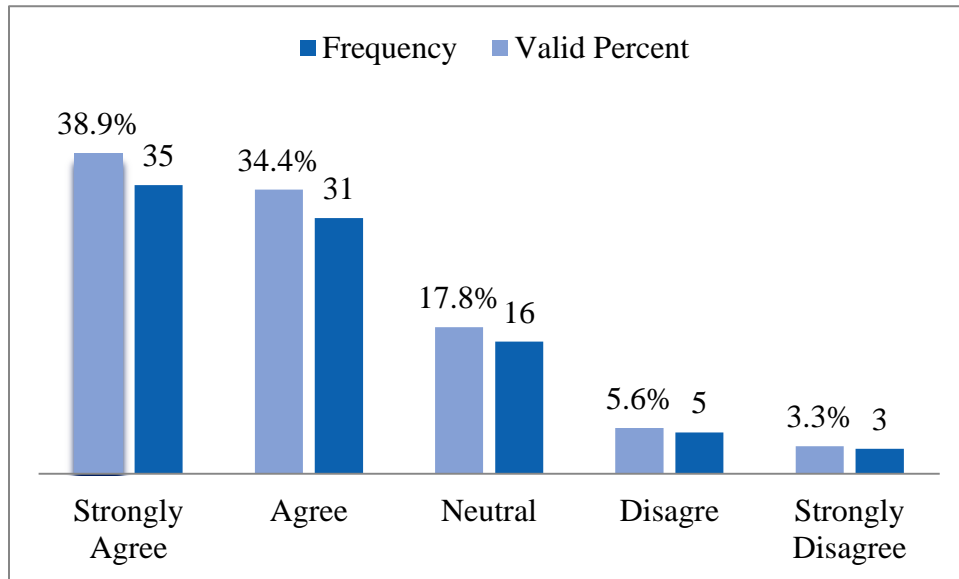
Figure 5: Stakeholders' Engagement in M & E Programs

Source: Survey data, 2021

4.6 Budget Allocation and Monitoring and Evaluation

The findings pointed out the extent to which respondents agree or disagree with the following statements concerning M & E in relation to the organization's projects. The responses were rated on a five point Likert scale where: 5 – Strongly agree, 4 – Agree, 3 - Neutral, 2 – Disagree, 1 – Strongly disagree. table 4.5 shows the frequency and percentages.

Regarding to budget allocation for Monitoring and Evaluation, a question was asked to respondents if there was allocated budget for M & E activities, accordingly,32(35.56%) strongly agree, 51(56.7%) agree and 7(7.5%) neutral.

Moreover, respondents were asked that whether the budget allocated for the M & E activities was released without delay, the results indicated that; 4(4.4%) strongly agree, 24(26.7%) agree, 47(52.2%) neutral and 7(7.8%) disagree. Therefore, majority of respondents were reluctant to give the right answer.

Findings from item(3) of table 4.5 show that, 3(3.3%) strongly disagree, 29(32.2%) agree, 24(26.7%) neutral, 33(36.7%) disagree and 1(1.1%) strongly disagree. Therefore, the result indicated that there was no clear accountability of the budget utilization in the M & E program.

As it can be seen from the same table, item (4) below, respondents were asked whether expenditures for M & E activities are exploited properly or not, the result indicated that, 35(38.9%) agree, 23(25.6%) neutral, 31(34.5%) disagree and 1(1.1%) strongly disagree. Therefore, the results indicated that expenditures for M & E activities were exploited properly. Eventhough, majority of respondents agree for the statement, more than 1/3 of respondents disagreed that expenditures for M & E activities are exploited properly. Thus, it is needed to exploit expenditures for M & E activities.

Findings from item(5) of table 4.5 show that,31(34.4%) strongly agree, 39(43.3%) agree, 17(18.9%) neutral 3(3.3%) disagree. Therefore, the result indicated that more that ¾ of respondents agreed that there was an understanding of donor protocols that expenditure affects the flow of funds from the donors.

Findings from item(6) of table 4.5 show that, 4(4.4%) strongly agree, 17(18.9%) agree, 43(47.8%) neutral and 26(28.9%) disagreed that the organization ensures that funds for M & E activities are provided on time. Almost half of the respondents were neutral. Similarily, the second majority of respondents disagreed on the issue. Therefore, the result implies that the organization did not ensure that funds for M & E activities were provided on time. Thus, it is needed to ensure that funds for M & E activities to be provided on time.

Findings from item(7) of the same table show that, 10(11.1%) agree, 26(28.9%) neutral, 39(43.3%) disagree and 15(16.7%) strongly disagree. Majority of the respondents disagreed that M & E program submits the budget report on time. Therefore, it is required to submit budget reports on time.

As it can be seen from the same table, item (8) below, respondents were asked whether there was reduced organization bureaucracy and management to approve and release

budget or not, the result indicated that, 1(1.1%) strongly disagree, 7(7.8%) agree, 31(34.4%) neutral, 42(46.7%) disagree and 9(10%) strongly disagree. Therefore, majority of the respondents agreed that there was no reduced organization bureaucracy and management to approve and release budget. Thus, it is needed to reduce organization bureaucracy and management to approve and release budget.

Findings from table 4.5 item(9) show that out of the total respondents, 25(27.8%) strongly agree, 39(43.3%) agree, 23(26.6%) neutral and 3(3.3%) disagree. The finding indicated that majority of the respondents agreed that the organization has the relevant technical and managerial capacity to manage budget. Therefore, it is required to strengthen and keep the technical and managerial capacity to manage the budget.

Findings from item(10) of the same table show that, 34(37.8%) strongly disagree, 28(31.1%) agree, 21(23.3%) neutral and 7(7.8%) disagree. The study findings indicated that majority of the respondents agreed that budget allocation influenced the M & E system in the organization.This implies that allocation of enough budget would influence for effective M & E system.

Table 6: Budget allocation and Monitoring and Evaluation (n=90)

S.No	Questions	Strongly Agree		Agree		Neutral		Disagree		Strongly Disagree	
		No	%	No	%	No	%	No	%	No	%
1	The organization allocates adequate budget for M & E activities	32	35.6	51	56.7	7	7.8	-	-	-	-
2	The budget allocated for the M & E activities is releases without delay	4	4.4	24	26.7	47	52.2	7	7.8	-	-
3	There is clear accountability of the budget utilization in the M & E program	3	3.3	29	32.2	24	26.7	33	36.7	1	1.1
4	Expenditures for M & E activities are exploited properly	-	-	35	38.9	23	25.6	31	34.5	1	1.1
5	Understanding of donor protocols on expenditure affects the flow of funds from the donors	31	34.4	39	43.3	17	18.9	3	3.3	-	-
6	Organization ensures that funds for M & E activities are provided on time	4	4.4	17	18.9	43	47.8	26	28.9	-	-
7	M & E program submits the budget report on time	-	-	10	11.1	26	28.9	39	43.3	15	16.7
8	There is reduced organization bureaucracy and management to approve and release budget	1	1.1	7	7.8	31	34.4	42	46.7	9	10
9	The organization has the relevant technical and managerial capacity to manage budget	25	27.8	39	43.3	23	26.6	3	3.3	-	-
10	Budget allocation influence effective M & E system in the organization	34	37.8	28	31.1	21	23.3	7	7.8	-	-

Source: Survey data, 2021

4.7 Status of Monitoring and Evaluation

Table 7: Overall Status of Monitoring and Evaluation

Overall Status of Monitoring and Evaluation		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Poor	3	3.3	3.3	3.3
	Low	3	3.3	3.3	6.7
	Moderate	2	2.2	2.2	8.9
	Good	37	40.2	41.1	50.0
	Very Good	45	48.9	50.0	100.0
	Total	90	97.8	100.0	

Source: Survey data, 2021

Respondents were asked for the overall status of M & E system of their organization. Accordingly, half 50% (45) of the respondents responded that their organization is very good, 41% (37) good, 2.2%(2) moderate, 3.3%(3) low and 3.3%(3) poor.

4.8 Discussion of the Findings

Respondents were in agreement with the statements that "Trainings are important in enhancing M & E knowledge, Staff members in Monitoring and Evaluation have adequate Technical knowledge in the subject matter, adequate training is provided on Monitoring and Evaluation, and there is adequate M & E experience among staffs with a mean score of 4.51, 4.41, 4.34 and 4.31 respectively. Moreover, majority of the respondents also agreed that the training program brought about knowledge change in M & E staffs, training was given in system that assist staff in capturing, managing and analyzing data and Staff members in Monitoring and Evaluation are competent enough in handling M & E tasks with a mean score of 4.23, 4.10, 4.06 respectively. This implies that Ministry of Health staffs have got trainings and have good experience on M & E. As a result, this will help the organization to have an effective Monitoring and Evaluation system. However, some of the respondents disagreed with the statements that the office allocates sufficient staff time for M & E activities and there is a formal Monitoring and Evaluation training possess with a mean score of 2.43 and 2.28 respectively.Therefore, it is necessary to allocate sufficient

staff time for M & E activities and there should be a formal Monitoring and Evaluation training system.

The researcher agrees with the literature experience, knowledge, use of M & E tools and utilization of Monitoring and Evaluation information that improve the implementation and use of the Monitoring and Evaluation system within staffs /employees. Relevant staff had Monitoring and Evaluation experience and training, utilized Monitoring and Evaluation information adequately and carried out regular data collection from various sources (Mulugeta, 2018). Similarly, the researcher was in agreement with the literature training Influence performance of Monitoring and Evaluation of Government Projects on Influence of Monitoring and Evaluation on performance of constituency development fund projects (Yusuf, Muchelule; Otonde, Mbawi Geoffrey; Achayo, 2017)

The findings showed that 39(43.3%) of respondents were strongly disagree followed by 34(37.8%) of respondents who disagree for the question that there was stakeholders participate in community project identification and election. The findings showed that 39(43.3%) of respondents were strongly disagree followed by 34(37.8%) of respondents who disagree. This implies that, there was no stakeholders' participation in in the organization during community project identification and election. Therefore, stakeholders participation is important to have common understanding of programmes.

The researcher was in agreement with the study done by (Sulemana & Simon, 2018) that stakeholders were rarely involved in M&E of projects and programmes. However, the researcher was not inagreement with the study of Njama (2016) that discussed the organization involves majority of the respondents, 94.8% (55)stakeholders in M & E activities and process.

Similarily, 15(16.7%) of respondents strongly disagreed and 37(41.1%) disagreed that stakeholders didn't participate in identifying and problem solving related activities of M & E programs. Therefore, organizations should collaborate with stakeholders in each aspect of decision making including the development of alternatives and the identification of the preferred solution.

53.3% and 7.8% of respondents were agreed and strongly disagreed that there was no adequate resources, and time that could be enough for stakeholders' engagement.

Therefore, it is good to have adequate resources and time in place. It is advisable to involve stakeholders at the planning stage, stakeholders to participate in identify and solve problems related to M & E programs, involve stakeholders in the community project identification and election stages.

As it can be seen from tabele 4.4, majority of respondents 51(56.7%) agreed and 32(35.56%) strongly agreed that there was budget allocation for Monitoring and Evaluation, this finding is in agreement with the finding of Njama, majority of the respondents, 94.8% (55) indicated that the organization allocates funds for M&E activities.In addition, majority of respondents agreed that expenditures for M & E activities are exploited properly, the organization has the relevant technical and managerial capacity to manage budget, budget allocation influence effective M & E system in the organization.

However, the finding indicated that majority of respondents disagreed on the statements that there was no clear accountability of the budget utilization in the M & E program, M & E program submits the budget report on time, there is reduced organization bureaucracy and management to approve and release budget.

Furthermore, allocation of financial resources for monitoring and evaluation process has been found basic to enable adequate and timely collection of quality and complete data which when appropriately utilized translates to improved performance of health projects.It is therefore of much essence to budget for M & E within the overall production cycle, set aside resources enough for M & E activities.

Generally, when respondents were asked for the overall status of M & E system of their organization. Accordingly, half 50% (45) of the respondents responded that their organization was in very good status, 41% (37) good status, 2.2%(2) moderate, 3.3%(3) low and 3.3%(3) poor status.

CHAPTER FIVE

CONCLUSIONS & RECOMMENDATIONS

Introduction

In this section the main findings of the research are summarized and conclusions on major findings are presented. Recommendations are given based on the research findings and the limitation of the study is mentioned.

5.1 Summary of findings

From the findings, majority of the respondents agreed with the statements that "Trainings are important in enhancing M & E knowledge, Staff members in Monitoring and Evaluation have adequate Technical knowledge in the subject matter, adequate training is provided on Monitoring and Evaluation, and there is adequate M & E experience among staffs with a mean score of 4.51, 4.41, 4.34 and 4.31 respectively. Moreover, majority also agreed that the training program brought about knowledge change in M & E staffs, training was given in system that assist staff in capturing, managing and analyzing data and Staff members in Monitoring and Evaluation are competent enough in handling M & E tasks with a mean score of 4.23, 4.10, 4.06 respectively. Some of the respondents were not sure with the statements that staff competency is always upgraded as per necessity, facilities for Monitoring and Evaluation program are accessible at the required time and Monitoring and Evaluation team is equipped with necessary facilities with a mean score of 3.03, 3.02 and 3.01 respectively.The findings are also indicated that some of the respondents disagreed with the statements that the office allocates sufficient staff time for M & E activities and there is a formal Monitoring and Evaluation training possess with a mean score of 2.43 and 2.28 respectively.The results therefore indicate that most staff employees working in the Ministry of health disagreed that the office allocates sufficient staff time for M & E activities and there is a formal Monitoring and Evaluation training possess. Therefore, it is necessary to allocate sufficient staff time for M & E activities and there should be a formal Monitoring and Evaluation training possess.

The findings showed that 39(43.3%) of respondents were strongly disagree followed by 34(37.8%) of respondents who disagree,2(2.2%) of respondents agreed and 1(1.1%) of respondents were strongly agreed that there was stakeholders participation in community project identification and election,. Similarily, 23(25.6%) of respondents responded that strongly disagree following 40(44.4%) who disagree, 12(13.3%) of respondents agreed and 15(16.7%) neutral for the question that stakeholders were involved in Planning, Monitoring and Evaluation programs. Moreover, 15(16.7%) of respondents strongly disagree, 37(41.1%) disagree, 24(26.7%) neutral, 13(14.4%) agree and 1(1.1%) strongly agree that stakeholders participate in identify and solve problems related to M & E programs. This implies that stakeholders didn't participate in identifying and problem solving related activities of M & E programs.Therfore, the organization is advised to allow the participation of stakeholders in identifying and problem solving related activities. Similarly, 31(34.4%) of respondents strongly agree, 57(63.3%) agree that stakeholders are helping to improve M & E programs.Respondents were also asked whether the project team undertook capacity building of stakeholders or not, the result indicated that, 4(4.4%) strongly agree, 29(32.2%) agree, 31(34.4%) neutral, 21(23.3%) diagree and 5(5.5%) strongly disagree. The result indicated that responnunts were reluctant to give the right answere for the question that the project team undertakes capacity building for stakeholders.Respondents were also asked that whether there was resources, and time that could be enough for stakeholders' engagement. The findings show that 7(7.8%) strongly disagree, 48(53.3%) agree, 24(26.7%) neutral,6(6.7%) agree and 5(5.6%) strongly agree. The finding indicated that there was noadequate resources, and time that could be enough for stakeholders' engagement.Therefore, as it has been indicated from the findings, it is good to have adequate resources and time in place, it is advisable to involve stakeholders at the planning stage, stakeholders to participate in identify and solve problems related to M & E programs, involve stakeholders in the community project identification and election stages.

Regarding to budget allocation for Monitoring and Evaluation, 32(35.56%) respondents,strongly agree, 51(56.7%) agree and 7(7.5%) neutral. Moreover, respondents were asked that whether the budget allocated for the M & E activities was released without delay, the results indicated that; 4(4.4%) strongly agree, 24(26.7%) agree, 47(52.2%) neutral and 7(7.8%) disagree. Therefore, majority of respondents were reluctant to give the

right answer. Findings indicated that majority of respondents agreed that there was no clear accountability of the budget utilization in the M & E program, Similarily, respondents were asked whether expenditures for M & E activities are exploited properly or not, the result indicated that, 35(38.9%) agree, 23(25.6%) neutral, 31(34.5%) disagree and 1(1.1%) strongly disagree. Therefore, the results indicated that expenditures for M & E activities were exploited properly. Eventhough, majority of respondents agree for the statement, more than 1/3 of respondents disagreed that expenditures for M & E activities are exploited properly. Thus, it is needed to exploit expenditures for M & E activities. The study show that,31(34.4%) strongly agree, 39(43.3%) agree, 17(18.9%) neutral 3(3.3%) disagree. Therefore, the result indicated that more that ¾ of respondents agreed that there was an understanding of donor protocols that expenditure affects the flow of funds from the donors. Moreover, the study result indicated that the organization did not ensure that funds for M & E activities were provided on time. Thus, it is needed to ensure that funds for M & E activities to be provided on time. Similarily, Majority of the respondents disagreed that M & E program submits the budget report on time. Therefore, it is required to submit budget reports on time. Respondents were asked whether there was reduced organization bureaucracy and management to approve and release budget or not, the result indicated that, 1(1.1%) strongly disagree, 7(7.8%) agree, 31(34.4%) neutral, 42(46.7%) disagree and 9(10%) strongly disagree. Therefore, majority of the respondents agreed that there was no reduced organization bureaucracy and management to approve and release budget. Thus, it is needed to reduce organization bureaucracy and management to approve and release budget.The finding indicated that majority of the respondents agreed that the organization has the relevant technical and managerial capacity to manage budget. Therefore, it is required to strengthen and keep the technical and managerial capacity to manage the budget. The study result also revealed that majority of the respondents agreed that budget allocation influenced the M & E system in the organization.This implies that allocation of enough budget would influence for effective M & E system.

5.2 Conclusion

The study also concluded that there dequate training was provided on Monitoring and Evaluation.However, office did not allocates sufficient staff time for M & E activities and there was no a formal Monitoring and Evaluation training in place, there is adequate Monitoring and Evaluation experience among staffs. However, it is concluded that the organization did not allocates sufficient staff time for M & E activities as well as there is no formal Monitoring and Evaluation training system.

The study concluded that there was no stakeholders participation in community project identification and selection, stakeholders were not involved in Planning, Monitoring and Evaluation programs. In addition, the finding indicated that there was no adequate resources, and time that could be enough for stakeholders' engagement.However, respondents believed that stakeholders were helping to improve M & E programs.

Therefore, it is advisable to have adequate resources and time in place, involve stakeholders at the planning stage, stakeholders to participate in identify and solve problems related to M & E programs, involve stakeholders in the community project identification and election stages.

The study concluded that, budget was allocated for Monitoring and Evaluation activities, expenditures for M & E activities were exploited properly, the organization has the relevant technical and managerial capacity to manage budget, there is a believe that budget allocation influence effective M & E system in the organization. However, the result indicated that there was no clear accountability of the budget utilization in the M & E program, there is no submission of budget report on time, there is organizational bureaucracy and management to approve and release budget.

5.3 Recommendations

5.3.1 To MoH - Ethiopia

The study leveraged on three study objects and upon assessment of the findings the study makes the following recommendations;

1. Ministry of health should allocate sufficient staff time for Monitoring and Evaluation activities as well as arrange formal Monitoring and Evaluation training system.

2. The organization should allocate adequate resources and time in place, to involve stakeholders at the planning stage, allow stakeholders participate in identify and solve problems related to M & E programs, involve stakeholders in the community project identification and election stages.

3. There should be reduced organizational bureaucracy and management to approve and release budget on time, it is required to strengthen and keep the technical and managerial capacity to manage the budget,

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APPENDICES

APPENDIX A: CONSENT LETTER

Tesfa Yetum Getahun

C/O Saint Mary's University

P.O. box: 1234

Addis Ababa, Ethiopia

Dear Sir/Madam

RE: REQUEST TO COLLECT DATA FROM YOUR ORGANIZATION

I'm a student at the Saint Mary's University undertaking Masters of Arts in Project Management. I have successfully completed my course work and as part of the university requirements, I am supposed to undertake a research study.

My research will focus on the determinants of the effectiveness of a Monitoring and Evaluation system for projects: A case of AMREF Kenya WASH programme.The purpose of this letter is to request your permission to collect data for research purposes. All information collected will be treated with utmost confidentiality and will only be used for academic purposes.

I will highly appreciate your support and consideration.

Yours Sincerely,

Tesfa Yetum

APPENDIX B: QUESTIONNAIRE

Self-administered survey

Dear respondent,

The purpose of this structured questionnaire is to collect data on *Assessment of Factors that Affect the Effectiveness of Monitoring and Evaluation of health projects: The case of Ministry of Health*. Kindly provide the requested data as required in the different sections of this questionnaire.

The information that you provide will be treated with outmost confidentiality and is sought exclusively for the completion of *Master's Degree in Project management*. The process will take you about 15 minutes.

PART I: BACKGROUND INFORMATION

This section is intended to provide demographic information of the respondent. Please indicate your response in the box provided *(Tick appropriately)*

Age group in years								
<24	24-30	31-35	36-40	41-45	46-50	51-55	56-60	>60

Indicate the number of years you have worked for the organization in project Monitoring and Evaluation.

Years of service												
<3		3-5		6-8		9-11		12-14		>14	

Gender	
Male	
Female	

Educational level			
Diploma		PhD degree	
Bacheler degree		Other	
Masters degree			

In the subsequent sections, kindly indicate how much you agree/disagree with the following statements on a scale of 1 to 5 as per the table below:

Level of agreement				
(1)	(2)	(3)	(4)	(5)
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree

PART II: FACTORS THAT AFFECT THE EFFECTIVENESS OF MONITORING AND EVALUATION SYSTEM FOR HEALTHPROJECTS.

Section A: Staff competency& training and effective Monitoring and Evaluation

Please indicate the extent to which you agree/disagree with the following statement in respect to staff training as one of the factors for Monitoring and Evaluation

No	Statement	Rating				
		(1)	(2)	(3)	(4)	(5)
1	There is Monitoring and Evaluation experience within staffs					
2	Adequate training is provided on Monitoring and Evaluation					
3	Trainings importance in enhancing your M & E knowledge					
4	Staff members in Monitoring and Evaluation are competent enough in handling M & E tasks					
5	Staff competency is always upgraded as per necessity					
6	Staff members in Monitoring and Evaluation have adequate Technical knowledge in the subject matter					
7	Monitoring and Evaluation team is equipped with necessary facilities					
8	Facilities for Monitoring and Evaluation program are accesible at the required time					
9	The office allocate sufficient staff time for M & E activities					
10	The training program brings about knowledge change in M & E staffs					
11	Training is is given in system that assist staff in capturing, managing and analyzing data					
12	There is a Formal Monitoring and Evaluation training possess					

Section B: Stakeholder's participation and Effective Monitoring and Evaluation

Please indicate the extent to which you agree/disagree with the following statement in respect to Stakeholder's participation as one of the factors for Monitoring and Evaluation

No	Statement	Rating				
		(1)	(2)	(3)	(4)	(5)
1	Stakeholders participate in Community project identification and selection					
2	Stakeholders are involved in planning M & E programs					
3	There is adequate stakeholder group representation in the Monitoring and Evaluation team					
4	Stakeholders participate in identify and solve problems related to M & E programs					
5	Stakeholders participation is well devised at the planning stage to avoid disputes.					
6	Stakeholders helping are helping to improve M & E programs					
7	The project team undertakes capacity building of stakeholders.					
8	There is adequate resources, and time that can be enough for Stakeholder's engagement					
9	Stakeholders influence decision making and problem solving processes during M & E programs.					
10	Stakeholder's engagement helps for effective M&E.					

Section C: Budgetary allocation and effective Monitoring and Evaluation

No	Statement	Rating				
	Please indicate the extent to which you agree/disagree with the following statement in respect to budgetary allocation as one of the factors for Monitoring and Evaluation	(1)	(2)	(3)	(4)	(5)
1	The office allocates adequate budget for M & E activities					
2	The budget allocated for the M & E activities is released with out delay.					
3	There is clear accountability of the budget utilization in the M & E program					
4	Expenditures for M & E activities are expoited properly					
5	Understanding of donor protocols on expenditure affect flow of funds from the donors.					
6	Organization ensures that funds for M & E activities are provided on time					
7	M & E program submits the budget report on time.					
8	Reduced organization bureaucracy and management to approve and release budget					
9	The organization has the relevant technical and managerial capacity to manage budget					
10	Budget allocation influence effective M & E system in the organization					

Section D: Overall status of Monitoring and Evaluation

kindly indicate how much you agree/disagree with the following statements on a scale of 1 to 5 as per the table below: (1= Poor, 2 = Low, 3 = Moderate, 4 = Good, 5 = Very good)

Please indicate the extent to which you agree/disagree with the following statement in respect to overall status of M & E on health projects.						
No	**Statement**	**Rating**				
		(1)	(2)	(3)	(4)	(5)
1	Overall status of M & E based on Training,Stakeholder participation and budget allocation considering the above					

Thank you for taking the time to complete this survey