

STAKEHOLDER ENGAGEMENT, CAPACITY BUILDING AND PERFORMANCE OF HIV PREVENTION PROJECTS. ACASE STUDY OF RWENZORI SUB REGION IN UGANDA

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ABSTRACT

This study aimed at examining the relationship between stakeholder engagement, capacity building and performance of HIV prevention projects within Rwenzori Region, Uganda. It was a comparative cross-sectional research design along with a quantitative research approach. The sample size constituted 48 HIV prevention projects out of 55 HIV prevention projects. Data was obtained using two structured questionnaires from two categories of respondents who were categorized as project beneficiaries (local leader, community member) and project members (project manager, M&E officer). SPSS (v25) was used to analyze the two datafiles to obtain frequency tables, correlation and regression analyses to interpret results. This study found a positive relationship between stakeholder engagement performance of HIV prevention projects. Furthermore, there was a positive relationship between capacity building and performance of HIV prevention projects. It was also established that capacity building is a partial mediator in the relationship between stakeholder engagement and performance of HIV prevention projects. This study concludes that projects which embrace stakeholder engagement will perform to their expectation. It also notes that projects which boost capacity building will performance. The study recommends HIV prevention projects to enhance capacity building to achieve the desired performance. It further recommends projects to incorporate stakeholder engagement as a core value to streamline their operations. This research suggests a comparative study examining the relationship between stakeholder engagement, capacity building and performance of projects; and mixed research examining the relationship between stakeholder engagement, capacity building and performance of HIV prevention projects.

Background to the Study

Throughout the world, significant changes in project environment have been experienced. Many institutions are executing tasks using a project-based approach, as that is the most effective way of cost minimization and enhancing systematic monitoring with specific guidelines of time duration, budget and quality standards that must be fulfilled upon completion (Mwelu, Davis, Ke, Watundu & Jefferies, 2021; Mujabi, Otengei, Kasekende & Ntayi, 2015). Project performance occurs when the executed project is fulfilled within a specific timeframe, cost, scope and beneficiaries' expectations (Bond-Barnard, Fletcher & Steyn, 2018; Mujabi et al., 2015). When a project fulfills these criteria, it has ability to implement programs and impact beneficiaries socially, economically and environmentally (Mpofu, Ochieng, Moobela & Pretorius, 2017). It is revealed that over 70% which are implemented fail, 38% of which are unable to meet the original business goals for which they were extended, while 50% are completed with cost/budget overruns (Team Stage, 2022). However, subsequent studies indicate that project performance remains one of the serious concerns across various projects with HIV prevention projects inclusive (Mugenyi, Karemera, Wesana & Dooms, 2022).

Approximately 38 million people globally are living with HIV/AIDS amidst a wide range of efforts to curb its prevalence levels and 67% live in Africa. (United Nations AIDS Commission, 2022). Indeed, HIV/AIDS prevention projects remain one of the highly low performing projects thus (WHO, 2020). The report indicates over 65% of HIV prevention projects implemented fail to deliver services within time. Moreover, these projects also experience or have issues with cost overruns (WHO Africa Report, 2021). The report further indicates two-thirds of people have not benefited from HIV prevention projects in the Sub-Saharan Africa. In Uganda HIV prevalence is approximately 1.2 million people aged between 15 to 64. South western region where Rwenzori falls, the

HIV/AIDS prevalence is 7.9 % which is the second highest after Central Region 1 which is at 8.0% Uganda Population based HIV impact Assessment (UPHIA 2017-2018).

It is against this background that this research sought to examine the influence of stakeholder engagement and capacity building on performance of HIV prevention projects in Uganda, specifically in Rwenzori Sub Region. Specifically, the study examined the relationship between stakeholder engagement and performance of HIV prevention projects; capacity building and performance of HIV prevention projects; and tested the mediation of capacity building in the relationship between stakeholder engagement and performance of HIV prevention projects in the Rwenzori Region, Uganda.

Methodology

Research Design

This study adopted a comparative cross-sectional research design along with a quantitative research approach. A comparative cross-sectional research design was used to enable the researcher compare and contrast between two perceptions of respondents with relation to the same subject matter at a single point in time. The nature of the research phenomenon necessitated obtaining respondents from different categories of respondents and subsequently comparing their responses in a comparative sense and draw conclusions to that effect. In addition, it provides answers to the research phenomenon under investigation faster (Creswell, 2014). On the other hand, the quantitative research approach was used because statistical results are able to clearly indicate the relationship and the extent to which studied variables relate (Rahman, 2016).

Study Population

This study comprised 55 HIV prevention projects in Rwenzori Region, Uganda. This population comprised only projects which were executed between 2016 and 2019.

These were targeted because it would be easy to trace the different targeted respondents. Because of their recency, it was anticipated that respondents would easily still recall what exactly transpired. For the purposes of this study, a project was defined as a series of tasks and activities undertaken by a specific organization to achieve a particular goal, specifically prevention of HIV in Rwenzori sub region.

Unit of Analysis

The unit of analysis constituted the 55 HIV prevention projects implemented by both Community based and National NGOS in Rwenzori Region, Uganda, specifically in Kasese district.

Unit of inquiry

The unit of inquiry comprised of two categories of categories of respondents. The first category comprised project members including the project manager and monitoring and evaluation officer to serve as representatives of internal stakeholders. The second category comprised of project beneficiaries, specifically; a local leader, and community member. These were used to represent the external stakeholder category.

In this study, the project manager was selected because is the overall in charge of the project. Therefore, the decisions they undertake during the project either makes the project to perform to its expectation or fail.

Data analysis

Data was analyzed using two datasets. One dataset contained data obtained from project beneficiaries and another from project members. The researcher opted for a separate analysis because of two reasons. First, to facilitate a comparative analysis of the research phenomenon from two perspectives, and secondly; because the two instruments did not contain the same number of questions. Once data was obtained, it was edited, cleaned and entered into SPSS v.25 for analysis. From each dataset, the

researcher extracted a frequency table, correlation and regression analysis to present and interpret results. A frequency table was used to present results in relation to demographic characteristics of respondents. The interpretation of these results was based on percent values. Correlation analyses were used to analyze the nature of the relationship (positive, negative) between studied variables towards the dependent. Interpretation of the results was based on the Pearson correlation (r) value. Regression analysis was used for testing research hypotheses, specifically H_1 and H_2 and establishing the predictability of studied variables on the dependent variable. The study run a hierarchical regression analysis to test the mediation effect and test H_3 . Interpretation of results was based on Beta, R^2 , and R^2 change.

Results

Table 1: Correlation Analysis: Project beneficiaries and project members' perspective

Variables/Constructs	Project Beneficiaries' Perspective									Project Members' Perspective		
	1	2	3	4	5	6	7	8	9	1	2	3
Stakeholder engagement (1)	1									1		
Communication (2)	-0.081	1								0.105	1	
Consultation (3)	0.172	.629**	1							-0.002	0.038	1
Involvement (4)	0.113	0.226	0.193	1						0.157*	.312**	0.069
Capacity Building (5)	0.110	0.155	.309**	0.081	1					.314**	0.094	.348**
Technical capacity (6)	0.155	.268*	0.175	-0.143	.231*	1				0.067	0.165	0.090
Behavioral capacity (7)	.247*	0.150	.323**	-0.012	.468**	0.149	1			0.057	.238*	0.146*
Contextual capacity (8)	0.103	0.212	.363**	.548**	0.168	0.024	-0.048	1		0.055	0.201	-0.153
Performance of HIV prevention projects (9)	.668**	.248*	.288*	.263*	.464**	.310**	.363**	.333**	1	.631**	.292*	.541**

Notes: n=37 HIV prevention projects; * $p < 0.05$ level (2-tailed); ** $p < 0.01$ level (2-tailed); Results presented for two respondent categories

Source: Primary Data *Stakeholder engagement and performance of HIV Prevention Projects*

Results in table 1 obtained that from both a project beneficiaries' and project members' perspective, stakeholder engagement is significantly and positively associated with performance of HIV prevention projects ($r = .668$, $p < .01$; $r = .631$, $p < .01$). The results meant that enhancement of stakeholder engagement is bound to enhance performance of HIV prevention projects. From both perspectives, results revealed communication is significant and positively associated with performance of HIV prevention projects (Project beneficiaries $r = .248$, $p < .05$; Project member's perspective $r = .292$, $p < .01$). These results meant that stimulating communication in stakeholder engagement would translate into performance of HIV prevention projects. Results obtained from a project beneficiaries' and project members' perspective further established that consultation is significant and positively associated with performance of HIV prevention projects ($r = .288$, $p < .01$; $r = .541$, $p < .01$). In this case, results from the two perspectives meant that boosting consultation in stakeholder engagement is likely to enhance the performance of HIV prevention projects. Lastly, results obtained revealed that there exists a significant and positive relationship between involvement and performance of HIV prevention projects from the two perspectives ($r = .263$, $p < .05$; $r = .328$, $p < .01$). These results meant that enhancing involvement in stakeholder engagement is bound to enhance the propensity of the performance of HIV prevention projects.

Capacity Building and performance of HIV Prevention Projects

In table 1, correlation results in relation to project beneficiaries and project members perspective obtained significant and positive relationship between capacity building and performance of HIV prevention projects ($r = .464$, $p < .01$; $r = .443$, $p < .01$). The results

meant that enhancing capacity building is bound to enhance the possibility of the performance of HIV prevention projects. Results further obtained a significant and positive relationship between technical capacity and performance of HIV prevention projects, as expressed from both the project beneficiaries and project members perspective ($r=.310$, $p<.01$; $r=.308$, $p<.01$). These results meant that enhancing technical capacity is likely to translate in performance of HIV prevention projects. In addition, indicated that both project beneficiaries and project members revealed that there exists a significant and positive relationship between behavioral capacity and performance of HIV prevention projects ($r=.363$, $p<.01$; $r=.231$, $p<.05$). From these results, it meant that boosting behavioral capacity in capacity building is likely to translate in performance of HIV prevention projects. On the other hand, the correlation results from the project beneficiaries' perspective revealed that there is a significant and positive relationship between contextual capacity and performance of HIV prevention projects ($r=.333$, $p<.01$). Whereas from the project managers' perspective, results indicated that the relationship between the same is positive, although non-significant ($r=.060$). The results meant that enhancing contextual capacity in capacity building perceived by project beneficiaries unlike as perceived by project members would enhance performance of HIV prevention projects.

Regression Analysis

Table 2: Regression Analysis (A project beneficiaries' and project members' perspective)

Project beneficiaries' perspective					Project members' p			
Unstandardized		Standardized			Unstandardized		Stan	
Coefficients		Coefficients			Coefficients		Coe	
Std.					Std.			
B	Error	Beta	t	Sig.	B	Error		

<i>(Constant)</i>	1.607	0.277		5.792	0.000	<i>(Constant)</i>	1.884	0.347
<i>Stakeholder</i>						<i>Stakeholder</i>		
<i>engagement</i>	0.365	0.044	0.625	8.281	0.000	<i>engagement</i>	0.356	0.060
<i>Capacity</i>						<i>Capacity</i>		
<i>building</i>	0.273	0.052	0.395	5.241	0.000	<i>building</i>	0.228	0.077
<i>R</i>	<i>R²</i>	<i>Adj. R²</i>	<i>F</i>	<i>Sig.</i>		<i>R</i>	<i>R²</i>	<i>Adj. R²</i>
.775	0.601	0.590	53.433	.000		.682	0.465	0.450

Note: n=37 HIV prevention projects; Dep=Performance of HIV prevention projects

Source: Primary Data

Table 2 reveals results revealed result in relation to the regression of studied variables on the dependent variable from the two perspectives of respondents. From a project beneficiaries' perspective, $Adj R^2=.590$ was obtained in relation to the regression of stakeholder engagement and capacity building on performance of HIV prevention projects. From this perspective, it meant that stakeholder engagement and capacity predict up to 59% of the variances in performance of HIV prevention projects. In comparison to project members' perspective, $Adj. R^2=.450$ was obtained. This meant that the variables are perceived to predict up to 45% of the variances in performance of HIV prevention projects. From these results, it meant that project beneficiaries perceived a higher predictability of stakeholder engagement and capacity building on performance of HIV prevention projects than project members.

Results further revealed $Beta=.625$, $p<.05$ for stakeholder engagement, and $Beta=.395$, $p<.05$ in relation to capacity building from a project beneficiaries' perspective. On the other hand, results of $Beta=.546$, $p<.05$ in relation to stakeholder engagement and $Beta=.271$, $p<.05$ in relation to capacity building were obtained from the project members' perspective. From the two perspectives, results meant that stakeholder engagement and capacity building significantly predict performance of HIV prevention projects. Moreover, the same results meant that stakeholder engagement is the better predictor of performance of HIV prevention projects.

From the above results, the following stand is undertaken on the following hypotheses;

H_1 : There is a significant relationship between stakeholder engagement and performance of HIV prevention projects in the Rwenzori Region, Uganda is Accepted

H₂: There is a significant relationship between capacity building and performance of HIV prevention projects in the Rwenzori Region, Uganda is Accepted

Mediation Effect

The study used hierarchical regression analysis combined along with bootstrapping to test if capacity building mediates the relationship between stakeholder engagement and performance of HIV prevention projects. The hierarchical regression models presented were two, one reflecting the perception of project beneficiaries and another the project members perspective. The analysis was also based on the test H_3 . The results are presented in table 2.

Table 3: Mediation Effect (A project beneficiaries' and project members' perspective)

A project beneficiaries' perspective							Project Members' perspective		
Variable	B	95% CI (Lower, Upper)	SEB	Beta	R ²	ΔR ²	Variable	B	95% CI (Lower, Upper)
Model I							Model I		
Constant	2.633	(2.175, 3.091)	0.230	0.668***			Constant	2.639	(2.181, 3.097)
	0.391		0.051				Stakeholder engagement	0.411	(0.289, 0.493)
Stakeholder engagement		(0.289, 0.493)			0.446	0.446			
Model II							Model II		
Constant	1.607	(1.054, 2.160)	0.277				Constant	1.884	(1.184, 2.584)
	0.365		0.044	0.625***			Stakeholder engagement	0.356	(0.277, 0.453)
Stakeholder engagement		(0.277, 0.453)							
Capacity Building	0.273	(0.169, 0.377)	0.052	0.395***	0.601	0.155	Capacity Building	0.228	(0.099, 0.357)
Notes: ***p<.001; A project beneficiaries' perspective							Notes: ***p<.001; Project Members' perspective		

Source: Primary Data

Table 3 shows the mediation of capacity building in the relationship between stakeholder management and performance of HIV prevention projects from a project beneficiaries and project members' perspective. From a project beneficiaries' perspective, stakeholder engagement explained 44.6% of the variances in performance of HIV prevention projects ($R^2=.446$). The results further obtained that stakeholder engagement is a significant predictor of performance of HIV prevention projects ($Beta=.668$, $p<.001$). In Model 2 upon the inclusion of the mediator, a total of 61.1% variance in the performance of HIV prevention projects was obtained ($R^2=.601$). In addition, the $\Delta R^2=0.155$ (15.5%) was revealed, reflecting the positive contribution to performance of HIV projects resulting from capacity building. Moreover, results revealed that the beta value for stakeholder engagement before the inclusion of capacity building reduced, but remained significant upon the inclusion of the mediator (Model 1=.668 to Model 2=.625). This meant a partial mediation of capacity building in the relationship between stakeholder engagement and performance of HIV prevention projects.

From a project members' perspective, stakeholder engagement explained 39.8% of the variances in performance of HIV prevention projects ($R^2=.398$). With the inclusion of the mediator, a total variance on performance of HIV prevention projects increased to 46.5% ($R^2=.465$) reflecting an increment of 6.6% ($\Delta R^2=0.066$) reflecting the contribution of capacity building. In addition, results revealed that the beta value for stakeholder engagement in Model 1 ($Beta=.631$, $p<.001$) reduced in Model 2 ($Beta=.546$, $p<.001$), although remained significant. This meant that that capacity building is a partial mediator in the relationship between stakeholder engagement and performance of HIV prevention projects.

Based on the results, it is stated that;

H₃: Capacity building significantly mediates the relationship between stakeholder engagement and performance of HIV prevention projects in the Rwenzori Region, Uganda is Accepted.

Conclusion

Stakeholder engagement will serve as a conduit which allows important information and ideas to flow from stakeholders to the project to facilitate performance. Important to note, this research unleashes that stakeholder engagement requires an interplay of maintaining communication, consultation, and involvement of stakeholders throughout the project. Further still, it is affirmed that capacity building is indispensable in ensuring project performance. Projects which focus on capacity building will be able to enrich stakeholders in terms of their technical, behavioral and contextual comprehension of project issues which will contribute to execution of projects within time, budget, scope and in a satisfactory manner. It is also evidenced that the potential of stakeholder engagement to influence performance of projects is partially inclined to capacity building.

Recommendations

Capacity building has been found as one of the major factors that influence performance of HIV prevention projects. This study recommends that HIV prevention projects must enhance capacity building to achieve the desired performance. They should do this by increasing funds allocated to capacity building programs and increasing frequency of conducting capacity building programs such as training, coaching and mentorship. These activities should not be selective, and should target both internal and external stakeholders.

Stakeholder engagement is crucial in ensuring performance of HIV prevention projects. Accordingly, this study recommends that HIV prevention projects consider stakeholder

engagement as one of the core values. This will encourage projects to institute systems which promote communication, involvement and consultation within their operations.

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