EVALUATION REPORT

FREE PENTECOSTAL FELLOWSHIP
IN KENYA:
HIV/AIDS AWARENESS PROJECT

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ACRONYMS

PSC Project Steering Committee
BCC Behaviour Change Communication
IEC Information Education Communication
HIV Human Immuno deficiency Virus
AIDS Acquired Immunodeficiency Syndrome
FPFK Free Pentecostal Fellowship of Kenya
MFI's Micro Finance Institutions
STI's Sexually transmitted infections
SDA Seventh Day Adventist
PR Public Relations
OIP Oyugis Integrated Project
IGA Income generating activities
ECR Expanded and Comprehensive Response
FGD Focus group discussion
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EXECUTIVE SUMMARY

Evaluation objectives
The evaluation of the FPFK HIV/AIDS awareness and preventive project was carried out to promote a high level of quality and effectiveness. It has been done to improve current interventions in order to enhance the success of future initiatives. The specific objectives of the effectiveness evaluation include:

Efficiency and operational concerns
1. To evaluate structure, decision making lines and national participation in management of the project, leading to recommendations on how, when and whom to transfer responsibilities.
2. Analyze current stakeholders (including target group) and recommend steps to improve local participation and ownership.
3. Evaluate the activities and structure of the steering committee, the administration and the role and sharing of responsibility of the participating partners.
4. Evaluate the project public relations activities and give recommendations for improving these.

Effectiveness (Output of activities in relation to set goals)
5. Review the project outputs in relation to its activities based on the plans made for the project from 2000-2003 and provide recommendations at output and activity level to make the project more effective in reaching its main objectives.
6. Analyze the effectiveness of the different campaigns and staff training and make suggestions for how to make these activities more useful for the target groups and sustainable within the project period.

Outcome, impact and effects (are goals and objectives being met?)
7. Analyze the impact or assess future impact of the project to the society.

Sustainability and total time frame of the project
8. In light of the efficiency, effectiveness and outcome, analyze the degree of sustainability for the project activities.
9. To achieve the goal of sustainability for project activities or to achieve the changes in attitudes and awareness, what total time frame is needed for the project to succeed?
10. Analyze the possibility of a local (churches) take over of the project.

**Date of data collection and analysis**

5th February to 27th February 2004

**Target groups**
The list below presents the respondents who were instrumental in providing data. Standardized questionnaires and discussion guides were used in both regions and among the committee members. This was to increase generalizability and replicability across the geographic regions.

- National Board members
- Project steering committee
- Project leader
- General Secretary
- Project staff
- Primary beneficiaries; Primary and secondary school youth
- Secondary beneficiaries; women, men, and out of school youth (church members and others)
- Other stakeholders; ministry of education officials, local government officials (chiefs and councilors), ministry of health and other Non governmental and community based organizations.

**The methodology used and how the respondents were selected**

This report is the process and the results of participatory assessment of FPFK activities carried out within the program regions.

A team of three facilitators which formed an interdisciplinary team, conducted the evaluation of the impact of FPFK’s HIV/AIDS activities in Nyanza and Southern regions. The team made visits, held Focused Group Discussions (FGD) and interviewed project staff, village elders, women and youths (sampled from three different schools), government officials, and NGO’s. The team also had a chance of observing Soul Wining events organized in the regions.
The whole process of evaluation was conducted in the cause of twenty (20) days; interviews were conducted, data gathered from the field, report compiled and presented.

GEOGRAPHIC LOCATION OF DATA COLLECTION
OLoitokitok; Isara location, Mbirikani location, Loitokitok Township, Nyamira, Oyugis, Mititi area.

RECOMMENDATIONS

Geographical coverage
- Concentrate and intensify activities in few sites to create greater impact.

Administrative structure and project management
- We recommend a forum that will provide the project staff, PSC, and the National board with an opportunity to discuss project issues. For example quarterly meetings between the PSC and Project staff, and with the National board once a year.
- Establish an operational base in the regions manned by a technical person to provide support and monitor activities.
- Redefine and clarify the role of all the project staff; project coordinator, project leader, area coordinators, team leaders, and evangelists to avoid conflict in roles.

Project design
- We recommend the development of a comprehensive behaviour change approach for HIV prevention, care and support in the communities.
- Initiate the peer education approach both in school and the community.
- The current awareness approach should continue complemented with the new behaviour change communication (BCC) approach.
- Conduct a comprehensive baseline study before beginning the next phase; develop monitoring tools for tracking down progress followed by a comprehensive end of project evaluation.
Sustainability

- To encourage ownership we recommend community participation in the project process (design, implementation, monitoring and evaluation).
- The project should establish linkages with micro-finance institutions (MFI’s) and Source for seed money for a revolving fund. Consequently Churches, women and youth groups to be encouraged to start activities such as merry-go-round.

Capacity building

- Identify gaps in knowledge and skills and offer appropriate training to the managerial team, the project staff and key stakeholders.
BACKGROUND AND PURPOSE

FPFK Soul Winning Outreach has been doing HIV/AIDS awareness in three regions of the country namely the Nyanza, the Coast and Southern rift. The activities have been going on since the year 2000 to date. Several activities have been held both in schools, churches and community which include mass campaigns, sports, church seminars, community campaigns etc.

HIV/AIDS being a national disaster calls for all stakeholders including faith based organizations to join hands to fight the pandemic hence the need to build the capacity in local churches and the communities in management of the pandemic to facilitate behaviour change among various target groups. Faith-based initiatives including FPFK HIV/AIDS awareness are pivotal to the success of HIV/AIDS prevention and care efforts throughout the world.

Churches, mosques, synagogues, and other religious institutions are found in nearly all communities in the world and wield a significant level of cultural, political, social, educational, and economic influence.

Faith-based institutions can be viewed as the largest, most stable, and most extensively disbursed nongovernmental organizations in any country. They are respected within their communities and most have existing resources, structures, and systems upon which to build. They can undertake these actions in a very cost-effective manner due to their ability to leverage volunteer and other resources with minimal effort.

It is critical to involve faith-based groups in HIV/AIDS prevention and care—for the sake of society and of the groups themselves. FPFK has taken up the challenge to initiate HIV/AIDS behaviour change in churches and communities and to help people maintain the good and safe behaviours.

Purpose of Evaluation methodology

The evaluation of HIV/AIDS prevention and awareness program is done so that it provides information on quality and effectiveness; improve current interventions in order to enhance the success of future initiatives and to look into program outcomes which
include both short term and intermediate program effects. Sustainability issues would be considered in terms of finding out if program priorities need to be changed, expanded and to what extent resources need to be allocated.

The Evaluation team appointed by FPFK was to assess the activities carried under HIV/AIDS project and address the above issues and give recommendation for future improvements.

Qualitative methodology was used. Qualitative in this case refers to nonmathematical analytical procedures resulting in findings derived from data gathered by a variety of means that include observations, interview and review of documents.

Non –probability sampling method was used because it is less time consuming and less costly to implement. Probability sampling methods would have been feasible for our target groups due to lack of a sampling frame.

The community team was selected for interviews through non-random, purposive selection. A ‘take-all’ approach was used to select sample respondents in the National board category; the members complete a self-administered questionnaire followed by discussions. Focus group discussions were conducted which involved 3 moderators/facilitators who led informal but structured discussions.

Tools and techniques for collecting qualitative data for the FPFK HIV/AIDS awareness and preventive project included;

- Participant observations
- Individual in-depth/key informant interviewing
- Focus group discussion

(Further details are presented in the table below)

The evaluation team reviewed the project documents and literature available and further developed the data collection instruments. The community and project staffs were involved in the sampling procedures. Individuals were informed in advance through community leaders visits, church leaders, and project staff and the purpose of the meetings explained.
<table>
<thead>
<tr>
<th>Observations</th>
<th>Venue</th>
<th>Individual in-depth interviews</th>
<th>Venue</th>
<th>Focus group discussions (FGDs)</th>
<th>Venue</th>
</tr>
</thead>
<tbody>
<tr>
<td>Church seminar</td>
<td>Mbirikani OLoitokitok</td>
<td>General Secretary</td>
<td>FPFK Headquarters</td>
<td>Community team (purposive sampling)</td>
<td>Isara</td>
</tr>
<tr>
<td>Sports</td>
<td>Mititi High School Oyugis</td>
<td>Project leader</td>
<td>FPFK Headquarters</td>
<td>Community team (purposive sampling)</td>
<td>Nyamira</td>
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<td></td>
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<td>Councilor</td>
<td>Mbirikani - OLoitokitok</td>
<td>Community team (purposive sampling)</td>
<td>Oyugis</td>
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<td></td>
<td>National Board (“take all”)</td>
<td>FPFK Head Quarters</td>
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<td>5 Project Steering Committee members (all)</td>
<td>FPFK Head Quarters</td>
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<td>Project staff (2) (“take all”)</td>
<td>Oyugis – Nyanza Region and Loitokitok</td>
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<td></td>
<td></td>
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<td>14 Schools students (1 from each class)</td>
<td>Agoro Sare High schools</td>
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<td>20 Students (sample from 7 schools) (random)</td>
<td>Loitokitok</td>
</tr>
</tbody>
</table>
STATUS OF THE HIV/AIDS PROJECT ACTIVITIES SUBJECT TO EVALUATION

Project goals
The main goal of the FPFK prevention and awareness project is to control the spread and infection of HIV/AIDS/STIs among Kenyan youth aged 13 and 24 years. It also involves awareness creation among adults aged between 25 and 50 years.

Objectives of the project
The objectives of the project are summarized as follows;

- To educate the target groups about the dangers and consequences of HIV/AIDS
- To reduce the spread of AIDS and STDs amongst the youths in Nyanza and Coast provinces by creating awareness.
- To bring up youths who are free from HIV/AIDS infection.
- To change the behaviour and attitude of youths in matters relating to sex.
- To help the youths start income generating activities.
- To create awareness on parents about the causes and consequences of HIV/AIDS.
- To help parents teach their children about AIDS/STDs.
- To enable the local churches realize their roles in addressing HIV/AIDS within the communities.

IDENTIFICATION OF TARGET GROUPS
The project was designed to be both church and community based. The major beneficiaries are the youth aged 13-24 and the secondary beneficiaries were parents both women and men. There is need to intensify the activities aimed at benefiting the primary target group.

Suggestions for improvement
60% of the activities should focus on the primary target both in school and out of school youth. The remaining 40% of the activities can continue to target the secondary beneficiaries with more emphasis on women. However it's important to devise ways of involving men who seemingly do not frequent churches.
**Geographical coverage**

The project was designed to focus on the following regions; Nyanza region; Kisumu, Nyamira, Busia, Siaya, Kericho. Southern region; Kajiado Coast region; Lamu, Kwale, Mombasa.

It has been noted that the coverage is very wide; the project staff has visited most of the campaign sites ONLY once with no follow up activities this is evident from the community’s desire for follow up activities. They have created a demand that they cannot fulfill with their current approach. This was vividly described as “*hit and run approach*” the following analogy was also used “A motorist driving by a grisly accident scene reduces speed due to the effect of the site. After awhile the memory of the accident experience fades and gradually reverts to over speeding”. These equate the FPFK HIV/AIDS program lack of follow up approach. For behaviour change process to succeed there has to be constant reminders of issues in question.

**Suggestion for improvement**

Concentrate and intensify activities in few sites to meet the communities' needs and create greater impact.

**Sites identification criteria**

- Identify a high population density area
- Respond to community context needs
- Consider resources available
- Stakeholders’ willingness to support the activities.
- The presence of relevant supportive partnerships to absorb the proposed broad based comprehensive approach and to avoid duplication especially in sites where other agencies are implementing similar interventions.

**Project period**

The project has been operational for four years in Nyanza and one year in Oloitokitok. The project staff and stakeholders indicated five years will be adequate period to observe behaviour change. And hence we recommend a five year project period.
Therefore we suggest that the project be implemented in two phases. The activities can be implemented in a few sites for two years and then scale up after a mid-term review in contiguous areas.

FINDINGS AND RESULTS CENTRED AROUND THE EVALUATION OBJECTIVES

**Efficiency and operational concerns**
1. To evaluate structure, decision making lines and national participation in management of the project, leading to recommendations on how, when and whom to transfer responsibilities.
2. Analyze current stakeholders (including target group) and recommend steps to improve local participation and ownership.
3. Evaluate the activities and structure of the steering committee, the administration and the role and sharing of responsibility of the participating partners.
4. Evaluate the project public relations activities and give recommendations for improving these.

**EMERGING ISSUES**

**Administrative structure and project management**
It was found out that the management team is instrumental in the successful implementation of the HIV/AIDS prevention project. Therefore strengthening their capacity to play this important role is paramount. The following are some of the critical issues that emanated from the consultation with the teams;

- The role of the National board and the PSC in the project implementation is not very clear to the project staff.
- There is a missing link between the National board, the project steering committee, and the project staff.
- The National board and the PSC have not been participating fully in the decision making processes as detailed in the project document. “The project steering committee is mandated to steer the project according to the project document and FPFK approved annual plans. The FPFK board must approve changes in activities and budget. The PSC is responsible to run the project according to the approved annual plans.”
• There is a conflict in roles which has resulted in overlaps and imprecise communication channels within the organization. The project document lacks the clarity as well. It says "The project steering committee will be subjected to the FPFK board. FPFK will choose a project leader and area coordinators that will work with the external personnel. The administration and implementation of the planned activities will be done by both the external and local project personnel". The quote does not for example reflect the role of the team leader etc.

• FPFK policy guidelines and project document have not been availed to the project staff.

• We noted that the project leader has many responsibilities. The project has to find ways of reducing the burden to make him more effective in monitoring field activities more frequently.

Suggestions for improvement

• Design a capacity building program aimed at developing managerial and leadership skills of the members of the National board and project steering committee. This is to enable them to play a greater role in overseeing the project implementation.

• Communication breakdown has contributed largely to the hiccups experienced in the project. It is important to have frequent meetings among all the key staff and managers in the project to fill up the gap experienced between various parties. We suggest quarterly meetings between the PSC and Project staff and with the National board once a year. This will ensure that the management team is more responsive to the needs expressed by the field team.

• Redefine and clarify the role of all the project staff; project coordinator, project leader, area coordinators, team leaders, and evangelists to avoid conflict in roles.

• Policy issues should be clear and communicated well. It is important to design policies in consultation with the project staff.

• The project and policy documents should be shared with project staff, PSC and National Board. This will strengthen understanding, teamwork and avoid the top down approach to management.

• Explore possibilities of establishing an operational base in the regions manned by a technical person to provide support and monitor activities. FPFK has already established structures on the ground that can be used. The local leaders are willing as well to sacrifice part of their offices for the FPFK operations.
• The project leader should frequently visit the field so that he acquaints himself with the activities to make him more effective.

**Recommendations on how, when and whom to transfer responsibilities.**

So far the project is still in its infancy there is need for FPFK to continue ‘midwifing’ the project to maturity. Transferring responsibilities to the local churches and community at this stage would be premature. This can happen in future when sustainability has been achieved.

**Stakeholders Analysis**

Very effective communication, collaboration and an elaborate network with various stakeholders has been exhibited during the program implementation period. The following are some of the stakeholders actively involved in the project activities:

• The Ministry of education was very instrumental in the planning, coordination and mobilization of students and teachers participation in the FPFK activities. They have helped break the religious barriers experienced in Muslim, catholic and SDA schools.

• Teachers were involved in organizing student population participation both in seminars and sporting activities.

• The local authorities through the area chiefs have been supportive in mobilizing the communities and in taking part in the implementations.

• The pastors and church leaders have been instrumental in mobilizing resources to support project activities which include; availing the church structures as venue for meetings and other contributions in kind.

• The ministry of health, Community based organizations e.g. Oyugis Integrated Program (OIP) etc have contributed largely to the success of the project. All were involved in facilitation and in providing the current regional HIV situational analysis.

**Suggestion for improvement**

• Involve People Living With HIV/AIDS (PLWHA) in the prevention campaigns, this helps to reinforce the information provided and will play a major role in the reduction of stigma in the communities.

• Involve the community/stakeholders in project’s needs assessment, planning, implementation, monitoring and evaluation.
**Project Public Relations Activities**

It was noted that some activities the FPFK is involved in has raised the project’s profile extensively. This includes the sporting activities which have been received with a lot of enthusiasm. The presentation of T-shirts, balls, the ‘Ukombozi’ trophy is commendable. The other striking PR activity is the invitation/participation of key stakeholders like press, government officers to organized HIV/AIDS awareness events.

**Suggestions for improvement**

The proposed approach will play a major role in improving the public relations activities. However the following materials will help in effectively reaching a diverse audience; T-shirts for peer educators, caps, bags, pamphlets and other give away items.

**Effectiveness (Output of activities in relation to set goals)**

1. Review the project outputs in relation to its activities based on the plans made for the project from 2000-2003 and provide recommendations at output and activity level to make the project more effective in reaching its main objectives.
2. Analyze the effectiveness of the different campaigns and staff training and make suggestions for how to make these activities more useful for the target groups and sustainable within the project period.

**PROJECT DESIGN**

**EMERGING ISSUES**

The team found the current project design was well thought out. Currently in the fight against HIV/AIDS pandemic the faith based initiatives are proving to be very effective. This is due such strengths as the availability of a captive audience, the structures already in place and the authority the church leaders command in the communities. Therefore FPFK HIV/AIDS project needs further strengthening of their project to have greater impact. The team noted that the blend of evangelism with HIV/AIDS awareness is a very powerful tool in reaching out if proper balance is created between the two.
The literature reviewed and community consultations reveal that the project activities have been going on as planned and the output is evident. (Refer to the annual reports for the details of outputs). However to be able to measure the impact of the interventions effectively it would be advisable to do a baseline study.

**Objectives**
The objectives stated in the project document are good. However we strongly suggest that they are made more specific, measurable, achievable, realistic, and time bound. For example one of the objectives states that “To help parents teach their children about HIV/AIDS/STDs” this is too general as one cannot measure the impact and it would also be impossible to develop a monitoring tool.

**Mass campaigns**
The crusades and church outreach activities have been both effective but the latter had more impact in addressing the needs of the audience. The integration of evangelism and HIV/AIDS awareness was delivered effectively with all the teams playing the different roles well, complementing and reinforcing each other. There is need to be more innovative in using this strategy to make it more interactive.

**Suggestions on improvement**
- Use magnet theatre to involve the audience and to help the community effectively identify and address their issues
- Train peer leaders in the churches and community to initiate and ensure continuity of the behaviour change process
- Develop suitable discussion guides on HIV and AIDS that target various groups within the community
- HIV/AIDS pastoral counseling training for pastors and their wives. There is a need to equip the pastors with right knowledge, skills and attitudes to be able to provide both spiritual and psychological support to their members.
- To involve the women and girls more in the project activities, they should be equipped through an intensive training that would be longer than the present two hours sessions they undergo.
Sporting Activities
Sporting activities especially girl's football is a popular and effective mobilization tool.

Suggestions for improvement:
- Utilize the forum for providing and distributing information education and communication (IEC) materials
- Forum for providing information on services available in the community.
- Introduce football for the out of school youth in the community

School Programs
We noted that there is already a captive audience composed of teachers and students. Current activities include lectures on HIV and AIDS and videos shows. Teachers and students appetite has been sharpened by the one-off activity.

Suggestions for improvement:
- There is need for the project to provide an intensive training to equip the teachers with the correct knowledge and skills to enable them transfer the same to students and peers
- Look into a possibility of introducing peer education and peer counseling in schools
- Re examine the current discussion guides and ensure they respond to the target group needs. The discussion guides should be used to facilitate meetings.

Income Generating Activities (IGA)
We have noted that although IGA seminars have been conducted in collaboration with MFI's, practical initiatives to achieve the intended objective have not taken off.

Suggestion for initiating IGA's:
- The project to establish linkages with micro-finance institutions (MFI's).
- Churches, women and youth groups to be encouraged to start activities such as merry-go-round.
- Source for seed money for a revolving fund
STAFF OUTPUT

We noted that the staff work too hard and long hours which results to fatigue and hence burnout. This would have a negative effect on their productivity in the long run. However their morale is high, they are enthusiastic, committed and dedicated to their work. This is very encouraging and the project needs to find ways of sustaining it. The staff expressed concern about shortcomings of some of their benefits particularly the medical cover.

Suggestions on improvement

- Identify gaps in knowledge and skills and offer appropriate training.
- Improve the working conditions e.g. working hours, remuneration etc
- Redefine and clarify the project staff job description and roles.
- There is need for the development of discussion guides which are responsive to the needs of the various community groups.
- Network with other stakeholders who have expertise.

STAFF TRAINING

So far the project staffs appreciate the training they have undertaken. This has improved their performance in the field. The following were some of the proposed areas of need which they would require to be considered for further training;

- Financial management and budgeting for the team leaders and coordinators
- Counseling
- Advocacy and social work
- Computer handling
- Care and support
- Proposal writing
RECOMMENDATIONS AT OUTPUT AND ACTIVITY LEVEL: TO MAKE THE PROJECT MORE EFFECTIVE IN REACHING ITS MAIN OBJECTIVES.

Comprehensive Response
We have noted that there is need to develop a comprehensive behaviour change approach for HIV prevention, care and support in the communities. The FPFK team has observed that awareness levels vary considerably from one region and site to another. For example in Loitokitok the FPFK project staff indicated very low awareness levels as compared to Oyugis in Nyanza region which had very high awareness levels whose priority need is care and support. There exist sharp contrasts in some pockets of Nyanza region such as Nyamira and Gucha districts which have considerably very low levels of awareness.

To be able to have a successful intervention a comprehensive approach will be able to cater for the varied levels and needs of the different communities. Besides the current model which only focuses on awareness, there is need to introduce a communication model that supports behaviour change.

Behaviour change communication (BCC)
BCC is an approach that is used to support an individual's ability to adopt and to maintain new behaviors and Information, Education, Communication (IEC) which has primarily been the focus of the FPFK project, is centered on disseminating messages and raising community awareness. This implies that the current awareness approach should continue complemented with the new behaviour change communication (BCC) approach.

It is important to know that there are several factors that influence behaviour and which must be considered for any BCC intervention to be effective. The diagram below illustrates the dynamics of the various dimensions.
Factors Influencing Individual Behaviour

- Individual
  - Knowledge
  - Attitudes
  - Self-efficacy
  - Behaviours

- Community
  - Partners/Family
  - Peers
  - Community Leaders

- System Support
  - Services
  - Products
  - Quality of Care

Programmatic issues for a comprehensive HIV/AIDS intervention

- PRIORITY COMMUNITIES
  - Orphans and Vulnerable children
  - STI Services
    - Upgrade facilities
    - Training
  - Community Mobilization for home-based care
  - Interventions targeting High Risk and Vulnerable Populations through peer education
    - Women
    - Men
    - Youth in school
    - Youth out of school
  - Referral to Services
  - TB
    - Upgrade and link with Government Services
  - PLWHA Support Groups
  - VCT
    - Centers in priority communities
  - Micro Enterprise Development
  - Uniting Communication Strategy:
    - Local mass media, promotion of services, increase credibility
Outcome, impact and effects (are goals and objectives being met?)
1. Analyze the impact or assess future impact of the project to the society.

Based on the process evaluation and information from the various stakeholders it is generally acknowledged that some objectives are being met. However as the evaluation team we cannot conclusively confirm the impact of the activities already carried out. This is technically because of lack of baseline information. Nevertheless the project has high potential of having great impact especially with the proposed comprehensive HIV/AIDS approach.

Suggestions for improvement
- Conduct a comprehensive baseline study before beginning the next phase.
- Develop monitoring tools for tracking down progress.
- A comprehensive end of project evaluation.

Sustainability and total time frame of the project
2. In light of the efficiency, effectiveness and outcome, analyze the degree of sustainability for the project activities.

3. To achieve the goal of sustainability for project activities or to achieve the changes in attitudes and awareness, what total time frame is needed for the project to succeed?

4. Analyze the possibility of a local (churches) take over the project.

Emerging issues
Sustainability issues will be addressed with the introduction of the proposed comprehensive broad based HIV and AIDS approach.

Suggestions for improvement:
- Ownership – encourage community participation in the project process (design, implementation, monitoring and evaluation).
- The following activities will ensure continuity of the project activities:
  - Peer education
  - Pastoral counseling
  - Teachers training
- Development of new partnerships models
• Broadening the current donor base
RECOMMENDATIONS

Geographical coverage
• Concentrate and intensify activities in few sites to create greater impact.

Administrative structure and project management
• We recommend a forum that will provide the project staff, PSC, and the National board with an opportunity to discuss project issues. For example quarterly meetings between the PSC and Project staff, and with the National board once a year.
• Establish an operational base in the regions manned by a technical person to provide support and monitor activities.
• Redefine and clarify the role of all the project staff; project coordinator, project leader, area coordinators, team leaders, and evangelists to avoid conflict in roles.

Project design
• We recommend the development of a comprehensive behaviour change approach for HIV prevention, care and support in the communities.
• Initiate the peer education approach both in school and the community.
• The current awareness approach should continue complemented with the new behaviour change communication (BCC) approach.
• Conduct a comprehensive baseline study before beginning the next phase; develop monitoring tools for tracking down progress followed by a comprehensive end of project evaluation.

Sustainability
• To encourage ownership we recommend community participation in the project process (design, implementation, monitoring and evaluation).
• The project should establish linkages with micro-finance institutions (MFI’s) and Source for seed money for a revolving fund. Consequently Churches, women and youth groups to be encouraged to start activities such as merry-go-round.
**Capacity building**

- Identify gaps in knowledge and skills and offer appropriate training to the managerial team, the project staff and key stakeholders.

**DISSEMINATION PLANS**

The evaluation will be presented to the relevant stakeholders in oral and written presentations. The first presentation of the draft report will be done on the 25th February, 2004. The final report will be submitted to FPK management on the Friday 27th February, 2004.
ANNEXES

DATA COLLECTION TOOLS

FPFK NATIONAL BOARD AND PROJECT STEERING COMMITTEE DISCUSSION GUIDE

General questions:
- What in your opinion are the major achievements of the project?
- What have been the major challenges?
- If you were asked to start a similar project again, what is it you will want to do differently? Why?
- What is it you will never want to do again? Why
- Was the project planning inclusive?

Project Design
- Do you think the goal; purpose and objectives of the project were well designed (some may not know so will need to remind them!)
- What is the time frame required for the project activities to make an impact?
- Has the project been able to target the key groups?
- Is there a group that you think was left out and needs to be included in future design?

Administrative structure
- What is the role of the FPFK National Board?
- What is the role of the Project Steering Committee?
- Do you think the current project administrative structure is effective? If not Why?

Project Management
- What are the successes of the current management team?
- What are their failures if any?
- What changes would you recommend?
- Do you need to build the capacity of the managers and staff? If yes in what areas?
Stakeholders Participation

- What has been the role of the stakeholders?
- Are they effectively prepared to participate in the project
- What is their level of participation?
- Do they view themselves as partners or beneficiaries?

Effectiveness, efficiency, outcomes and sustainability

- Do you think this has been the best way to spend the resources?
- Among the activities undertaken since project inception, which ones have been most successful?
- Which ones have had least impact?
- Are the stakeholders and beneficiaries adequately prepared to sustain the project? If not what needs to be done?

Public relations

- What public relations activities were you involved in as a board to boost the projects profile?
- What other PR activities would you like to effect both at the community and national level?

FOCUS GROUP DISCUSSION GUIDELINES FOR THE COMMUNITY TEAM
(LOITOKITOK AND NYANZA REGION)

1. What activities are you involved in organized by FPFK?
2. When did you start getting involved in the FPFK activities?
3. What role do you play in the project activities?
4. Does the community support these activities? How?
5. How do you feel members of this community have responded to this intervention?
6. How else can you be involved in these activities?
7. What have been the strengths of this intervention from your perspectives?
8. What have been the weaknesses of this project and how could they be addressed in future activities?
9. What are the lessons to be learned from the community’s experience with the project that FPFK can use in future projects? How would you do things differently?

10. According to your opinion have the needs of the community been addressed?

11. What are some of the indicators in the community that demonstrate that knowledge on HIV/AIDS is high or low?

12. What is the level of acceptance of PLWA in the community? How about in the churches?

**LIST OF RESPONDENTS**

**OYUGIS COMMUNITY TEAM**

<table>
<thead>
<tr>
<th>Name</th>
<th>Designation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Jacob Ogufo Madala</td>
<td>Assistant Chief Kokwanyo</td>
</tr>
<tr>
<td>2. Pastor G. William Simba</td>
<td>Oyugis Church</td>
</tr>
<tr>
<td>3. Oketh Joshua O.</td>
<td>Education Office</td>
</tr>
<tr>
<td>4. Rosemary Olum</td>
<td>Education Office</td>
</tr>
<tr>
<td>5. Lillian Olela</td>
<td>Teacher</td>
</tr>
<tr>
<td>6. Grace Akinyi</td>
<td>Oyugis Intergrated Project</td>
</tr>
<tr>
<td>7. Florence Akinyi</td>
<td>Oyugis Intergrated Project</td>
</tr>
<tr>
<td>8. Mark O. Orwa</td>
<td>Ministry of Health</td>
</tr>
</tbody>
</table>

**KEGOGI DIVISION COMMUNITY TEAM**

<table>
<thead>
<tr>
<th>Name</th>
<th>Designation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Thomas Ogembo Ondieki</td>
<td>ZIS, Kegogi Zone</td>
</tr>
<tr>
<td>2. Vincent Bosire Onyiego</td>
<td>Chief Kegogi Location</td>
</tr>
<tr>
<td>3. James A. Orina</td>
<td>Headteacher Tambacha</td>
</tr>
<tr>
<td>4. Robert Mokaya</td>
<td>Headteacher Itumbe D.E.B.School</td>
</tr>
<tr>
<td>5. Josiah Nyangoya</td>
<td>Headteacher Nyakoora D.O.K.</td>
</tr>
<tr>
<td>6. Zachary Mageto</td>
<td>Headteacher Riragi FPFK</td>
</tr>
<tr>
<td>7. Nicholas Oyaro Nyamweno</td>
<td>Headteacher Nyakeyo C.O.G.</td>
</tr>
<tr>
<td>8. Bartholomew O. Ogembo</td>
<td>Headteacher Mesaria</td>
</tr>
<tr>
<td>9. Justus Masita Nyarieng’a</td>
<td>Headteacher Matembe</td>
</tr>
<tr>
<td>10. Juvenalis N. Otieno</td>
<td>Headteacher Ngokoro</td>
</tr>
<tr>
<td>11. Zachariah Gichana</td>
<td>Headteacher Nyamokenge</td>
</tr>
<tr>
<td>12. Herbert O. Mokaya</td>
<td>Nursing Officer KDH</td>
</tr>
<tr>
<td>13. Robert Amenia</td>
<td>Pastor Motemo FPFK</td>
</tr>
<tr>
<td>14. Wilson Omwoyo Kombo</td>
<td>Chief Metembe/Ngokoro</td>
</tr>
</tbody>
</table>

**NYANZA PROJECT STAFF**
Names | Designation
--- | ---
1. Clement Otieno | Team Leader
2. Karachi Matongo | Member
3. Charles Rajwayi | Area Co-coordinator
4. Onesmus Ndunga | Member
5. Nemwel Agwera | Member
6. Regina Matheka | Member
7. Justus Ondieki Ndubi | Member

**ISARA LOCATION COMMUNITY TEAM**

1. Elijah | Chief
2. Peter Parmutia | Opinion leader
3. Masayus Kone | Opinion leader
4. Amos Selista | Watchman
5. Richard Landon | Administration Police
6. Kisemei Nalenya | Farmer
7. Olemaim | Businessman
8. James Lenani | Treasurer
9. Ole Ntete | Business

**SOUTHERN REGION PROJECT STAFF**

1. Samson Silonkoi | Team leader
2. John Saitoti | Member
3. Miriam Mapena | Member
4. David Simintei | Member

**THE FOLLOWING WERE ALSO RESPONDENTS:**

- All the board members
- All the Project Steering committee
- The Project Leader
- The General Secretary

**THE SCHOOL YOUTH**

14 students from Agoro Sare High school (A class representative from each class)

20 Students were selected at random from different primary and secondary schools in Oloitokitok.

**FGD GUIDELINES FOR IN-SCHOOL YOUTH**

**Introduction**

Begin with an energizer after the formal introduction to break the ice

**General questions:**
When did you start getting involved in these activities?
What role do you play in the project activities?
Are you satisfied with this role?
How has the project benefited you?
Were you or are you ever consulted on project implementation?

School administration support
- What sorts of activities are held in the school?
- When are they conducted?
- Is you given time off by the school to attend the activities?

Community support
- Does the community support these activities?
- Do your parents appreciate your participation?
- Do you share what you learn with your peers and family? When and where?

Quality and frequency of the activities
- Who organizes these events in school?
- How many students attend the sessions?
- How often are they conducted?
- Do you get an opportunity to participate in discussions?
- How long are the sessions?

Sporting activities
- What sort of sporting activities are you involved in organized by the church?
- Who else participates in these activities?
- Do they provide a good forum for HIV and AIDS information dissemination?

Impact among target group
- Do you think these activities have been beneficial? How?
- Which ones are more popular?
- Do you think young people may change their behaviour as a result of these activities?

Young peoples needs
- What are your most immediate needs
- What are your long-term needs?
- How can the project fulfil these needs?

Training and Seminars
- Have you attended any seminars or training in HIV and AIDS?
- What other training/information/activities will benefit you?
- Has the project been able to target the key groups?
| Activity                                      | Who                                      | Prior to evaluation | 5<sup>th</sup> | 6<sup>th</sup> | 9<sup>th</sup> | 10<sup>th</sup> | 11<sup>th</sup> | 12<sup>th</sup> | 13<sup>th</sup> | 15<sup>th</sup> | 16<sup>th</sup> | 17<sup>th</sup> | 18<sup>th</sup> | 19<sup>th</sup> | 20<sup>th</sup> | 23<sup>rd</sup> | 24<sup>th</sup> |
|----------------------------------------------|------------------------------------------|---------------------|----------------|---------------|---------------|---------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|
| Review documents available                   | Evaluation team                          | X                   |                |               |               |               |                |                |                |                |                |                |                |                |                |                |
| Develop data collection instruments          | Evaluation team                          | X                   |                |               |               |               |                |                |                |                |                |                |                |                |                |                |
| Organize and orient fieldwork teams          | Team leader and project staff            | X                   |                |               |               |               |                |                |                |                |                |                |                |                |                |                |
| Meeting with board members                   | Evaluation team                          |                     |                |               |               | 4-5pm         |                |                |                |                |                |                |                |                |                |                |
| Interview team leader                        | Evaluation team                          |                     |                |               |               |               | 10-11          |                |                |                |                |                |                |                |                |                |
| Meeting with steering committee              | Evaluation team                          |                     |                |               |               |               | 10-12 pm       |                |                |                |                |                |                |                |                |                |
| Travel to Loitokitok                         | Evaluation team                          |                     |                |               |               |               |                |                |                |                |                |                |                |                |                |                |
| FGD with community team, pastors, education officer, chief at Isara | Project staff & Evaluation team |                     |                |               |               |               |                |                |                |                |                |                |                |                |                |                |
| Activity                                                                 | Who                          | Prior to evaluation | 5<sup>th</sup> | 6<sup>th</sup> | 9<sup>th</sup> | 10<sup>th</sup> | 11<sup>th</sup> | 12<sup>th</sup> | 13<sup>th</sup> | 15<sup>th</sup> | 16<sup>th</sup> | 17<sup>th</sup> | 18<sup>th</sup> | 19<sup>th</sup> | 20<sup>th</sup> | 23<sup>rd</sup> | 24<sup>th</sup> |
|------------------------------------------------------------------------|------------------------------|---------------------|----------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| View presentations at Mbirikani                                         | Evaluation team             |                     |               |              |              |              |              |              |              |              |              |              |              |              |              |              |
| Interview project staff at Loitokitok                                    | Evaluation team             |                     |               |              |              |              |              |              |              |              |              |              |              |              |              |              |
| Conduct focus group discussions and observations with students in schools | Evaluation team             |                     |               |              |              |              |              |              |              |              |              |              |              |              |              |              |
| Travel to Nairobi                                                       | Evaluation team             |                     | 2-7pm         |              |              |              |              |              |              |              |              |              |              |              |              |              |
| Analyse data collected                                                  | Evaluation team             |                     |               |              |              |              |              |              |              |              |              |              |              |              |              |              |
| Travel to Nyanza                                                        | Evaluation team             |                     |               |              |              |              |              |              |              |              |              |              |              |              |              |              |
| Orientation procedures and interviews with staff                       | Evaluation team and project staff |                   |               |              |              |              |              |              |              | 8.00-10.00am |              |              |              |              |              |              |

Impact Capacity Building Consulting - Committed to performance improvement
| Activity                                                                 | Who                                                                 | Prior to evaluation | 5<sup>th</sup> | 6<sup>th</sup> | 9<sup>th</sup> | 10<sup>th</sup> | 11<sup>th</sup> | 12<sup>th</sup> | 13<sup>th</sup> | 15<sup>th</sup> | 16<sup>th</sup> | 17<sup>th</sup> | 18<sup>th</sup> | 19<sup>th</sup> | 20<sup>th</sup> | 23<sup>rd</sup> | 24<sup>th</sup> |
|-------------------------------------------------------------------------|----------------------------------------------------------------------|---------------------|----------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|
| FGD with pastors, chief, education officer, chief and community team   | Evaluation team                                                     |                     | 11-1 pm        |               |               |               |               |               |               |               |               |               |               |               |               |               |               |
| Conduct focus group discussions with students in schools/colleges      | Evaluation team                                                     |                     | 3-6 pm         |               |               |               |               |               |               |               |               |               |               |               |               |               |
| View presentation                                                      | Evaluation team                                                     |                     | 9-11 am        |               |               |               |               |               |               |               |               |               |               |               |               |               |
| Travel back to Nairobi                                                | Evaluation team                                                     |                     |               |               |               |               |               |               |               |               |               |               |               |               |               |               |
| Data analysis                                                          | Evaluation team                                                     |                     |               |               |               |               |               |               |               |               |               |               |               |               |               |               |
| Report writing                                                         | Evaluation team                                                     |                     |               |               |               |               |               | X             |               |               |               |               |               |               | X             |               |
| Dissemination of findings to stakeholders                              |                                                                     |                     |               |               |               |               |               |               |               | X             |               |               |               |               |               |               |               |

25<sup>th</sup> /2/04
| Activity                  | Who | Prior to evaluation | 5<sup>th</sup> | 6<sup>th</sup> | 9<sup>th</sup> | 10<sup>th</sup> | 11<sup>th</sup> | 12<sup>th</sup> | 13<sup>th</sup> | 15<sup>th</sup> | 16<sup>th</sup> | 17<sup>th</sup> | 18<sup>th</sup> | 19<sup>th</sup> | 20<sup>th</sup> | 23<sup>rd</sup> | 24<sup>th</sup> |
|---------------------------|-----|---------------------|----------------|---------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|
| Finalize with report      |     |                     |                |               |               |               |               |               |               |               |               |               |               |               |               |               | 26<sup>th</sup> to 28<sup>th</sup> |
IMPACT CAPACITY BUILDING CONSULTING

Submitted to:
FREE PENTECOSTAL FELLOWSHIP IN KENYA

EVALUATION OF
HIV/AIDS AWARENESS PROJECT

Prepared By:
Impact Capacity Building Consulting
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Nairobi
00100
Kenya

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BACKGROUND

Impact Capacity Building Consulting (ICBC) is a private consultancy firm established in 2003 to offer consultancy services in the area of communication, training and research in population and health. Since its establishment ICBC has been involved in various projects and training programs with institutions in and out of Kenya through its various consultants. Though established in 2003 the ICBC consultants have a combined experience of more than 20 years in various public and community initiatives.

ICBC’s mission is to enable institutions and communities improve their performance through development of skills, knowledge and attitudes of various stakeholders as well as addressing organizations’ environmental issues that affect performance.

CORPORATE CAPABILITY

ICBCs consultants have a wide range of experience in the area of HIV/AIDS. These include project design, IEC/BCC expertise, prevention, care and support. Our team has experience in the issues of orphans and vulnerable children. Specifically child centred approaches to health and building blocks. The team has vast experience in HIV/AIDS projects and have been involved in a cross section of assignments ranging from policy to implementation of various HIV/AIDS initiatives and have had the opportunity of dealing with stakeholders across the spectrum.

The ICBC consultants have been involved in research and evaluation of projects for numerous clients in Kenya.

Our team has also been involved in the following activities:

- Community based planning, ownership, management, monitoring and evaluation. Design of interventions, and implementation of programs to project monitoring and evaluation.
- Capacity assessment and strengthening for CBOs and other organizations.
- Community mobilization, sensitisation and networking.
- Baseline surveys and feasibility studies/situation analysis.
- Logical framework planning, development and analysis.
- Programme cycle: Needs assessment, problem analysis, appraisal, programme design, implementation, monitoring and evaluation.
- Impact assessment and re-entry planning.
- Proposal writing and fundraising.
- Training of trainers and facilitators.
- Networking for development work.
- Gender mainstreaming in development work.
OUR CLIENTS

Our team has been privileged to provide the above-mentioned services to a number of institutions among them:

- African Medical Research Foundation International (AMREF, HQ)
- AMREF Ethiopia
- All African Conference of Churches
- CARE Ethiopia
- GTZ/ Ministry of Agriculture
- DFID
- Office of the president – Kenya (ARID lands Resource Management Project
- Ministry of Justice and Constitutional Affairs
- Ministry of Education – Higher Education ACU
- Medical Assistance Program (MAP) international
- Concern Worldwide
- International Federation of Red Cross and Red Crescent Societies
- TroCaire
- The Free Pentecostal Fellowship of Kenya
- World Students Christian Federation

4 EXPERIENCES IN SIMILAR CONDITIONS

Our team has had extensive experience in community related projects that have involved community participation in various aspects of project design, implementation and evaluation. We have worked in situations where projects concepts have been clear and understandable to stakeholders as well as in situations were there were ambiguities. Despite these factors we have been able to develop skills to handle community issues as they present themselves.

We also have experience in using participatory approaches in designing community projects, conducting needs assessment and evaluating projects. Our team has also been privileged to work with clients in different parts of the Kenya both with urban and rural population.

5 SKILLS AVAILABILITY

Our team consists of members with the following skills that we consider essential for this type of assignment. The following are highlights of the skills possessed by the team.

- Research - Both qualitative and quantitative methodologies, use of PRA tools etc
• Facilitation skills
• IEC/BCC skills
• Youth and adolescent reproductive health issues
• Child-centred approaches to health
• Orphans and Vulnerable children
• Advocacy

• Community based planning, ownership, management, monitoring and evaluation. Design of interventions, and implementation of programs to project monitoring and evaluation.
• Capacity assessment and strengthening for CBOs and other organizations.
• Community mobilization, sensitisation and networking.
• Baseline surveys and feasibility studies/situation analysis.
• Logical framework planning, development and analysis.
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• Impact assessment and re-entry planning.
• Proposal writing and fundraising.
• Training of trainers and facilitators.
• Networking for development work.
• Gender mainstreaming in development work.

6 THE TEAM

The team consists of four seasoned consultants all who hold advanced degrees, in sociology and business administration. They all are very well versed with community and development issues in Kenya having worked on a number of assignments over the years.

The team consists of:

Catherine Nooseli Lengewa - Managing consultant
Catherine Lengewa, a holder of Masters of Arts Degree in Sociology and a Bachelors of Education Degree. Catherine has been involved in diverse assignments within and outside Kenya. Her strengths are in facilitation, research, counseling, skills development, and needs assessment and project evaluation. In this consultancy she would play the overall project management role and overseeing as well as participating the entire technical process.

Rufus Eshuchi – Associate consultant
Rufus is holder of an MBA degree and a postgraduate diploma in population and development and a BA in sociology. Rufus has strong skills in project development design monitoring and evaluation with a wealth of experience in advocacy and training.
He is an expert in IEC/BCC strategies and has a passion for youth and adolescent reproductive health issues.

**John Njoka – Associate consultant**
John is a holder of MA, Sociology and bachelors of Arts degrees. He is a research fellow with the University of Nairobi Institute of Development studies. He has strong skills in research, monitoring and evaluation. He is very good at baseline surveys, and impact assessment and re-try planning.

**Catherine Ogola – Associate consultant**
Catherine strengths are in facilitation, designing and developing research tools, data collection and analysis and community mobilization. She is very conversant with issues of orphans and vulnerable children. She runs a program on child centred approaches to health. She is currently finalizing her MA in Rural Sociology and community development.

**Loi Muhonja Indiazi Kirui – Associate consultant**
Loi is an evaluator and trainer of community counsellors. She has skills in micro-credit training and micro-funding programming. She has had training and experience in HIV/AIDS program follow up and action research.

The following consultants conducted the FPFK HIV/Aids Awareness Project Evaluation:

- **Catherine Nooseli Lengewa**
- **Rufus Chris Eshuchi**
- **Loi Muhonja Kirui**