

Combined Households' Involvement in Monitoring and Evaluation and Performance of Tanzania Conditional Cash Transfer Project: The Role of Mediating Capacity Building

Bernard Katerengabo^{1,*}, Christopher Gakuu², Harriet Kidombo²

¹Ministry of Health, National Health Insurance Fund, Dodoma, Tanzania

²Faculty of Business and Management Sciences, University of Nairobi, Nairobi, Kenya

Email address:

bkaterengabo@gmail.com (Bernard Katerengabo), cmgakuu@uonbi.ac.ke (Christopher Gakuu), hkidombo@uonbi.ac.ke (Harriet Kidombo)

*Corresponding author

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Abstract: For decades, developing countries have been putting more effort to overcome poverty. Tanzania is one of the countries that introduced the Conditional Cash Transfer Project that targeted households that were identified and verified as poor. The researcher, therefore, aimed to establish the extent to which the mediating Capacity Building influenced the relationship between combined households' involvement in the Monitoring and Evaluation and performance of the Tanzania Conditional Cash Transfer Project. Due to the adoption of a pragmatic paradigm, the study applied cross-sectional and correlation research designs. The Yamane's formula was used to obtain a sample of 400 respondents from the target population of 61,240 households. The questionnaires, key in-depth interviews, and focus group discussions were used to collect data. The findings established a significant influence between combined households' involvement in Monitoring and Evaluation and the performance of the Tanzania Conditional Cash Transfer Project ($t=1.212$, $p\text{-value}=0.05$). However, the addition of capacity building had no significant influence on the performance of the Tanzania Conditional Cash Transfer Project ($t=1.212$, $p>0.05$). Therefore, mediating Capacity Building had no significant influence on the relationship between households' involvement in the Monitoring and Evaluation and performance of the Tanzania Conditional Cash Transfer Project. Therefore, it was recommended that implementers of the project should introduce a training and development plan for imparting skills to households' representatives before engaging them in M&E plans. The skills attained from the training would enable households' representatives to team up with M&E Department and participate in the technical aspects with maximum success.

Keywords: Household, Monitoring and Evaluation, Poverty, Performance, Conditional Cash Transfer

1. Introduction

Monitoring and Evaluation had been evidenced as the catalyst for the performance of development projects [2]. The reports show that efforts to curb poverty in developing countries had not been successfully achieved yet compared to Asia and the Pacific where the rate declined from 62% in 1990 to 3% in 2015 [3]. In Africa, poverty is shooting up whereby the annual rapid population increases at the rate of 2.7%. Such an increase augmented extreme poverty from 278 million in 1990 to 413 million in 2015 [4]. Despite the existence of poverty reduction projects, Valentine, Shukra &

Eugene [2] insisted that organizations that execute community projects ignored participatory monitoring and evaluation approaches. The exclusion of beneficiaries in M&E of projects had left many projects underperforming [5]. Despite the implementation of the Conditional Cash Transfer Project (CCTP), little has been documented regarding the role of moderating capacity building on combined households' involvement in M&E and the performance of CCTP. Therefore, this study established the extent to which the mediating capacity building influenced the relationship between combined households' involvement in the Monitoring and Evaluation and performance of the Tanzania

Conditional Cash Transfer Project.

1.1. Statement of the Problem

The Government of Tanzania established the Conditional Cash Transfer project in 2012 to ensure that by 2025, 15% of the population living in poverty are assisted financially to improve their living standards [6]. Instead of poverty decline, it rose where in 2015 only 1,100,000 (2%) million people were the beneficiaries of the project [7]. The poverty rate had been increasing whereby in 2018, the poverty rate was 26% while in 2020 the rate increased to 27.1% and in 2021 it decreased insignificantly to 27% [8, 9]. This meant the Conditional Cash Transfer Project hadn't brought a significant impact in terms of reducing poverty rate among households. International organizations' reports revealed that the majority of rural people still lived in extreme poverty below \$1.90 per day while the project covered less than 3% of poor Tanzanians [8, 10]. The Continental area that managed to reduce poverty was East Asia and the Pacific. Through the engagement of beneficiaries in the planning, implementation and M&E of their projects, the poverty rate went down from 62% in 1990 to 3% in 2015 [3]. Various scholars evidenced that capacity building of beneficiaries in M&E influenced the performance of projects [11, 13-15]. Therefore, when the beneficiaries were trained on M&E, their participation influenced projects' performance [16-21]. However, those researchers investigated beneficiaries' participation in M&E. The other literature established the role of community involvement in projects where M&E was part of the implementation of projects [22-27]. Additionally, the literature on capacity building assessed its role in the performance and sustainability of projects. This study established the extent to which the mediating capacity building influenced the relationship between combined households' involvement in the Monitoring and Evaluation and performance of the Tanzania Conditional Cash Transfer Project.

1.2. Objective of the Study

The objective of the study was to establish the extent to which the mediating capacity building influences the relationship between combined households' involvement in Monitoring and Evaluation and performance of Tanzania Conditional Cash Transfer Project.

1.3. Study Hypothesis

The following null hypothesis was tested:

H_0 : The strength of the influence between combined households' involvement in Monitoring and Evaluation and performance of Tanzania Conditional Cash Transfer Project does not depend on capacity building of households.

2. Literature Review

Capacity building had been perceived as a catalyst for the performance of projects. Oazi, A. et al. [28] revealed that stakeholders would perform better in the measurement of

Health Service Delivery in Basic Health Units of Punjab if they would have received capacity building on how to perform M&E indicators. Engagement of the community in M&E and provision of capacity building was considered among the factors that enabled the performance of development projects because beneficiaries attained the necessary skills for participatory M&E. Merino & de los Ríos Carmenado [12] asserted that capacity building equipped local people at the individual and social levels to actively participate in the projects M&E because the skills and knowledge gained enabled them to participate in measuring projects goals and ensure they are realized. When stakeholders were aware of the goals, objectives and performance criteria, they could advise on the areas of project's underperformance for immediate actions and improvements. In ensuring collaborative M&E execution among citizens and the project M&E team, Cooper, Fenimore, & Nirenberg [29] and Slimane [37] said project leaders were obliged to provide a capacity building that would enable the community to stand alone and measure the impacts of the project to their communities. Oakley & Marsden [30] recommended the attainment of sustainable development needed project leaders who would work collaboratively with the local people to enable them to generate answers to their problems. If beneficiaries had received comprehensive capacity building, the community could implement the M&E of their projects and would have inherited the M&E techniques and skills from one generation to another. In another study, Nikezic, Puric & Puric [31] insisted that leaders in projects should ensure that cultural practices are adhered to when engaging the community to participate in the M&E of their projects. In undertaking capacity building, the trainers would find local people's experience on how the cultural issues are taken care and that allows the community to own the M&E process and participate fully together with the project-implementing employees. This eventually develops a competent M&E team that implements M&E and disseminates reports to the local people using a communication system for considering the beneficiaries' values and cultural practices. A study in six countries of Africa by Porter & Goldman [32] revealed the absence of citizen involvement in the Government M&E system whereby M&E was centralized and implemented by Government Officials. Additionally, Burns [33] suggested that the involvement of citizens could be part of project performance if project leaders would decide to take the main responsibility of empowering them through workshops. That would be done specifically to a community representative. Through experiential learning, building local people's skills on M&E systems enable them to learn and apply skills in the M&E of their projects [34]. The organizational leadership of practicing M&E enables the local people to increase their independence in undertaking M&E in the absence of external financial support. Therefore, when the community receives capacity-building workshops, it increases skills on how the

project brings impacts and that enables the community members to clearly understand the changes brought by the project. This was very useful because the community could respond properly during the preparation of reports, project verification, and external evaluations.

3. Methodology

This research employed pragmatic paradigm whereby data were collected, analyzed and visualized using both quantitative and qualitative approaches. Pragmatic paradigm allows a researcher to use a combination of constructivist and positivist philosophies. Questionnaires collected quantitative data while interview guide and focus groups discussions were used to collect qualitative data. Target population was 61,240 households, 441 village committees each comprising of 10 members and 8 Monitoring Officers. From the households, the sample of 400 respondents were obtained by using Yamane formula [1].

$$n = \frac{N}{1+N(e)^2}$$

Where n = Sample size

N = Population size

e = Level of precision

Sample size considered 95% level of confidence with precision of 7.5 and a variability of 50%. The computation is shown below;

$$n = \frac{61,240}{1+61,240(0.05)^2}$$

$$n = 400$$

The researcher selected Village Committee members for forming the focus group discussions whereby each group had 10 people. The total number of respondents from FGDs was 80. The researcher used Monitoring Officers for in-depth interviews. Therefore, all 8 Monitoring Officers were purposively selected because of their vast supervisory skills and experience in managing Conditional Cash Transfer Projects at the District levels. Statistical tests were performed to ensure the relevant assumptions are met. Descriptive statistics used the central tendency, standard deviation, and variance while Pearson correlation and regression analysis were used for inferential statistics. A simple linear regression was used to establish the causal relationship between variables. Content analysis was used to analyze qualitative data.

4. Findings

This section presents the analysis, interpretation and discussion of study findings. Regarding the return rate, a total of 400 households responded to the questionnaires which is equivalent to 100%. By using the mixed method, the researcher collected data from questionnaires, focus group discussions and key in-depth interviews. Descriptive analysis was done by testing the mean and standard deviation. Also the researcher adopted inferential analysis using Pearson's

correlation, coefficient of adjusted R, simple linear and hierarchical regression models.

4.1. Demographic Characteristics of Respondents

The research study assessed the age, gender, marital status, level of education and occupation of respondents. The findings are presented in the Table 1.

Table 1. Demographic characteristics of respondents.

| Respondents profile | Frequency | Percent |
|---------------------|-----------|---------|
| Age | | |
| 18-26 | 4 | 1 |
| 27-35 | 13 | 3 |
| 36-44 | 62 | 16 |
| 45-53 | 80 | 20 |
| Above 53 | 241 | 60 |
| Total | 400 | 100 |
| Gender | | |
| Male | 77 | 19 |
| Female | 323 | 81 |
| Total | 400 | 100 |
| Marital status | | |
| Married | 134 | 33.5 |
| Single | 1 | 0.25 |
| Widowed | 187 | 46.75 |
| Divorced | 78 | 19.5 |
| Total | 400 | 100 |
| Level of education | | |
| No schooling | 191 | 47.75 |
| Primary | 206 | 51.5 |
| Secondary | 3 | 0.75 |
| Total | 400 | 100 |
| Occupation | | |
| Farmer | 361 | 90 |
| Small businesses | 39 | 10 |
| Total | 400 | 100 |

The majority of respondents 383 (95.8%) were above 35 years while only 17 (4.3%) were below 35 years. Youths were few, because they migrated to urban areas seeking for employment. Gender wise, 77 (19.3%) of the respondents were male while 323 (80.8%) were female. Females as heads of households were many because of the high rate of divorces and abandonment by husbands. On marital status, the majority of the respondents 187 (46.8%) were widows, 134 (33.4%) were married, 78 (19.5%) were divorced, and only 1 (0.3%) was single. That implies that the vast majority of respondents were married and widowed. Women were widows because of higher death rates among men who migrated to urban areas. Education-wise, majority 206 (47.8%) of the respondents had primary education, 191 represented 47.8% had not gone to school, while only 3 (0.8%) had secondary education. Drop-outs were due to inability to pay school fees. Regarding occupation, the majority of the respondents 361 (90.3%) were farmers, while 39 (9.8%) were engaged in running small businesses.

4.2. Analysis of Capacity Building

Capacity building was measured using the following indicators: households' training on setting goals, indicators, data collection and households' training on measuring impacts.

Results on this variable are shown in Table 2.

Table 2. Results on capacity building.

| SN | Item | N | SD | D | N | A | SA | M | SD |
|-----------------------|--|-----|--------------|------------|-----------|-----------|----------|------|-------|
| 1 | Households' training on setting goals | 400 | 386 (96.5%) | 5 (1.25%) | 8 (2.0%) | 1 (0.25%) | 0 (0.0%) | 1.06 | 0.334 |
| 2 | Households' training on setting indicators | 400 | 395 (98.75%) | 4 (1.0%) | 0 (0.0%) | 1 (0.25%) | 0 (0.0%) | 1.02 | 0.180 |
| 3 | Households training on data collection | 400 | 388 (97.0%) | 11 (2.75%) | 0 (0.0%) | 1 (0.25%) | 0 (0.0%) | 1.04 | 0.221 |
| 4 | Households' training on measuring impacts | 400 | 374 (93.5%) | 13 (3.25%) | 10 (2.5%) | 3 (0.75%) | 0 (0.0%) | 1.11 | 0.435 |
| <i>Means of Means</i> | | | | | | | | 1.06 | 0.293 |

The composite mean and standard deviation (M=1.06, SD=0.293), implies that all respondents strongly disagreed in all the indicators that they were involved in capacity building. Descriptive results also show that responses concentrated around the mean and the lower level of standard deviation. That implies that the level of capacity building among households was low. Thus, the majority strongly disagreed that they were involved in capacity building.

4.3. Analysis of the Performance of Tanzania Conditional Cash Transfer Project

Performance was measured the following indicators; number of jobs created, amount of food harvested, income earned from the harvest, households' ability to finance health care, number of hospital delivery and number of children who completed schools. Results are shown in Table 3.

Table 3. Results on the performance of Tanzania Conditional Cash Transfer Project.

| SN | Indicator | N | SD | D | N | A | SA | M | SD |
|-----------------------|--|-----|--------------|-------------|-----------|--------------|------------|------|-------|
| 1 | Number of jobs created | 400 | 148 (37%) | 57 (14.25%) | 6 (1.5%) | 156 (39%) | 33 (8.25%) | 2.67 | 1.497 |
| 2 | Amount of food harvested | 400 | 74 (18.5%) | 84 (21%) | 0 (0.0%) | 180 (45%) | 62 (15.5%) | 3.18 | 1.412 |
| 3 | Income earned from the harvest | 400 | 222 (55.5%) | 49 (12.25%) | 0 (0.0%) | 106 (26.5%) | 23 (5.75%) | 2.15 | 1.455 |
| 4 | Households' ability to finance health care | 400 | 273 (68.25%) | 41 (10.25%) | 1 (0.25%) | 76 (19%) | 9 (2.25%) | 1.77 | 1.264 |
| 5 | Number of hospital delivery | 400 | 155 (38.75%) | 55 (13.75%) | 5 (1.25%) | 171 (42.75%) | 14 (3.5%) | 2.59 | 1.445 |
| 6 | Number of children who completed schools | 400 | 110 (27.5%) | 35 (8.75%) | 0 (0.0%) | 169 (42.25%) | 86 (21.5%) | 3.23 | 1.559 |
| <i>Composite Mean</i> | | | | | | | | 2.6 | 1.439 |

The mean and standard deviation indicated that responses concentrated around the mean (M=2.60, SD=1.439), implying that respondents agreed with most indicators on the performance of the project.

Therefore, the majority of respondents agreed that the performance of the Tanzania Conditional Cash Transfer Project was composed of a combination of variables.

4.4. Test of Hypothesis

Capacity building was measured using the following;

H_0 : "The strength of the relationship between combined households' involvement in Monitoring and Evaluation and performance of Tanzania Conditional Cash Transfer Project depend on capacity building of households."

H_1 : "The strength of the relationship between combined households' involvement in Monitoring and Evaluation and performance of the Tanzania Conditional Cash Transfer Project does not depend on capacity building of households."

Hierarchical regression analysis determined the mediating influence of capacity building on the relationship between combined households' involvement in M&E and the performance of the Tanzania Conditional Cash Transfer Project. Two models were applied, the first model analyzed the combined households' involvement in M&E, while the second model analyzed both combined households' involvement in M&E and capacity building. The results are presented in Table 4.

Table 4. Hierarchical multiple regression analysis.

| Model | R | R Square | Adjusted R Square | Std. Error of the Estimate | Change Statistics | | | | |
|-------|-------------------|----------|-------------------|----------------------------|-------------------|----------|-----|-----|---------------|
| | | | | | R Square Change | F Change | df1 | df2 | Sig. F Change |
| 1 | .381 ^a | .145 | .143 | .15459 | .145 | 67.717 | 1 | 398 | .000 |
| 2 | .385 ^b | .149 | .144 | .15450 | .003 | 1.470 | 1 | 397 | .226 |

a. Predictors: (Constant), Combined households' involvement in Monitoring and Evaluation

b. Predictors: (Constant), Combined households' involvement in M&E, Capacity building

The findings of Model 1 show that combined households' involvement in M&E had the Adjusted R Square value of .143. This means that a combined involvement in M&E accounted for 14.3% of the variance in performance of Tanzania Conditional Cash Transfer Project. The findings in Model 2 shows that when capacity building was added, Adjusted R

Square increased to .144. That meant combined households' involvement in Monitoring and Evaluation with addition of capacity building accounted for 14.4%. The change of Adjusted R² between Model 1 and 2 was 0.003. This means the addition of capacity building of households' in Monitoring and Evaluation in combined households' involvement in

Monitoring and Evaluation contributed to 0.3% additional variance in performance of Tanzania Conditional Cash Transfer Project, which is not a statistically significant increase ($p > 0.05$). The coefficients of Hierarchical Multiple Regression

were done to analyze mediating effect of capacity building on the relationship between combined households' involvement in M&E and performance of Tanzania Conditional Cash Transfer Project. The results are presented in Table 5.

Table 5. Coefficients of hierarchical multiple regression analysis.

| Model | | Unstandardized Coefficients | | Standardized Coefficients | | 95.0% Confidence Interval for B | | |
|-------|----------------------------------|-----------------------------|------------|---------------------------|--------|---------------------------------|-------------|-------------|
| | | B | Std. Error | Beta | t | Sig. | Lower Bound | Upper Bound |
| 1 | (Constant) Combined | 0.363 | 0.009 | | 40.332 | 0.00 | 0.345 | 0.381 |
| | households' involvement in M&E | 1.144 | 0.139 | 0.381 | 8.229 | 0.00 | 0.871 | 1.418 |
| 2 | (Constant) Combined households' | 0.363 | 0.009 | | 40.368 | 0.00 | 0.345 | 0.381 |
| | involvement in capacity building | 1.058 | 0.156 | 0.352 | 6.769 | 0.00 | 0.75 | 1.365 |
| | | 0.184 | 0.152 | 0.063 | 1.212 | 0.226 | 0.115 | 0.483 |

a. Dependent Variable: Performance of Tanzania Conditional Cash Transfer Project

The results showed that combined households' involvement in M&E ($t=8.229$, $p < 0.05$) significantly influenced performance while addition of capacity building ($t=1.212$, $p > 0.05$) had no significant influence on performance of Tanzania Conditional Cash Transfer Project. Therefore, the null hypothesis was accepted that the strength of relationship between combined households' involvement in M&E and performance of Tanzania Conditional Cash Transfer Project did not depend on capacity building.

5. Discussion of Findings

Although performance of the Tanzania Conditional Cash Transfer Project did not depend on capacity building, Ondieki [11] said effective capacity building was the catalyst for performance of community projects. Additionally, measurement of health services delivery in basic health Unit of Punjab was done better by stakeholders who received capacity building [28]. For capacity building to be effective and useful, Mugo, N. et. al [13] says project team must prepare the training and workshop plan. In this study, the project had not established the training plan for households. Therefore, the households were unaware of M&E. That is why Shriberg & MacDonald [35] asserted that M&E capacity building invests the knowledge that can be shared among generations to ensure projects bring impacts to the communities. Additionally, Porter & Goldman [32] viewed M&E capacity building as a way of disseminating knowledge to the few households who eventually participate and interpret M&E reports for their fellow using the local language. Despite the studies that supported the influence of participatory M&E on performance of projects, some studies revealed that the communities were involved in M&E but its influence on performance was low [14, 15]. The findings from Rogito, Maitho & Nderitu [14], Oakley & Marsden [30] support this study that beneficiaries were not trained on M&E and therefore their participation was low. Although households were not involved in M&E in this study, Merino & de los Ríos Carmenado [12] explained that capacity building plays a role of equipping the local people at the individual and social levels with technical skills of

participating in M&E to ensure the projects goals are realized. That is why World Bank [36] recommended to project leaders to provide capacity building in ensuring what Nikezic, Puric, & Puric [31] terms it as avoidance of implementation of M&E without compromising with citizens' cultural values. Scheirer [38] asserted that for capacity building to be successful, it should be implemented in an ethical and professional manner. Therefore, capacity building influence the performance of projects if beneficiaries are trained and if the trainings are done in an ethical way in adherence to cultural values.

6. Conclusion

Capacity building had no influence on the relationship between combined households' involvement in Monitoring and Evaluation and performance of Tanzania Conditional Cash Transfer Project. Capacity building had no influence because households were not engaged in M&E and therefore even training plan for them was not in place. Therefore, if households had engaged in with Monitoring and Evaluation team they could be capacitated through Village Committees M&E meetings and the same could be disseminated to households. Therefore, capacity building of households plays the role in creation of awareness and increase of households' skills for participating in M&E.

7. Recommendations

Capacity building had no influence on the relationship between combined households' involvement in M&E and performance of the Tanzania Conditional Cash Transfer Project. It was recommended that the project must establish M&E training and development plan for beneficiaries' representatives in the M&E team. Capacity building will enable M&E Department to perform and ensure the households are able to participate in the technical aspects of M&E. This study recommends that further studies should examine the households' involvement in M&E capacity building and performance of Tanzania Conditional Cash Transfer Project.

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