THE RELEVANCY OF TRAINING PROGRAMS OF HIV/AIDS COMMUNITY BASED ORGANIZATIONS FUNDED BY NACC: A CASE STUDY OF KURIA DISTRICT

BY

CHACHA, LUCAS MATIKO
REG. NO. D 53 / OL / 1722 / 02

A RESEARCH PROJECT SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR AWARD OF MASTER OF BUSINESS ADMINISTRATION (HUMAN RESOURCE MANAGEMENT) OF KENYATTA UNIVERSITY.
Declaration

This Research Project is my original work and has not been presented for a degree or any other award in any other university.

Signature........................................ Date: Dec. 14, 2006

CHACHA LUCAS MATIKO
REG. NO. D53 / OL / 1722 / 02

The candidate under my supervision as the University Supervisor has carried out this Research Project work.

Signature........................................ Date: 15/1/07

JUDITH OLUOCH
Business Administration Department
Kenyatta University

Signature........................................ Date: 05/02/07

DR. NAMUSONGE
Chairperson Business Administration Department
Kenyatta University.
Dedication

This project work is specially dedicated to my parents Mr. & Mrs. Chacha Chagina who though not educated themselves have great support and sacrifice for their children’s education. May God give them long lives.
Acknowledgement

To the Almighty God, the Most High for His enduring mercies to me since the start of this work to this far.

Special thanks to my Supervisor M/s Judith Oluoch for her wise counsel and availability to me whenever I needed her guidance.

To my dear wife Editer and the children who missed my presence when I dedicated most of my time to this project work and the encouragement they gave me.

Special acknowledgement also to Mrs. Anne Mosenda and my colleagues in the struggle Stephen Muniko, Jacob Onyiego, Samuel Mutukaa, Evans Oyoo, M/s Milcah Arucho and Moses Malande for their support and immense contributions.

Lastly to the staff of Taranganya High School and all those who directly or indirectly gave me their material or moral support during this period.
Abstract

Human resource training is paramount to any organization, which wants quality, relevant and productive Labour force to deliver the required services for its set objectives. Training for workers is necessary as it sharpens their skills and renews their morale for work and keeps them afloat to the ever-changing technological environment.

This project has highlighted background information on training of the HIV/AIDS personnel globally and locally. It has also touched on the institutional framework of NACC as a body handling HIV/AIDS Epidemics in Kenya. The statement of the problem as perceived by the researcher is also highlighted. The project was intended to investigate the relevancy of human resources training programmes of HIV/AIDS CBOs funded by NACC, with a view to establish whether they have training policies, training methods, how they analyse their training needs, evaluation and problems associated with staff training.

In literature review, the researcher has looked at what has been done in the area of training by the early researchers. In the conceptual framework where training policies, training needs analysis, training and development methods and training evaluation are perceived by the researcher as independent variables which when properly organized or handled will result into relevant training programme which will enhance training performance positively leading to achievement of set objectives.

The study was carried out in Kuria District where a questionnaire was used to gather data from the HIV/AIDS CBOs sampled by area clustering technique and analysed by descriptive statistics with the help of SPSS techniques for data analysis and presentation. The results of this study have been used to recommend ways and means of improving training of human resources in the HIV/AIDS CBOs in the country. Study gaps for future research have also been identified.
# Table of contents

Project title.................................................................................................................. i
Declaration .................................................................................................................... ii
Dedication .................................................................................................................... iii
Acknowledgement ....................................................................................................... iv
Abstract ...................................................................................................................... v

## Table of contents

vi
List of tables ................................................................................................................ ix
List of figures ................................................................................................................. x
List of abbreviations .................................................................................................... xi
Definition of Terms ..................................................................................................... xii

### Chapter one

**Introduction** .............................................................................................................. 1

1.0 Overview of chapter one ......................................................................................... 1
1.1 Background information......................................................................................... 1
1.2 Statement of the problem....................................................................................... 8
1.3 Study objectives.................................................................................................... 8
1.4 Research questions............................................................................................... 9
1.5 Significance of the study..................................................................................... 9
1.6 Justification of the study..................................................................................... 10
1.7 Scope of the study.............................................................................................. 10
1.8 Limitation of the study...................................................................................... 11

### Chapter two

**Literature review** ..................................................................................................... 12

2.0 Introduction........................................................................................................... 12
List of tables

Table 1: HIV/AIDS Source Fundings 2001 – 2005 ............................................. 7
Table 2: HIV/AIDS CBOs sample size .............................................................. 34
Table 3: Marital status of Respondents .......................................................... 37
Table 4: Educational level of Respondents ..................................................... 37
Table 5: Age of HIV/AIDS CBOs ................................................................. 38
Table 6: Staff training needs determination methods .................................... 41
Table 7: Methods for selecting staff to train ............................................... 41
List of figures

Figure 1: NACC Institutional framework ................................................. 6
Figure 2: KNASP Financial Estimates 2005 – 2010 ..................................... 7
Figure 3: Researcher’s conceptual framework ........................................... 30
Figure 4: Graphical ages of HIV/AIDS CBOs ............................................ 39
Figure 5: Graphical growth of HIV/AIDS CBOs (1995 - 2005) ..................... 39
Figure 6: Pie chart of HIV/AIDS CBOs Training Methods .......................... 44

VBO: Faith Based Organization
TLAC: International HIV Organization, Africa Coalition
KNASP: Kenya National AIDS Strategic Plan
NACC: National AIDS Council
NASCOI: National AIDS & STD Control Programmes
NPCD: National Council of Population and Development
NDF: Non-Governmental Organizations
PRH: Population Research Hub
UNAIDS: Joint United Nations Programme on HIV/AIDS
UNDP: United Nations Development Programme
UNODC: United Nations Office for Public Information
VCT: Voluntary Counseling and Testing
WHO: World Health Organization
## List of Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACU</td>
<td>Aids Control Unit</td>
</tr>
<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome</td>
</tr>
<tr>
<td>CACC</td>
<td>Constituency Aids Control Committee</td>
</tr>
<tr>
<td>CBO</td>
<td>Community Based Organization</td>
</tr>
<tr>
<td>CBS</td>
<td>Central Bureau of Statistics</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
</tr>
<tr>
<td>FBO</td>
<td>Faith Based Organization</td>
</tr>
<tr>
<td>ITAC</td>
<td>International HIV Treatment Access Coalition</td>
</tr>
<tr>
<td>KNASP</td>
<td>Kenya National HIV/AIDS Strategic Plan</td>
</tr>
<tr>
<td>NACC</td>
<td>National Aids Control Council</td>
</tr>
<tr>
<td>NASCOP</td>
<td>National AIDS &amp; STDs Control Programmes</td>
</tr>
<tr>
<td>NCPD</td>
<td>National Council of Population and Development</td>
</tr>
<tr>
<td>NGOs</td>
<td>Non-Governmental Organizations</td>
</tr>
<tr>
<td>PRB</td>
<td>Population Reference Bureau</td>
</tr>
<tr>
<td>UNAIDS</td>
<td>Joint United Nations Programme on HIV/AIDS</td>
</tr>
<tr>
<td>UNDP</td>
<td>United Nations Development Programmes</td>
</tr>
<tr>
<td>UNDPI</td>
<td>United Nations Department for Public Information</td>
</tr>
<tr>
<td>VCT</td>
<td>Voluntary Counseling and Testing</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
</tbody>
</table>
Definition of terms

Development
A process that brings about growth in the personality, helps an individual to progress towards maturity and actualization of his potential capabilities.

Educate
Give intellectual, moral and social instructions to a person.

Learning
The process by which skills, knowledge, habits and attitudes are acquired and used in behavior modification.

Performance
Refers to productivity, which is measured in terms of effectiveness and efficiency.

Policy
A course or principle of action proposed or adopted by an organization or government.

Programme
The process of organizing a pattern of events each one leading to the other in a systematic and sequential manner. (Watson 1990)

Skill
Special ability to perform an act effectively, which is gained by learning and practice. Skill can be physical, mental or social abilities that people learn through practical training.

Training
The formal and systematic modification of behavior through learning, which occurs as a result of education, instruction, development and planned experience to a person. (Armstrong 2001).
CHAPTER ONE

INTRODUCTION

1.0 Overview of chapter one

This chapter gives background information about the study project, statement of the problem, objectives of the study, the research questions, significance, justification, scope and limitation of the study.

1.1 Background Information

The World Health Organization (WHO) agency UNAIDS estimates that about 42 million people world wide were infected with HIV/AIDS by the end 2002 with more than half believed to have acquired the disease between the age of 15-24 years. About 29.6 million people (over 70%) of the world’s HIV/AIDS cases are found in sub-Saharan Africa where the disease is becoming the leading cause of mortality. To many around the world the image of famine in Africa is closely linked to drought and in some countries war. But even when there is no drought or other a cute crisis, about 200 millions Africans suffer from chronic hunger. The reasons are multiple; low farm productivity, grinding poverty, the ravages of HIV/AIDS and unstable domestic and international policies. (Africa recovery 2003)

"If AIDS is to be prevented, it must first be managed. The management of AIDS starts with caring for individuals infected with HIV. But care also provides an entry point for prevention. Through counseling and education of people with AIDS, their families, and community groups, health providers can help to promote the changes in sexual behavior needed to prevent HIV transmission. Effective AIDS management demands a multi-

in a broader health care setting..."
disciplinary approach and personnel who are open, flexible and mutually enabling with inherent strengths of community groups and institutions. (Campbell 1990).

On 22nd September 2003 the director-general of WHO declared the emergency expansion of training and capacity development for health professionals for delivering simplified, standardized antiretroviral treatment to be a priority for every organization involved in the prevention and treatment of HIV/AIDS initiatives.

Globally, more and more people need to be trained for their contribution in managing and delivering antiretroviral treatment services, those working on testing and counseling and any other entry points of HIV/AIDS management stages. AIDS management needs to build on the experience of successful capacity-building efforts and harness existing expertise to strengthen training capacity at regional and countries level. (WHO 2003). Human capacity-building plan for scaling up HIV/AIDS management identified five elements that are critical for building and sustaining human capacity;

(i) Making available simple and appropriate training programs on key competencies for antiretroviral therapy.
(ii) Designing country-specific approaches to training and human resources development.
(iii) Providing targeted technical assistance for rolling out training programs.
(iv) Ensuring availability of sufficient funds for implementing training activities.
(v) Developing training certification and quality control mechanisms.

Countries are challenged to explore innovative methods of providing training, encouraging the use of multiple potential training providers and reaching a maximum number of trainees in a broader approach to HIV/AIDS prevention and care and support for people living with
HIV/AIDS. Some countries have already trained hundreds of professional and lay service providers, and national and international organizations have developed a variety of training materials for a number of groups. WHO will work towards making available simple but appropriate training packages that can be easily adapted by in-country training providers. Such training packages will add value to existing efforts and facilitate the establishment of additional training opportunities. Training packages will need to be standardized, focus on essential core competencies, flexible and adaptable to a range of different training context and modalities, such as residential short Courses and in-service and pre-service training.

WHO requires that countries develop a national approach to training of HIV/AIDS experts with well developed local training programs which are cost-effective to enhance HIV/AIDS education. Many institutions have successfully established training programs at the countries level and will be able to build on their own experience to significantly scale up training. Although such institutions will not have difficulty in taking on board new developments and standards, other institutions are challenged to start to develop their own training capacity.

Nevertheless many institutions have developed impressive training programs globally under the co-ordination of International HIV treatment Access Coalition (ITAC) in collaboration with forum for collaborative AIDS research. (WHO 2003). UNAIDS (2001) notes that various efforts have been made by NGOs and CBOs in the prevention and control of HIV/AIDS across many countries in Africa through the co-ordination of their various national bodies dealing with HIV/AIDS including support for various publications on HIV/AIDS, Seminars and Workshops for the sensitization initiatives on HIV/AIDS.

The war against AIDS by the government of Kenya has been immense, on 24th Sept. 1997, sessional paper NO. 4 on AIDS in Kenya was approved in parliament with intend to
develop effective programs to control the spread of AIDS to protect human rights of those affected by HIV/AIDS and to provide care for those infected and affected by HIV/AIDS. The goal was to provide a policy framework within which AIDS prevention and control efforts will be undertaken for the next 15 years and beyond with objectives among them, recommend an appropriate institutional framework for effective management and coordination of HIV/AIDS program activities.

NACC was established as a co-corporate body under the state corporations Act by presidential order in legal Notice NO. 170 of 26th Nov. 1999 with a mission statement To provide policy and strategic framework for mobilizing and coordinating resources for prevention of the HIV transmission and provision of care and support to the infected and affected people in Kenya”. A number of efforts existing countrywide are combating the HIV/AIDS epidemic, they include those of the Government, NGOs, CBOs, Religious groups and development partners.

NACC is the administrative body with the following responsibilities;

(i) Co-ordinate and supervise HIV/AIDS activities in Kenya.

(ii) Mobilize resources for HIV/AIDS control and prevention.

(iii) Develop policy, strategy and guidelines relevant to the prevention and control of HIV/AIDS.

(iv) Develop sector specific HIV/AIDS programs.

(v) Develop national management information system for HIV/AIDS control.

(vi) Collaborate with local and international agencies that work in AIDS control.

(vii) Develop appropriate mechanisms for monitoring and evaluating programs dealing with HIV/AIDS.

(viii) Assume leadership role in advocacy and public relations of HIV/AIDS.
The figure 1 below gives a diagramatic institutional framework of NACC, which shows its organisation from the top (Office of the President) to the bottom (Community level).

Figure 1: National AIDS Control Council Institutional Framework

Enormous resources have been spent and more are yet to be spent by the government and the donors in their effort to fight HIV/AIDS in Kenya as is revealed by the table 1 below.

**Table 1: Total HIV/AIDS resources by source of funding**


<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>GOK</td>
<td>70</td>
<td>10</td>
<td>120</td>
<td>40</td>
<td>156</td>
<td>396</td>
</tr>
<tr>
<td>Donors</td>
<td>302</td>
<td>1,165</td>
<td>1,796</td>
<td>2,685</td>
<td>6,794</td>
<td>12,742</td>
</tr>
<tr>
<td>Budgetary</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Donors non-</td>
<td>1,760</td>
<td>3,539</td>
<td>4,136</td>
<td>5,487</td>
<td>11,961</td>
<td>26,884</td>
</tr>
<tr>
<td>budgetary</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NGOs</td>
<td>10</td>
<td>26</td>
<td>19</td>
<td>22</td>
<td>52</td>
<td>129</td>
</tr>
<tr>
<td>Households</td>
<td>-</td>
<td>4</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>4</td>
</tr>
<tr>
<td>Total</td>
<td>2,142</td>
<td>4,744</td>
<td>6,071</td>
<td>8,234</td>
<td>18,963</td>
<td>40,155</td>
</tr>
</tbody>
</table>

In the figure 2 above shows the financial estimates for the year between 2005 – 2010, which will be spent on HIV/AIDS in Kenya as revealed by KNASP report in 2005.

However, the staffs of civil society organizations have been accused of laxity, corruption, lack of transparency, misuse of donor funds to enrich themselves, non-existing programs which they claim to be implementing among other evils. This has led to major donor (Global fund) to withhold HIV/AIDS funds for Kenya from the start of this year due to lack of accountability (Daily Nation Newspaper 3rd, May 2006). It was from such revelations...
that, this project investigated the relevancy of the human resource training and development programs of the HIV/AIDS CBOs funded by NACC.

1.2 Statement of the problem

A lot of efforts have been directed to the fighting of HIV/AIDS in Kenya by both the government and donor agencies through civil society organizations. However, the seriousness of these civil society organizations in the performance of their noble duties of creating awareness, control and prevention of HIV/AIDS epidemic has been doubted by the same government, donor agencies and even civil society as a whole. Sexual promiscuity is still rampant in the society, retrogressive cultural practices like Female Genital Mutilation (FGM), female to female ‘marriages’ among others are still part and parcel of human lifestyle in the society.

The researcher therefore investigated the relevancy of the human resources training programs of the HIV/AIDS CBOs and specifically those funded by NACC in Kuria District to gauge their appropriateness in the creation of awareness, Management, control and prevention of HIV/AIDS epidemic from swallowing the entire human society. The HIV/AIDS CBOs must have the right people for them to do the right thing. Otherwise resources might be spent on ineffective programs, which may not achieve the desired results.

1.3 Study objectives

The general study objective was to investigate the relevancy of the human resource training programs of the HIV/AIDS CBOs funded by NACC in Kuria District.
Specific objectives

(i) To find out whether the HIV/AIDS CBOs have training policies.
(ii) To determine how HIV/AIDS CBOs carry out their training needs analysis.
(iii) To identify the training and development methods HIV/AIDS CBOs use.
(iv) To examine how training evaluation is conducted by the HIV/AIDS CBOs.

1.4 Research questions

This study project attempted to answer the following questions:

(i) Do HIV/AIDS CBOs have training polices?
(ii) How are the training needs analysis carried out by the HIV/AIDS CBOs?
(iii) What training and development methods are used by the HIV/AIDS CBOs?
(iv) How is training evaluation carried out by the HIV/AIDS CBOs?

1.5 Significance of the study

The study will benefit the following:

The HIV/AIDS CBOs as it has suggested measures that can be taken to facilitate and develop effective human resource trainings programmes which are relevant to them in the efforts to create awareness, Management, control and prevention of HIV/AIDS epidemic in their communities.

The HIV/AIDS financiers will get positive recommendations on the need to allocate the desired resources for the training of HIV/AIDS specialists who will be equipped with relevant skills needed to do their duties as expected to achieve the desired results.
The Government departments dealing with HIV/AIDS matters on policy issues regarding training of the required personnel on HIV/AIDS will get positive suggestions on what best can be done in this particular area.

Other training institutions like ACUs, FBOs, NGOs will also benefit from the recommendations or suggestions, which has been pointed out by the study.

The study has opened opportunities for future scholars as gaps like the needs to look at the effectiveness programmes in controlling and prevention of HIV/AIDS has been identified for further studies at the end of the study.

NACC as a body charged with the responsibility of providing policy and strategic framework for mobilization and coordination of HIV/AIDS activities in the country will get feedback of what is happening at the ground level and the researcher has gotten a lot of insight in the field of HIV/AIDS epidemic.

1.6 Justification of the study

The study is justified, as it has formed a body of knowledge, which will assist in the development of relevant training programs for the HIV/AIDS CBOs in their effort to fight HIV/AIDS epidemic in the country. It is also in line with NACC requirements that research work is vital in the war against HIV/AIDS as it will lead to strategic decisions being taken.

1.7 Scope of the study

The study was conducted in Kuria District, which covers a total geographical area of 574 KM\(^2\) with five administrative divisions. The District borders; Migori District to the North,
Trans-Mara District to the East and Republic of Tanzania to the South East. Kuria has an estimated population of 170,020 people (Daily Nation Newspaper 7th June 2006). The project focused on the relevancy of human resource training programs of HIV/AIDS CBOs by looking at how they carry out training needs analysis, what training policies they have for their programs, identify the training and development methods they have for their staff, how they evaluate their training programs and the problems they face during training.

1.8 Limitations of the study

Because of limited resources and time that was needed and the numerous number of CBOs, the study targeted only the HIV/AIDS CBOs funded by NACC in Kuria District.
CHAPTER TWO
LITERATURE REVIEW

2.0 Introduction

This chapter on literature Review entails what training is, it touches on training policies, training needs analysis, training and development methods, training evaluation followed by empirical studies in the area of training and the conceptual framework of the study and a conclusive summary.

2.1 Training

Training is planned activity on part of an organization to increase the knowledge and skills or to modify the attitude and social behaviours of the members of the organization in ways consistent with the requirements of the job. (Felloy, 1967)

According to moller (1987) training should bring about change in one’s behavior and way of doing things. It is a process which is continous and requires continous up dating, total commitment on part of the management in an organization, is an integral part of the company strategy, must inspire all those involved, should include tools and written materials to enhance understanding, should be holistic and geared to a target group.

Armstrong (1994) insists that a systematic approach is required if training within an organization is to be effective both in costs and results. He notes that training consists of a series of events as follows;

(i) Define training policy.

(ii) Identify training needs.

(iii) Prepare training plans.

(iv) Make and communicate practical arrangements.
(v) Carry out the training.
(vi) Record major activities happening during training.
(vii) Carry out training reviews and take actions where necessary.

Armstrong therefore advocates for a training program, which consists of a series of events, which rolls in a systematic manner to result to effective training.

2.2 Training Policies

A training policy spells out all that is expected to be done about training. A training policy is to guard training or check on unwanted undertakings or manipulations from interfering on what has been planned.

According to Armstrong (1994), training policies should meet organization's overall objectives, should show purpose of training, priorities where to be given should be clearly indicated, the resources to be allocated for training should be set aside and respected by the management, shows persons responsible for training and their definite roles they are expected to play, types of training to be undertaken by the trainees, opportunities available to the staff or management by definite numbers, among others.

A training policy is a guide to both the management and staff about their intentions and expectations which all have the right to. A policy guide should be free and accessible by everyone without any form of discrimination be it racial or gender. It spells out training plans of an organization with procedures and rules which must be observed by every person in the organization. It intends to curtail otherwise good and acceptable plans of the organization from being interfered with by the ill intended persons or to activate what can easily be inactive if not properly followed or implemented.
According to Brown (1990), policies are the ‘voices of the voiceless’. They intend to ensure that what is right is done and done at the right time without being substituted by what was not planned for. Policies are wheels of traditions on which programs roll.

2.3 Training needs analysis.

Felloy (1997) maintains the training needs are determined by finding out what is going on now and matching this against what should go on using the measuring tool which is the standard of performance for the job.

A training need exists when the gap between actual and required performance is most economically met by a training intervention (Bentley, 1991).

Training needs analysis is an examination of the origination’s present and expected operations or performance and the manpower necessary to carry them out in order to identify the number and the category of staff requiring to be trained to meet the required standards of performance in his or her current or future job. (Cole 1997).

When training is imposed on trainees without proper assessment of what is needed, it may be resisted and efforts and resources wasted. According to Saleemi (19997) when learning or training climate is supportive, training can achieve the following:

(i) Increased efficiency among employees.
(ii) Increased productivity of the Labour force.
(iii) Enhanced group work among employees at all levels
(iv) Create greater employees’ versalitility.
(v) Help secure repeated business traits
(vi) Improve communication in the organization.
(vii) Improve morale of the staff.
(viii) Increase employees' job satisfaction.
(ix) Enhance cooperation in the organization.
(x) Lower production cost.
(xi) Lower employees' injury rates.

Training needs should be organization's or individual's. Organizational needs emphasizes what knowledge and skills are required now and in future, what shortfall between capabilities of our staff presently and what we require them for, how much training is required to get to the position we wish to reach. Individual needs emphasizes is on issues like, what is your job, how effectively can you do it at present, what your job will be in future, what training if any do you require to do the job as effectively as possible to cope with changes in the job, provide you with confidence and satisfaction.

2.4.1 Training methods

When training or teaching it is better to consider the following basic educational principles:

(i) It is usually better to proceed from the simple to the complex, from the concrete to abstract.

(ii) Active reading results in greater learning than passive reading.

(iii) Analyses and practice with informed feedback. Improve skills and increase understanding.

(iv) Understanding comes from practice, observation, analytical discussion, and awareness of one's own actions and of the reactions of others. (Brown, 1980)
There are several training methods, which are in use according to Osborn (1996);

a  **Induction**

This kind of training is for newly recruited staff which include talk from seniors or old members of the staff, watching films which have been specifically designed for induction about organizational structure and facilities, reading literature containing regulations within an organization and any useful information deemed fit for the new staff.

b  **Apprenticeship**

Apart from induction or initial training in respect of the organization, apprenticeship is aimed at developing a range of skills through combing on the job training and short courses at collages

c  **Administrative or clerical training**

This tends to be informal training where a trainee is under an immediate supervisor or experience colleague and observe what is going on and hence gains skills with times.

d  **On job training**

Where a trainee is working and is expected to gain skills as he works. On the job training may be supplemented with in company courses designed specifically to improve the trainee’s knowledge and skills.

e  **Supervisory training.**

Training methods where trainees take participative courses based upon real problem experiences. They encourage cooperation with colleagues and help one to identify with other organization’s parts. Group discussion, case studies and projects are all appropriate for supervisory training.
According to Saleemi (1997), training methods should be carefully selected and provide for trainees active participation, provide them with knowledge of result, promote transfer of training experience to the job, provide reinforcement for appropriate behavior, provide practice when needed, motivate trainees to improve performance, encourage trainees accept and adapt to change. It could be on job or off job, internal or external training. Each environment has strengths and weaknesses. Venues should guide one to make decision on the appropriate training methods to be used.

Armstrong (1994) and Cole (1997) identified the following as some of the commonly training methods used;

**a  Job instructions**

It consists of preparing trainees by presenting knowledge or instructions to them from a trainer, allowing them to perform the tasks following the instructions given to them and making a follow up by the instructor to see if they are doing the right thing and correcting them where possible. It is a logical approach to training as it allows them to have their hands on the task.

**b  Job rotation**

It is traditionally designed for the management trainees who need to be exposed to a wide range of operations to gain a holistic experience of what happens in the entire organization. It is requires trainees to spend a known period of time in each section of the organization to avoid wasting time and unbalanced attention to each area.
c  Sitting next to Nelly

This is training or learning by demonstration. A trainee is expected to observe how an experienced person performs a given task and pick up the skills needed for going about the task. It is also called mentoring. This method is learning by doing. However, Nelly may not set the best example though.

d  Role – playing

Mainly used in management and supervisory training. A background situation is provided and participants assume the roles of persons involved. It is aimed at improving interpersonal skills and provides an insight into different viewpoints and interests represented. It requires total commitment of the participants who accept criticism for it to be effective or reflect real life situations.

e  Lecture, talks and discussions.

These methods can be formal or informal. Lectures are suitably used where the number of trainees is large for it is economical but will require trainees to study much later on their own to discover more knowledge. Formal or informal discussion or talks provide participants with opportunities for interactions and exchange ideas or give views of their perception which tend to widen their scope of knowledge.

f  Computer based training

Computers can be of great help where a standard program has been prepared for trainees who can train themselves under the guidance of the computer and check their own progress on how much they are able to assimilate. This form of training is good for high procedural training of standardized form of skills, which need to be learnt by the trainees.
Case studies

Carefully selected cases or situations are picked for the trainees to experience real life situations or problems and identify solutions, which could be suitable. Case studies are sensational and stimulating for trainees and provide relevant learning objectives, which are easy to internalize by the learners.

Films and videos

A powerful method of training as it provides visual and audio impact. It is modern and cuts down on personnel costs as the trainees themselves without the presence of the trainer can operate it. It only requires well-set objectives to keep the trainees under proper guidance.

Simulations

Apart from vestibule training, in baskets exercises and business games have been developed. Attempt to stimulate real life situation as far as possible. They can constitute an extremely stimulating experience and encourage learning when properly designed and administered.

When conducting training, keeping records of what happens is necessary to control training activities and cost related to training. Records also provide information for management or administrative purposes as well as for effective audit exercise. Records control and guide activities to be maintained within acceptable limits or parameters of the organization. Controls also assist in the process of evaluation to determine the return of the expenditure incurred. Evaluation points out whether the desired behavior has been achieved or the objectives of the training have been realized (Osborn 1996).
2.4.2 Management development methods

Management development is a process, which consists of series of activities and events designed by an organization for its managers to help them improve their performance now and in future. Since it is a process, it has no end but on going. It is much more than training as it is designed for both an individual and the organization. (Cole 1997)

Most management development plans or programs will employ various training techniques to achieve certain goals in line with organization’s overall plans and policies like motivation of managers by setting performance targets, development of individual potential for more effective service delivery and subsequent promotion to higher posts, suitable rewards, creation of a climate which is conducive to individual growth and self development. Organization’s need for managers in right numbers and required skills is part of manpower planning process. This process helps an organization not to be caught off guard in information concerning transfer, retirements, sickness, which may be used to predict vacancies likely to arise in future in an organization. Planning should be flexible not only to concentrate on immediate successors but also to access managers’ abilities and inadequacies, counseling and appraisal is required. Regular appraisals and management by objectives helps to assess abilities of managers. The assessment should be for potential of managers and not performance (Cole 1997).

Assessment of potential is based on track records, reports or potential appraisal interviews and not performance. According to Armstrong (1997), the appraisal should produce information on:

(i) Level of manager’s motivation for development.

(ii) Willingness to take responsibility.

(iii) Ability to communicate.
(iv) Areas of one's knowledge and skills, which needs to be developed.

(v) Details of any remedial training required.

After both performance and potential appraisal, areas of training and development must be identified together with a suitable method for achieving them.

Some of the development methods used as suggested by Armstrong:

a  **Assessment centers**

Assessment centers are a more objective method of assessing potential. There are sessions that managers attend and participate in various tests and projects. The activities for these managers will have been planned to reflect qualities required for management posts of higher level and assessed by senior managers from organizations concerned by external consultants.

b  **Action-learning**

Action learning—"learning by doing" is advocated by Ravans (1990). He proposed that:

(i) Men and women learn only when they want to learn and not at the will of bosses who send them off on courses.

(ii) Learning is a social process that is solving together some problems of common interest the learners helps each other.

(iii) It is barren to argue without testing ones conclusion in specific action.

Even deliberately action is waste of time unless its specific consequences are assessed against a set of declared expectations. He has devised action-learning projects for managers from different organizations.
This may involve a period of several months in a different division or even with an entirely different organization. During this period they will endeavor to tackle problems without the normal constraints of hierarchy or preconceived ideas.

According to Saleemi (1997), a management development programme requires that a manager should;

(i) Know what is expected of him.
(ii) Be given guidance when required.
(iii) Be rewarded according to his contribution. Managers can’t develop without incentives; include no reward for non-or poor performance.
(iv) Be informed of how he is progressing, i.e. formal or informal review and feedback.
(v) Be given an opportunity to perform “self development”.

The courses chosen should meet organization’s and individual needs of managers for external courses. The reputation of trainers should also be considered. The trainers usually have discussions and exercises that are designed to bring out the strengths and weakness of individuals’ concerned and encourage new approaches to problem solving and working with others.

Courses, which usually take one week or more sessions, are recommended, separated by longer period of performing normal duties. Internal courses are more tailor made to organization’s needs and individuals. They combine on job training with more formal short courses and packages. This is done through project work, secondments, conferences, group work and job rotation. (Cole 1997).
c  T-group Training

T-group training also called laboratory or sensitivity training involves a small discussion group that meets under the direction of trainers. The trainer will not take part in discussion except for introduction or where an intervention is necessary. Main objectives of the exercise are to increase participants’ awareness of their own feelings and reactions towards others and to help them deal with interpersonal relationships. This may involve a change of attitudes owing to the often-intimate nature of discussion. The trend is to get participants from the same organization or even same departments with a view of team building. The intensity of the discussion may however cause distress to others. As such, screening participants before commencement is vital and the trainer should himself be trained on how to conduct the session. (Torrington, 1998).

d  Management By Objectives (MBO)

Management by objectives as advocated by Drucker and Odiorne requires that a manager discusses and agrees on objectives or his job for a future period with the boss. Targets in line with the overall organizational objectives and special considerations given to manager’s contribution to improving performance. At the expiry of the period they will jointly review performance as compared to objectives. Problem areas are discussed and areas for improvement agreed and new targets set for subsequent period. The goals must be realistic. Management by objectives incorporates many elements like motivation, appraisal, reward, participation and planning. The system should be partial and supported by top management. (Mullins 1990).

e  Job-rotation

Where job rotation is to be employed it should be well planned with different departments to provide useful contributions to development of managers especially management.
trainees. Job coaching can help many managers and supervisors gain from the working a boss who is prepared to give them guidance and responsibility. It requires commitment by both parties to a planned programme of practical development that will include regular interviews at which progress and problems can be discussed. Personalities of parties under ability of the managers should also be considered (Armstrong 1994).

**Auto instruction**

In auto instruction, trainees are given a programme of assignments or tasks, which take them to various parts of the company and require them to obtain information from departmental managers or from company files. The trainees after doing things on their own will report back to their trainers periodically for discussion and review. Based on principle that knowledge is gained by exploration and discovery is more permanent than that, which is instructed by instructors. (Torrington 1998).

**2.5 Training evaluation**

Evaluation is the last component of a training program, coming after the actual training has taken place. Evaluation comprises all those processes geared to assessing the achievement of a training program. Evaluation is intended to measure the success of a training program. It is concerned with identification of competencies or shortcomings of a program with an aim of providing opportunities or corrective measures to be taken. It intends to check whether the knowledge, skills, and attitudes, which were supposed to be gained by the trainees, have been gained or make observations pointing to the unattained objectives. Evaluation is meant to add value to the training program requirements. It is concerned with quality attainment or control measures, which can be undertaken to improve the training of human resources.
Evaluation is a process of obtaining information that can be used for making decisions about a training program. It is concerned with measuring the performance goals of an instructional program or the training process. The performance goals outline the specific activities the trainees should be able to perform. It measures the performance of trainees during and at the end of training.

Training evaluation is meant to determine the effectiveness of the training process. It is therefore geared to assessing the desirability of events, conditions, or states associated with the training process. It utilizes the information collected mainly from situations where training activities occur. It facilitates decision making or policy formulation. An effective evaluation will report progress and meaningful interpretations of the performance, judge the merits of alternative approaches to training. It also points out problems associated with training and their possible solutions.

2.6 Empirical studies

Not much has been done in the field of training and development as an area of study. Whatever has been done by individual researchers tend to study aspects in training or development of human resources in a disjointed manner. Separate studies in areas such as training needs analysis, training and development methods, financing training programs, training assessment, training evaluation, training appraisal, among others have been conducted and conclusive views given by the researchers.

According to Felloy (1987) training needs analysis is conducted to determine what is going on now and matching this against what should go on using the measuring tool which is the standard of performance for the job.
While according to Bently (1991) a training need exists when the gap between actual and required performance is most economically met by a training intervention. He therefore advocated for performance appraisals to be conducted by organizations in order to establish what has been achieved.

Armstrong (1994) insist that for effective training to take place, it must be conducted in sequence of events which must be effected and respected which include having a training policy, training needs identification, training plan, conducting training and reviewing the outcome. Armstrong had what can be said to be a training program for it spells out the sequence of events necessary for training effectiveness.

According to Saleemi (1997) for training to be successful a proper training method must be chosen as not all training methods will be effective all the time but will vary according to the needs and the nature of the training environment.

Mudhune (1980) in her research work on the effect of Kenya railways’ supervisory training on performance revealed that most of their trainings did not improve on performance as expected which she attributed to poor choice of training methods which were not varied.

Kendi, (2003) in her study on practices of Human Rights NGOs in Nairobi on human resource training revealed that most human rights NGOs did not have properly conducted or documented Human Resource training practices with policy documents or budgetary allocations.

ILO in its report HIV/AIDS in Africa (1998) noted that, African governments must prepared to spend huge resources to train their people in management of HIV/AIDS
epidemic especially in the design and choice of the methods used in training than implementing any training programs some of which are non-effective to the desired results.

From what has been done, it is clear that training has been looked into from the aspects approach where a particular item is identified and studied alone in a disjointed manner and a conclusive report is reached. However in this study training is to be looked into as a program or aspects will be integrated to result into a workable program with a conclusive approach of its relevancy to the organization as far as human resource training is concerned.

2.7 Conceptual Framework

The conceptual framework tries to give the diagrammatical representation of variables as viewed by the researcher. It intends to show the relationship or coexistence of the dependent and independent variables as viewed by the researcher. In this study the independent variables will consist of training policies, training needs analysis, training and development methods and training evaluation. These variables when properly handled or carried out in the desired manner will come up with a relevant training program which will enhance training performance positively leading to achievement of desired results or set objectives. Training programs, improved performance and achievement of objectives are the dependant variables in this case. The conceptual framework of the researcher is given in figure 3 below.
Training Policies

Training needs Analysis

Training and development methods

Training Evaluation

Relevant training program

Improved performance

Achievement of set objectives

Source: Researcher

Training policies

Every organization should set training policies, which will be used as a guide when carrying out training activities. The training policies will spell out who is to be trained, when training is to take place, who the trainers are, how much will be spent on training, where training will be conducted, among others. Training policies are meant to prevent what was not supposed to happen from happening. They are viewed as spokesmen of the staff.
Training needs analysis

When carrying out training needs assessment or analysis, the management need to involve the staff and even the trainers so that everyone's view is considered and taken care of.

Observations of what is happening currently in the organization should form the basis on what is required by the staff in terms of their performance. A well carried out training needs analysis sets training activities in progress, for it will even suggest the training methods to be used.

Training and development methods

Organizations should be careful on the training and development methods they will use to train their staff. Some methods may be common but outdated for they may be in line with the ever-changing technological environment, while others may be popular to trainees but may not significantly contribute the desired results.

Training evaluation

Evaluation comprises all those processes geared to assessing the achievement of a training programme. Evaluation is intended to measure the success or failure of a training programme. It is concerned with identification of competencies or shortcomings of a programme with an aim of providing opportunities or corrective measures to be taken. It intends to check whether the knowledge, skills, and attitudes, which were supposed to be gained by training, have been gained or make observations pointing to the unattained objectives.

When the above four dependant variables are carried out in the desired manner will lead to organizations having relevant training programmes which will enhance performance leading to achievement of their set objectives.
2.8 Conclusion

Not much has been done in the study about the relevancy of human resource training programmes of HIV/AIDS CBOs and that is why this study project investigated the relevancy of these programmes bearing in mind that most early researches have looked at training from aspects approach, where one variable like training policy, training needs assessment, training methods, are just studied independently. However in this study these variables have been looked into as jointed components, which together make a training program.
CHAPTER THREE

RESEARCH METHODOLOGY

3.0 Introduction

This chapter consists of the procedures used in this project to collect and analyse data. It is organized under the following sub-headings: research design, the target population, sampling procedure, data collection instruments, data collection procedures, pilot study, data analysis and presentation.

3.1 Research design

The design of the project was descriptive in nature. This is because most of the variables of the study are rather specific although their extent is not known. Adams (1985) notes that a descriptive study attempts to make a precise measurement of a dependant variable in a population. It is the study in which major emphasis is on determining frequency with which an event occurs.

3.2 Target population

The project targeted all HIV/AIDS CBOs, which are financed by NACC in Kuria District. It particularly targeted human resource managers or officers in-charge of human resource training or the directors of the HIV/AIDS CBOs.

3.3 Sampling procedure

HIV/AIDS CBOs are many, but this project specifically sampled out only those HIV/AIDS CBOs financed by NACC, which are 40 in number by June 2006. A list of these HIV/AIDS CBOs was obtained from the District Development Office (see appendix II).
Area Cluster Sampling Technique was used to pick 20 CBOs from the District which formed a 50% representation of the HIV/AIDS CBOs distributed across the 5 Administrative Divisions in the District. A list of the CBOs per Division was made alphabetically and then picked systematically CBOs which were even numbered. Table 2 below shows how the sample size of 20 HIV/AIDS CBOs was obtained from the target population of 40 HIV/AIDS CBOs in the district.

### Table 2: HIV/AIDS CBOs distributions per Division

<table>
<thead>
<tr>
<th>Division</th>
<th>Target population</th>
<th>Sample size</th>
<th>Sample %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kegonga</td>
<td>6</td>
<td>3</td>
<td>7.5</td>
</tr>
<tr>
<td>Kehancha</td>
<td>12</td>
<td>6</td>
<td>15</td>
</tr>
<tr>
<td>Mabera</td>
<td>10</td>
<td>5</td>
<td>12.5</td>
</tr>
<tr>
<td>Masaba</td>
<td>4</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>Ntimaru</td>
<td>8</td>
<td>4</td>
<td>10</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>40</strong></td>
<td><strong>20</strong></td>
<td><strong>50</strong></td>
</tr>
</tbody>
</table>

### 3.4.1 Data collection instrument

Data was collected by use of questionnaires that targeted the Director or Human Resource Manager of the HIV/AIDS CBOs. The questionnaire was developed by the Researcher through the review of the study’s objectives and literature reviewed. It consisted of both open and closed type of items. Questionnaires were used as they allow uniformity for all respondents and were less expensive.
3.4.2 Data collection procedure

The Researcher sought written permission and introduction letter from the Coordinator of MBA Research Programmes, Department of Business Administration Kenyatta University. The Researcher then made an initial visit to the CBOs to establish a rapport and make the necessary appointments for data collection process. The questionnaires were distributed to relevant Respondents on the appointment day and collected on an agreed time.

3.5 Pilot study

To ensure validity and reliability of the results, the instrument was piloted on a randomly selected sample of five directors of HIV/AIDS CBOs. The sample was picked from CBOs outside those designated for actual data collection. Split – half method of assessing reliability was used. Cronbach’s Coefficient Alpha was worked out. A Coefficient of 0.75 was obtained that was within the accepted reliability Coefficient level set at 0.7 and above. To improve validity, the Researcher reviewed the study objectives and other related studies. In addition the instruments were given to the Researcher’s Supervisor and two experts in the area of human resource development to help improve the content and construct validity of the items.

3.6 Data analysis and presentation

The data obtained from the study was organized, coded and analysed with the aid of a computer. The Statistical Package of Social sciences (SPSS) was used. Much of the data was descriptive therefore frequencies and percentages, chart and the graphs were used to present the results.
CHAPTER FOUR
DATA ANALYSIS AND PRESENTATION OF RESULTS

4.0 Introduction to data analysis

Data analysis involves a number of closely related operations that are performed with the purpose of summarising the collected data and organising it in such a manner that they answer the research questions (Kothari, 1985). There are two methods of data analysis depending on the type of data collected, namely qualitative and quantitative data analysis. In this chapter, an attempt has been made to analyse the data collected during the study and present it in the most appropriate ways. Quantitative data analysis involves the use of statistics to summarize the results and make generalisation to the population. It is mainly done for quantitative research designs such as descriptive research, causal comparative research and correlation research. It involves use of descriptive statistics such as means, modes, percentages and frequencies (Mugenda, 1999). The study was descriptive in nature and thus quantitative analysis was done as discussed below. Data analysis and presentation was guided by the research questions.

4.1 Demographic data of the respondents

The sample consisted of twenty respondents of varying gender, marital status and level of education drawn from twenty CBOs in Kuria District.

The Respondents consisted of 13 males which formed 65% and 7 females which constituted 35%.
Table 3: Table showing the distribution of respondents by marital status

<table>
<thead>
<tr>
<th>Marital status</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Married</td>
<td>16</td>
<td>80.0</td>
</tr>
<tr>
<td>Widow / widower</td>
<td>3</td>
<td>15.0</td>
</tr>
<tr>
<td>Single</td>
<td>1</td>
<td>5.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>20</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Source: Field Survey

Table 3 indicates that majority of the respondents were married (80.0%) while 15.0% were widows / widowers and only one (5%) of the respondents was single.

Table 4: Table showing the distribution of Respondents by level of Education

<table>
<thead>
<tr>
<th>Education level</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary</td>
<td>3</td>
<td>15.0</td>
</tr>
<tr>
<td>Secondary</td>
<td>6</td>
<td>30.0</td>
</tr>
<tr>
<td>Tertiary</td>
<td>10</td>
<td>50.0</td>
</tr>
<tr>
<td>Others</td>
<td>1</td>
<td>5.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>20</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Source: Survey
As indicated in the table 4, the Respondents had varying educational qualifications. 15.0% had primary education, 30.0% had secondary education, 50.0% had tertiary level of education while only one (5%) had others which was not specified. It is therefore convincing that the majority of CBOs Directors have substantial education to organize and manage human resource training programs in their organizations.

Table 5: Table showing the age of the HIV/AIDS CBOs

<table>
<thead>
<tr>
<th>Age in years</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-5</td>
<td>10</td>
<td>50.0</td>
</tr>
<tr>
<td>6-10</td>
<td>7</td>
<td>35.0</td>
</tr>
<tr>
<td>Above 10</td>
<td>3</td>
<td>15.0</td>
</tr>
<tr>
<td>Total</td>
<td>20</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: field Survey

As indicated in the above table 5, ten (50%) of the HIV/AIDS CBOs studied had been in existence for 0 to 5 years; seven (35.0%) for 6 to 10 years while three (15.0%) had existed for more than 10 years. This implies that the rate of establishment of HIV/AIDS CBOs has drastically increased since 1995 to the year 2000 before NACC was established to monitor and control their activities. Since the inception of NACC in 1999 the rate of increase though still high but at a reducing trend. This behaviour of increasing at a reducing rate may go on as the major world donors of HIV/AIDS funds insist on accountability of the aids money, which has negatively affected the establishment of more HIV/AIDS CBOs. This is reflected in the bar graph (Figure 4) and line graph (Figure 5) below.
Figure 4: Bar graph showing the ages of the CBOs

Source: Field Survey

Fig. 5: Line graph showing % of CBOs established between 1995 - 2005

Source: Field Survey

4.2 Training policies in HIV/AIDS CBOs
4.2 Training policies in HIV/AIDS CBOs

The first research question sought to investigate whether the HIV/AIDS CBOs had training policies. To capture this information, the questionnaire had various items on training policies. On the question whether the CBOs conducted staff training, it was revealed that 18 of them (90%) conduct it while 2 (10%) do not.

The Respondents were also asked if they had a specific person in charge of training in their CBOs, 8 responded Yes while 12 responded No which translates into 40% for Yes and 60% for No. It is therefore clear that majority of the CBOs do not have a person in charge of training activities in their Organizations.

The researcher also sought to find out whether the HIV/AIDS CBOs had training policies and if the policies were documented. It was found out that majority of the CBOs did not having training policies. Only seven (35%) had a training Policies while 13 (65.0%) did not have any training policy. Moreover, only one out of the seven CBOs that had training policies reported that their policy was documented. According to Armstrong (1994) for training to be effective within an organisation, it should have a well-defined and documented policy. Training policies spell out all that is expected to be done about training. They should meet organisation’s overall objectives and show the purpose of training. Policies are the wheels of traditions on which programs roll (Brown, 1990). Thus, documented training policies are vital for any training to be effective.

4.3 Staff training needs assessment

This section addresses research question two that sought to investigate how the HIV/AIDS CBOs carry out training needs assessment. Data obtained from various items in the research instruments was analysed and revealed that majority of the HIV/AIDS CBOs 13 (65%) do
not carry out staff training needs analysis. Only 7 (35%) of the respondents reported that they carry out staff training needs analysis. Moreover, those who carry out staff training needs analysis were asked to state the method they use to determine training needs. Table 6 displays the findings.

Table 6: Methods used to determine staff training needs

<table>
<thead>
<tr>
<th>Method</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance appraisal</td>
<td>1</td>
<td>14.29</td>
</tr>
<tr>
<td>Views from staff</td>
<td>4</td>
<td>57.14</td>
</tr>
<tr>
<td>Use of training consultants</td>
<td>2</td>
<td>28.57</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>7</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Source: Field Survey

As shown in table 6, views from staff is the method used by most HIV/AIDS CBOs with 57.14% of the respondents reporting that they use this method. Performance appraisal is the least used (14.29%) while 28.57% of the HIV/AIDS CBOs use training consultants. In addition, the research sought to know how staffs were identified for training. The respondents' responses are shown in table 7.

Table 7: Methods used to determine staff to train

<table>
<thead>
<tr>
<th>Method</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Follow policy guidelines</td>
<td>3</td>
<td>15.0</td>
</tr>
<tr>
<td>Directors' decision</td>
<td>8</td>
<td>40.0</td>
</tr>
<tr>
<td>Proposals from staff</td>
<td>9</td>
<td>45.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>20</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Source: Field Survey
Table 7 above shows that proposals from staff is the most commonly used method for determining the staff to be trained (45.0%) while 40% of the HIV/AIDS CBOs Directors decide on who will undergo training. Only 15% of the HIV/AIDS CBOs follow policy guidelines.

According to Cole (1997), training needs analysis is an examination of the organisation's present and expected operations or performance and the manpower required to carry them out in order to identify the number of staff requiring to be trained to meet the required standards of performance in their current and future jobs. Salemi (1997) writes, Training need analysis is vital if training is to be effective. When training is imposed on staff members without proper assessment of what is needed, it may be resisted and efforts and resources wasted.

Bentley (1991) identified performance appraisal as the best method of determining training needs. According to the author, training needs exist when the gap between actual and required performance can most economically be met by training intervention. Moreover, Felloy (1997) maintains that training needs are determined by finding out what is going on now and matching this against what should be going on using the standard of performance for the job as the measuring tool.

On the training needs assessment, it was revealed that 65% which translates to 13 HIV/AIDS CBOs do not carry out training needs assessment while 35% which translates to 7 HIV/AIDS CBOs carry out training needs assessment. Majority of the HIV/AIDS CBOs therefore take people for training without a clear knowledge of what they expect them to train or to know.
4.4. Training and development methods

The third research question sought to establish the training and development methods used by the HIV/AIDS CBOs. The questionnaire had 4 items that sought this information. The findings are as indicated below.

**Figure 6: Pie chart showing training methods commonly used by CBOs.**

As indicated in the pie chart above (figure 6), Lectures, talks and discussions are the most commonly used training method (55.0%), followed by role-playing and case studies (35%). The least commonly used method is films and videos probably because of they are expensive or there is no reliable source of power to be used.

According to Saleemi (1997), training methods should be carefully chosen. They should provide for the trainees' active participation, promote transfer of training experience on the job, provide reinforcement for appropriate behaviour, motivate trainees to improve
performance and encourage them to accept and adapt to change. Lectures, talks and discussions provide the participant with opportunities for interactions and exchange of ideas that tend to widen their scope of knowledge (Cole, 1997). Case studies, if carefully selected, are good training methods as they are sensational and stimulating and provide relevant learning objectives that are easy to internalise (Armstrong, 1994). However, Cole (1997), stresses that role playing should be used for management and supervisory training only as they are sensitive and require total commitment of the participants. They are effective on small groups of trainees only.

The respondents were, further asked if their CBOs had development programmes for their senior staff. 9 CBOs (45%) studied have development programmes for their senior staff while 11 (55%) do not have the programmes. This is an indication that most HIV/AIDS CBOs do not equip their senior staff for management. Moreover the development programmes commonly used as identified by the respondents are; job rotation (10%), management by objectives (5%) and action learning (85%). Thus, action learning is the most commonly used method.

Action learning also referred to as learning by doing has been found to be an effective development method. Ravan (1990) argues that action learning is effective since people learn only when they want to learn and not at the will of bosses who send them off on courses and secondly action learning is a social process that allows them to interact.

However, most of the HIV/AIDS CBOs studied carry out staff induction. The study established that a significant number of HIV/AIDS CBOs induct their new staff members while only a few do not (70% vs. 30%).
4.5 Staff training evaluation

To investigate how training evaluation is carried out by the HIV/AIDS CBOs, the questionnaires contained several items that sought this information. Majority of the respondents (60%) reported that their HIV/AIDS CBOs conduct training evaluation; while 40% of the HIV/AIDS CBOs do not conduct training evaluation. In addition most of those who conduct training evaluation do it after the training (75%) while 25% of them do it during the training. Staff performance appraisals are mostly used as opposed to self staff training evaluation forms (75% vs. 25%)

Training evaluation is intended to measure the success of a training program. It intends to check whether the knowledge, skills and attitudes that were supposed to be gained by the trainees had been gained or make observations pointing to the unattained objectives. Evaluation is a process of obtaining information that can be used for making decisions about a training program. (Armstrong, 1994).

It facilitates decision making and policy formulation and points out problems associated with the training and their possible solutions (Bentley, 1991)

4.6 Qualitative Analysis

It is usually done for qualitative research designs. It is a process of bringing order, structure and meaning to the mass of information collected. In qualitative studies, researchers' obtain detailed information about the phenomenon being studied and then try to establish patterns, trends and relationships from information gathered (Mugenda, 1999). After the themes, categories and patterns have been identified, the researcher evaluates and analyses the data to determine the adequacy of the information and its credibility, consistency and validity. The researcher also evaluates the usefulness of the information in answering the research
questions (Marshall & Rossman, 1989). However, the research design used in this study was quantitative research design thus qualitative data analysis was not done.

4.7 Summary of Data Analysis

Majority of the respondents were males (65%) as compared to female (35%). Most of them had secondary education and above. Most of the HIV/AIDS CBOs targeted are relatively young; with 50% of having less than ten years of existence. 90% of the HIV/AIDS CBOs conduct staff training. However; only 40% of them have a specific person in charge of training.

Although, majority of the HIV/AIDS CBOs reported conducting staff training, only 35% of them have training policies in place. Moreover, only one of the HIV/AIDS CBOs studied reported having a documented policy.

On training need analysis, a significant number (65%) do not carry out staff training needs assessment. The most commonly used training needs assessment method is the use of staff members views (57.14%) while performance appraisals is the least used method (14.29%). In most HIV/AIDS CBOs, staff proposal are considered when deciding on the staff to be trained (45%).

However in a significant number of the HIV/AIDS CBOs (40%), Directors decide who is to be trained while only 15% of the HIV/AIDS CBOs follow policy guidelines when selecting the staff member to undergo training. Lectures, talks and discussions are the most common method of training in use. 55% of the HIV/AIDS CBOs use this method while 35% use role models and case studies. Most HIV/AIDS CBOs (55%) do not have development programmes for their senior staff. Action learning, job rotation and management by
objectives are the commonly used development methods. 60% of the HIV/AIDS CBOs conduct staff training evaluation. The method of evaluation mostly used is staff performance appraisals. The analysis, further, indicated that most HIV/AIDS CBOs carry out training evaluation after the training has been conducted.
CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.0 Summary of Findings

The purpose of the study was to investigate the relevancy of training programmes of HIV/AIDS CBOs funded by NACC in Kuria District in order to gauge their appropriateness in the creation of awareness, management, control and prevention of HIV/AIDS epidemic. The study established that, on the overall, the HIV/AIDS CBOs do not have appropriate human resource training programmes that would enable them to effectively meet their objectives. Below is a summary of the main findings:

The results from the study show that most HIV/AIDS CBOs conduct staff training. However, most of them do not have any specific person in charge of human resource training.

Most HIV/AIDS CBOs do not have training policies and even those who have them, the policies are not documented which is not appropriate in the human resource training exercise. Training policies act as a guide of what should be undertaken and what should be left out. They assist in decision-making.

The study established that majority of the HIV/AIDS CBOs do not carry out staff training needs analysis. A situation, which calls for a major overhaul in the training programmes provided by the HIV/AIDS CBOs. Otherwise without needs assessment, one may not know exactly what he wants to attain during training.
Performance appraisal is the least used method of training needs analysis. Most HIV/AIDS CBOs rely on staff members' views without even the consultation of training consultants who are specialists in the field of training.

The results indicated that staff proposals and directors' decision are the methods commonly used when deciding the person to be trained. However, there is a need to look at the appropriateness of the person to be trained, depending on his area of specialization or the services he is to render to the organization.

Lectures, talks, and discussions are the training methods mostly in use by the HIV/AIDS CBOs. However, the HIV/AIDS CBOs should think of methods which use less personnel to cut on the costs. This suggests that use of videos and computer training methods should be encouraged.

The study established that most HIV/AIDS CBOs do not have development programmes for their senior staff. Action learning, job rotation, and management by objectives are the development methods mostly mentioned in the study as being used.

On performance appraisals, most HIV/AIDS CBOs conduct staff training evaluation and the most commonly used method of evaluation is the use of staff performance appraisal conducted by the staff supervisors.
5.2 Conclusions

The results from the sample studied led to the following conclusions;

HIV/AIDS CBOs do not have training policies. Even those which have them are not documented which means they can allow manipulations depending on the situations suiting particular interests.

HIV/AIDS CBOs do not carry out training needs analysis. Where the needs analysis are carried out, only performance appraisals and views from staffs are used.

On the training methods used, lectures, talks and discussions were mentioned as commonly used. These methods are traditional and have been proved to less effective in comparison to methods like videos, case studies, role playing and computer training techniques which require less personnel and hence reduction in overall training costs.

HIV/AIDS CBOs do not have development programmes for their senior staff. This is a serious anomaly in the field of human resource training. Senior staff development is crucial for the success of any organization with objectives to attain. It is therefore paramount that HIV/AIDS CBOs should seriously consider having in place development programmes for their senior staffs.

Training evaluations are mostly conducted by use of staff performance appraisals. Although self staff evaluations are also evidenced from the field survey conducted during the study.
The HIV/AIDS CBOs do not have relevant human resource training programs thus they are not appropriately prepared for the creation of awareness, management, control and prevention of HIV/AIDS epidemic in the society.

5.3 Recommendations

Based on the findings of the study, the following recommendations have been made:

NACC should actively sensitise HIV/AIDS CBOs on the importance of carrying out relevant staff training, for without proper staff training, creation of awareness, management, control and prevention of HIV/AIDS epidemic in the society is not possible.

HIV/AIDS CBOs should seek the assistance of experts in policy formulation and documentation of training policies for their organisations. Otherwise without the involvement of the experts in training policy formulation these HIV/AIDS CBOs will win no major war against HIV/AIDS epidemic.

The government, NACC and other relevant stakeholders should train HIV/AIDS CBO members on training needs analysis and training evaluation. This will enhance their ability to handle their duties effectively.

HIV/AIDS CBOs need to come up with development programmes for their senior staff and allocate funds towards the programmes and actively implement them. Funding is a prequisite for carrying out the activities related to training in the HIV/AIDS CBOs. Other than NACC other donors should be sought to finance human resource training in the HIV/AIDS CBOs.
5.4 Suggestions for Further Study

The researcher proposes further study in the following areas:-

The research was carried out in one district only. Further research could be carried out in other districts in the country to increase the generalizability of the findings to the nation as a whole.

The research focused on HIV/AIDS CBOs funded by NACC. The researcher suggests further study in HIV/AIDS CBOs funded by other donors / organisations which have interest in the management, control and prevention of HIV/AIDS epidemic.

The research focused on human resources training programmes only. Additional study targeting other HIV/AIDS CBOs programs like the methods they use in creating awareness, control and prevention of the spreading of HIV/AIDS epidemic, their effectiveness, funding, management and accountability can be done.

In addition to HIV/AIDS CBOs, NACC funds FBOs. A similar study targeting FBOs could be carried out in the same area or other areas.
REFERENCES


Africa Renewal, UNDPI, vol.19 No. 2 July 2005


Bass, B.M. & Vanghan J.A( 1990), Training in industry, the management of learning; Tavistock Institute, New Delhi


David Osborn (1996) Staff Training and Assessment; Rodwood Books, Trowbridge Witsire


APPENDIX I

QUESTIONNAIRE TO BE ANSWERED BY DIRECTOR OR HUMAN RESOURCE MANAGER OF HIV/AIDS CBOs.

Please tick (✓) whichever is applicable to you and respond also where choices are not given.

Section A.

Background Information

1. Gender of Respondent (a) Male ( ) (b) Female ( )

2. Marital status
   (a) Married ( ) (b) Single ( ) (c) Widow / Widower ( )

3. What is your highest level of educational qualification?
   (a) Primary ( ) (b) Secondary ( ) (c) Tertiary College ( )
   (d) Others ( )

Section B

1. How old is your CBO in years?
   (a) Under 5 ( ) (b) 6 – 10 ( ) (c) 11 and above ( )

2. Do you conduct staff training in your CBOs? (a) Yes ( ) (b) No ( )

2. Do you have a specific person in charge of staff training?
   (a) Yes ( ) (b) No ( )

4. Do you have a staff training policy? (a) Yes ( ) (b) No ( )

5. Is your staff training policy documented? (a) Yes ( ) (b) No ( )

6. If yes, do your staffs access it freely? (a) Yes ( ) (b) No ( )
7. Do you carry out staff training needs assessment?
   (a) Yes ( ) (b) No ( )

8. If Yes, how is it done?
   (a) Through performance appraisals ( )
   (b) We solicit views from staffs ( )
   (c) We consult staff training consultants. ( )
   (d) Any other? Kindly specify. ( )

9. How do you determine which staff member is to be trained?
   a) We follow training policy guidelines. ( )
   b) The Director decides. ( )
   c) We ask the staff to propose the names. ( )
   d) Any other, please specify ( )

10. Are new members of staff inducted in your organization?
    (a) Yes ( ) (b) No ( )

11. Which of the following training methods do you commonly use?
    (a) Films and Videos ( )
    (b) Lectures, talks and discussions ( )
    (c) Role-playing and case studies ( )
12. List any other methods used apart from those named above?


13. Are there any special development programmes for your senior staffs?

(a) Yes ( )
(b) No ( )

14. If yes, list them.


15. Do you conduct staff training evaluation? a) Yes ( ) (b) No ( )

16. If yes, when is it conducted?

(a) As training is going on ( )
(b) After training has been conducted ( )
(c) Any other, kindly specify. ( )

17. How is staff training evaluation carried out?

(a) Using self-staff training evaluation forms. ( )
(b) Using staff performance appraisals. ( )
(c) Any other, please specify ( )
18. What problems are experienced during training? Kindly list them.

19. According to you, what can be done to improve staff training in your organization?

[Table of organizations and their contributions, not legible in the image]
## APPENDIX II

### HIV/AIDS CBOS FUNDED BY NACC IN KURIA DISTRICT AND THEIR 2005/06 FINANCIAL ALLOCATIONS

<table>
<thead>
<tr>
<th>Name of CBO:</th>
<th>Division</th>
<th>Amt (Ksh)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ajumbo orphans project</td>
<td>Mabera</td>
<td>350,000</td>
</tr>
<tr>
<td>Angaza CBO</td>
<td>Kegonga</td>
<td>350,000</td>
</tr>
<tr>
<td>Association of people living with aids in Kenya</td>
<td>Kehancha</td>
<td>350,000</td>
</tr>
<tr>
<td>Bageni friends CBO</td>
<td>Kehancha</td>
<td>350,000</td>
</tr>
<tr>
<td>Bidii Mandera women group</td>
<td>Mabera</td>
<td>350,000</td>
</tr>
<tr>
<td>Bobwe self help group</td>
<td>Ntimaru</td>
<td>350,000</td>
</tr>
<tr>
<td>Bugumbe elders self help group</td>
<td>Mabera</td>
<td>350,000</td>
</tr>
<tr>
<td>Community HIV/AIDS Awareness group</td>
<td>Kegonga</td>
<td>350,000</td>
</tr>
<tr>
<td>Community HIV/AIDS initiative group</td>
<td>Kehancha</td>
<td>350,000</td>
</tr>
<tr>
<td>Community HIV/AIDS Volunteers</td>
<td>Ntimaru</td>
<td>1,192,000</td>
</tr>
<tr>
<td>Getambwega CBO</td>
<td>Kehancha</td>
<td>350,000</td>
</tr>
<tr>
<td>Gwitembe PEFA Church group</td>
<td>Ntimaru</td>
<td>350,000</td>
</tr>
<tr>
<td>Heta care centre CBO network</td>
<td>Kehancha</td>
<td>350,000</td>
</tr>
<tr>
<td>Isaeema CBO</td>
<td>Kehancha</td>
<td>350,000</td>
</tr>
<tr>
<td>Isebania Parish CBO</td>
<td>Mabera</td>
<td>350,000</td>
</tr>
<tr>
<td>Jisimamie CBO</td>
<td>Kehancha</td>
<td>350,000</td>
</tr>
<tr>
<td>Kehancha Orphanage centre</td>
<td>Kehancha</td>
<td>350,000</td>
</tr>
<tr>
<td>Kombe development centre CBO</td>
<td>Masaba</td>
<td>350,000</td>
</tr>
<tr>
<td>Komotobo Linda Maisha Project</td>
<td>Kegonga</td>
<td>350,000</td>
</tr>
<tr>
<td>Organization</td>
<td>Location</td>
<td>Funding</td>
</tr>
<tr>
<td>--------------------------------------------------</td>
<td>----------</td>
<td>---------</td>
</tr>
<tr>
<td>Kunguku women group</td>
<td>Ntimaru</td>
<td>350,000</td>
</tr>
<tr>
<td>Kuria district disabled group</td>
<td>Masaba</td>
<td>450,000</td>
</tr>
<tr>
<td>Kuria Illiteracy CBO</td>
<td>Mabera</td>
<td>350,000</td>
</tr>
<tr>
<td>Kuria rural medical volunteers</td>
<td>Kehancha</td>
<td>350,000</td>
</tr>
<tr>
<td>Maaha CBO</td>
<td>Kehancha</td>
<td>350,000</td>
</tr>
<tr>
<td>Mabera HIV/AIDS network CBO</td>
<td>Mabera</td>
<td>350,000</td>
</tr>
<tr>
<td>Makendo CBO</td>
<td>Ntimaru</td>
<td>350,000</td>
</tr>
<tr>
<td>Mlimani taragwiti women group</td>
<td>Kehancha</td>
<td>350,000</td>
</tr>
<tr>
<td>Momokami CBO</td>
<td>Kegonga</td>
<td>350,000</td>
</tr>
<tr>
<td>Mowankwe Self Help Group</td>
<td>Ntimaru</td>
<td>350,000</td>
</tr>
<tr>
<td>Mwanzo women group</td>
<td>Mabera</td>
<td>350,000</td>
</tr>
<tr>
<td>NCCK Kuria CBO</td>
<td>Ntimaru</td>
<td>350,000</td>
</tr>
<tr>
<td>Neighbours CBOs</td>
<td>Masaba</td>
<td>350,000</td>
</tr>
<tr>
<td>Nguruna Maranatha women group</td>
<td>Kegonga</td>
<td>350,000</td>
</tr>
<tr>
<td>Nyabohanse HIV/AIDS Programme</td>
<td>Mabera</td>
<td>350,000</td>
</tr>
<tr>
<td>Nyamotambe CBO</td>
<td>Kehancha</td>
<td>350,000</td>
</tr>
<tr>
<td>Okoa maisha CBO</td>
<td>Kegonga</td>
<td>350,000</td>
</tr>
<tr>
<td>Tagare Home based care group</td>
<td>Mabera</td>
<td>350,000</td>
</tr>
<tr>
<td>Taimaha CBO</td>
<td>Ntimaru</td>
<td>350,000</td>
</tr>
<tr>
<td>Tatwa Omahe welfare group</td>
<td>Mabera</td>
<td>350,000</td>
</tr>
<tr>
<td>Togotane CBO</td>
<td>Masaba</td>
<td>350,000</td>
</tr>
<tr>
<td>Time Period</td>
<td>Activity Description</td>
<td></td>
</tr>
<tr>
<td>--------------------------------</td>
<td>-----------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>January- March 2006</td>
<td>preparation and identification of problem</td>
<td></td>
</tr>
<tr>
<td>April- July 2006</td>
<td>Project Proposal writing</td>
<td></td>
</tr>
<tr>
<td>August 2006</td>
<td>Data collection</td>
<td></td>
</tr>
<tr>
<td>September - November 2006</td>
<td>Data analysis and final report writing.</td>
<td></td>
</tr>
<tr>
<td>December 2006</td>
<td>Submission of the report</td>
<td></td>
</tr>
</tbody>
</table>
## APPENDIX IV

### PROJECT COST ESTIMATES

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Typing and printing</td>
<td>20,000.00</td>
</tr>
<tr>
<td>Photocopying the proposal</td>
<td>4,000.00</td>
</tr>
<tr>
<td>Photocopying research instrument</td>
<td>6,000.00</td>
</tr>
<tr>
<td>Traveling and Accommodation</td>
<td>30,000.00</td>
</tr>
<tr>
<td>Data processing</td>
<td>10,000.00</td>
</tr>
<tr>
<td>Stationary</td>
<td>5,000.00</td>
</tr>
<tr>
<td><strong>Sub total</strong></td>
<td><strong>75,000.00</strong></td>
</tr>
</tbody>
</table>

**Production of final document**

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Printing and typing</td>
<td>20,000.00</td>
</tr>
<tr>
<td>Photocopying and binding</td>
<td>10,000.00</td>
</tr>
<tr>
<td><strong>Sub-total</strong></td>
<td><strong>30,000.00</strong></td>
</tr>
<tr>
<td><strong>Grand Total</strong></td>
<td><strong>105,000.00</strong></td>
</tr>
</tbody>
</table>
TO WHOM IT MAY CONCERN:

Dear Sir/Madam,

RE: RESEARCH PROJECT: DATA COLLECTION

This is to confirm that the above named is an M.BA student in the School of Business, Kenyatta University, and he is embarking on his project this semester before he completes his degree programme.

Any assistance you may accord him will be highly appreciated.

Mrs. E. Gitonga
MBA COORDINATOR

5/9/2006