

Effect of project management practices and implementation of HIV projects in the aid support organization, South Sudan. Cross-sectional study.

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ABSTRACT

Page | 1 Background

This study sought to investigate the effect of project management practices and the implementation of HIV projects in the aid support organization in South Sudan.

Methodology

The study employed a descriptive cross-sectional study design. A population of 210 was targeted. The respondents were the project managers who were the main custodians of information on each project, stratified either in the TASO main office or the field staff offices.

Results

(50%) were married, 35% were single. The largest number of respondents felt that project planning specified project goals and objectives, as supported by a mean of 3.968 with a standard deviation of 0.994. The majority of the respondents had a strong opinion that monitoring and evaluation were not practiced in the county, as supported by a mean of 2.023 with a standard deviation of 1.021. More than 50% of the respondents were in agreement that projects took care of users' needs in all outcomes, as supported by a mean of 3.894 with a standard deviation of 0.817. The respondent could not remember whether the project. The coefficient of correlation R was 0.67, an indication of a strong positive correlation between the variables. Project planning, stakeholder participation, monitoring, and evaluation significantly influenced the implementation of TASO projects in South Sudan.

Conclusions

Project planning was not practiced, and therefore, the organization executives were not able to monitor progress towards attaining the goal. Stakeholders were not involved in the project implementation, and therefore, they did not assume some measure of responsibility during the system initiation.

Recommendations

The study also recommends that the project managers should define all the project processes and create a communication matrix in the project planning.

Keywords: Project management practices, Implementation of HIV projects, The aid support organization, South Sudan.

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Background

World over, NGO's and their focus on implementing HIV projects have a history dating back to 1839, and by 1914, there were 1083 NGO's with management of service delivery (MIREMBE, 2016). Ma (2013) contends that globalization during the 20th century gave rise to the importance of NGO's because of many problems that could not be solved within developing nations, as a way of responding to such problems. NGO's intensified their operations and focused more on Project Management practices to implement the HIV projects, like at The Aids Support Organization (TASO), South Sudan. Globally, the number of children under 15 years of age living with HIV increased from 1.6 million in 2001 to 2 million in

2007(UNAIDS, 2009). In addition, it is important to note that HIV AIDS has not only affected the human race economically, but it has also had profound psychosocial challenges, including stigma and discrimination, gender-based violence, and reluctance and failure to disclose HIV, among others.

The HIV/AIDS epidemic has had a profound impact to date in sub-Saharan Africa. The majority of people are living with HIV/AIDS. HIV is also the leading cause of death in the region. Studies have found declines in life expectancy due to HIV in many of the hardest hit countries in sub-Saharan Africa, including South Sudan (PRB, 2002). AIDS was first observed in the Sudan in the early 1980s, like in other countries throughout the world. Many people

responded by denying the reality of AIDS and by stigmatizing those believed to have the disease. This study sought to investigate the effect of project management practices and the implementation of HIV projects in the aid support organization in South Sudan.

used both quantitative and qualitative approaches. The quantitative approach was adopted because the study is intended to allow the collection of numeric data on the observable individual behavior of samples. A qualitative approach was also adopted to enable the study to capture more in-depth information on the topic under investigation.

Research Design.

The cross-sectional survey was adopted because the study intended to conduct an intensive investigation on the variables under study in a particular program, which is TASO. Since the study sought to examine the relationship between variables, a simple regression design was adopted to determine the strength and significance of the relationship between project management practices and the Implementation of HIV projects under TASO. The study

Target population

The target population included 210 top management employees of TASO in the central Equatoria region. The population categories included supervisors, Area managers, senior managers, branch managers, and other staff (Program Managers, Accounts, and Monitoring and Evaluation specialists). The sample was derived using the predetermined table for determining sample size by Krejcie and Morgan (1970).

Sample Size and Selection

Table 1: Shows the population and sample size distribution

Category of Respondents	Target Population	Sample Size	Sampling Technique
Supervisors	7	7	Purposive
Area Managers	8	8	Purposive
Senior Managers	40	36	Systematic Sampling
Branch Managers	35	32	Simple Random Sampling
Other staff (program managers, Accountants &M&E specialists)	120	92	Systematic Sampling
Total	210	144	

SOURCE: TASO Human Resource Manual, 2024

Sampling techniques and procedures.

Several sampling techniques were used to select respondents to the study, namely, systematic, simple random, and Purposive. The study used systematic sampling to be able to collect data from senior managers and other staff. This is because the Systematic sampling technique requires respondents who are selected from an ordered sampling frame; the study enables generalization of results across the entire study population. A simple random sampling technique was also used to select the members of the branch managers of TASO in the central Equatoria region. A purposive technique was used to select the supervisors and the area managers of TASO. This will be used because the supervisors and the area managers of TASO are believed to have specialized knowledge on the topic under investigation by virtue of their offices.

because it allowed respondents to express their views and opinions without fear of being victimized, and also allowed busy respondents to fill it out at their convenience. Such information was best obtained on a closed-ended questionnaire, which allows easy correlation and regression of the respondent's attitudinal disposition on the independent and dependent variables. This method was subjected to senior managers, branch managers, and other staff.

Data Collection Method

Questionnaire Survey Method

The study used the questionnaire method to collect data. The use of a questionnaire in this study was important mainly

Interview Method

The study also employs the interview method. Interviews in this study helped the study obtain more information because they provided the study with an opportunity to adapt questions, clarify the questions by using the appropriate language, clear doubts, establish rapport, and probe for more information. Interviews were subjected to supervisors and area managers.

Documentary Review Method

The study also reviewed documents in order to obtain recorded information that is related to the issue under investigation. This method was used because it enabled the study to access data at a convenient time, obtain data that was thoughtful of the informants, given attention in obtaining them, and enabled the study to obtain data in the language of the respondent. Documents that the study reviewed include the project human resource manual, project proposals, and project monitoring and Evaluation plan.

Data Collection Instruments

The instruments that were used in this study included a self-administered questionnaire, an interview guide, and a document review checklist.

Self-Administered Questionnaire

The study employed a questionnaire as a tool of data collection. The questionnaire had five sections. Section A dealt with the demographic characteristics of the respondents, Section B focused on project design, Section C looked at project staffing and implementation of HIV Projects, Section D focused on Monitoring and Evaluation, and Section E dealt with the implementation of HIV projects.

Closed-ended questions were developed to help respondents make quick decisions.

Interview Guide

An unstructured interview guide was used as a tool for collecting in-depth information from the key informants. The guide had a list of topical issues and questions that would be explored in the course of conducting the interviews. The guide was drawn with the questions soliciting the perception of the key informants regarding the contribution of project management practices to the Implementation of HIV projects.

Documentary Review Checklist

A document review checklist was used to collect more in-depth data on the topic under investigation. The checklist was used to provide in-depth qualitative information that would not have been collected with the closed-ended questionnaire.

Quality control

Two techniques, including validity and reliability, were used to check the quality of the instruments.

Validity

To ensure validity, the questionnaire was developed and given to three expert judges from Team University and TASO South Sudan to score the relevance of each question

in providing answers to the study. After which, a content validity index C.V.I. was computed using the formula: number of items declared valid/number of items in the questionnaire.

Reliability

To ensure reliability, the study used the pretest method by giving questionnaires to the respondents who were not part of the population study in order to find out how reliable the instrument would be. A pretest was done on 5% of the sample size. Data was coded and entered into the computer. Cronbach's Alpha Reliability Coefficient was generated using the statistical package for social scientists (SPSS) computer program to estimate the reliability of the questionnaire. The Cronbach's alpha reliability coefficient of above 0.7 is accepted.

Data Analysis

Quantitative Data

The statistical package was used for analysis of data in the study, that is to say, the SPSS version 16.0. Different statistical techniques were also used, namely: correlation and regression analysis. All statistical test results were computed at a 2-tailed level of significance. Data was analyzed and correlated using the Pearson Product-Moment correlation coefficient to establish the relationship between project management practices and the implementation of HIV projects. The Pearson Product-Moment Correlation Coefficient is a statistic that indicates the degree to which two variables are related to one another. The sign of the correlation coefficient (+ or-) indicates the direction of the relationship between -1.00 and +1.00. Variables may be positively or negatively correlated. For this study, project management practices were regressed against the implementation of HIV projects.

Qualitative data

Qualitative data were analyzed using content analysis. Responses from key informants were grouped into recurrent issues.

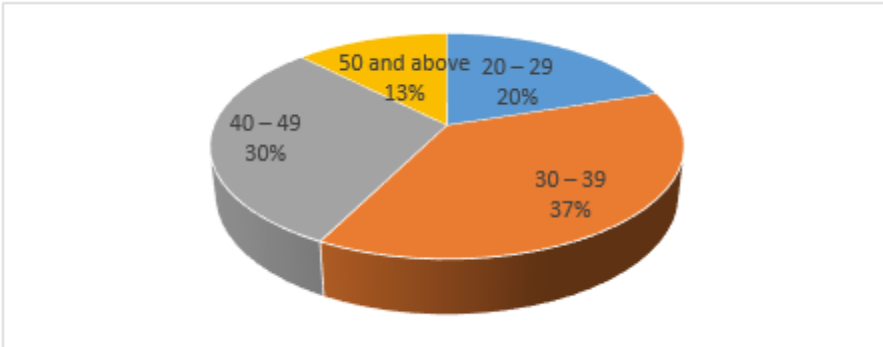
Ethical Considerations

To ensure the utmost confidentiality of the data that was provided by the respondent, as well as reflecting on the ethics practiced in this study, the research was guided by the principles of respect for people, beneficiaries, and justice. The study ensured participants' rights, including the right to be informed about the study, the right to freely decide whether to participate in the study, and the right to withdraw at any time without penalty.

Results

Demographic Characteristics of Respondents

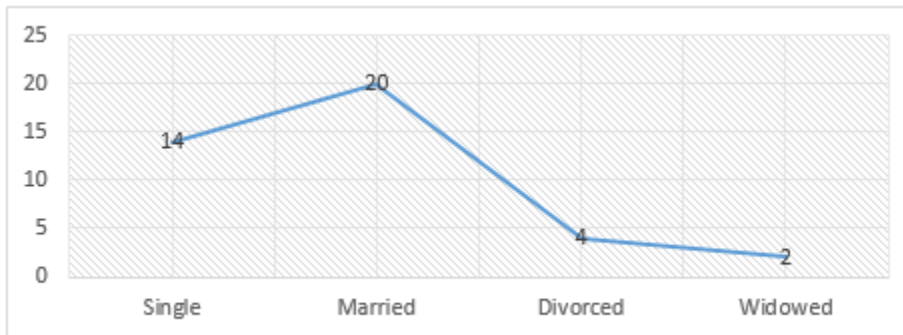
Figure 1 presents the age distribution of the respondents



The data shows that the majority of respondents (37.5%) were between 30 and 39 years, followed by 30% in the 40–49 age group. A smaller proportion (20%) were aged 20–29, while those aged 50 and above made up 12.5% of the sample. This suggests that TASO’s HIV project team in South Sudan is composed largely of individuals in their

early to mid-career stages, who are likely to possess both energy and relevant field experience. The age distribution indicates a balanced mix of youthful and mature professionals, which may contribute to dynamic project implementation, innovation, and institutional memory.

Figure 2: Marital Status of Respondents



The majority of respondents (50%) were married, followed by 35% who were single. A smaller proportion were divorced (10%) and widowed (5%). This indicates that a significant number of staff involved in project management and service delivery at TASO are likely to have family responsibilities, which may influence their work–life balance, commitment, and approach to community health programs. The marital diversity also reflects a socially

representative workforce that can relate to a wide range of clients and community members.

Descriptive Statistics

Project Implementation

Respondents were asked to indicate their level of agreement on the implementation of HIV projects in South Sudan. A scale of 1-5 was used, where Strongly Agree – 5, Agree – 4, Neutral – 3, Disagree – 2, Strongly Disagree – 1.

Table 2: HIV Project Implementation

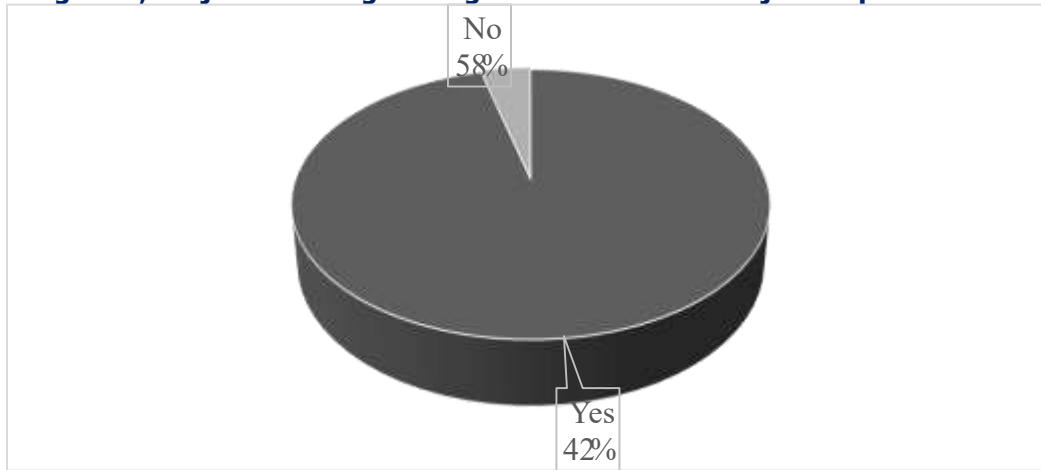
Statement on HIV Project Implementation	Mean	Std. Dev
Project Implementation is based on the scope, objectives of the project	1.975	.716
Project scope is fully addressed	2.069	1.819
Project implementation follows the schedule and timelines	1.975	0.953
Project implementation is on budget	1.953	.918
Project implementation has achieved the set goals and Objectives	2.860	1.028
The project is used by the beneficiaries	1.860	.917
Project implementation meets the specified implementation standards	1.977	.848

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Table 2, The study established that the majority of the respondents strongly felt that the HIV Project Implementation was not based on the scope and objectives of the project, as supported by a mean of 1.975 with a standard deviation of 0.716. The majority of the respondents also felt that the Project scope was not fully addressed, as supported by a mean of 2.069 with a standard deviation of 1.819. Respondents had a strong opinion that HIV project implementation did not follow schedule and timelines, as supported by a mean of 1.975 with a standard deviation of 0.953. There was an indication that the HIV Project

implemented the budget plan as supported by a mean of 1.953 with a standard deviation of 0.918. The study further established that the HIV Project implementation did not achieve set goals and Objectives as supported by a mean of 2.860 with a standard deviation of 1.028. The majority of the respondents felt that the project was not used by the beneficiaries, as supported by a mean of 1.860 with a standard deviation of 0.917. According to the respondent, the HIV Project implementation did not meet the specified implementation standards as supported by a mean of 1.977 with a standard deviation of 0.848.

Figure 3, Project Planning & Design metric and HIV Project Implementation



The study shows that 58% of the respondents disagreed that TASO had a project plan, and 42% indicated yes. This shows that the majority of the projects being worked on were not planned, and in most cases, the project managers didn't have the project plan.

Table 3: Project Planning & Design

Statement on Project Planning & Design	Mean	Std. Dev
Project planning specifies project goals and objectives.	3.968	.994
Project Planning is identifying, determining, and understanding both internal and external dependencies.	3.815	.818
Project planning enables the County executives to monitor progress towards attaining the goal.	3.682	.873
Project planning gives the organization a clear communications matrix.	3.421	.587

The key implementation targets for each process are outlined during project planning.	3.947	.816
Project planning highlights roles, responsibilities, and liabilities to the project team.	3.368	.974
Project planning establishes all requirements of the project.	3.867	.877
Project planning facilitates project reporting and review arrangements.	3.694	.912
Project planning identifies and treats project risks.	3.916	.817

Table 3, The study established that the largest number of respondents felt that project planning specified project goals and objectives, as supported by a mean of 3.968 with a standard deviation of 0.994. Respondents strongly supported that, planning the project work involved identifying, determining, and understanding both internal and external dependencies as supported by a mean of 3.815 with a standard deviation of 0.818. Project planning enabled the County executives to monitor progress towards attaining the goal as shown by a mean of 3.682 with a standard deviation of 0.873. The study pointed out that majority of the respondents were for the opinion that project planning enables the county to have a communications matrix as shown by a mean of 3.421 with standard deviation of 0.587,

provides the key implementation targets for each process as supported by a mean of 3.947 with standard deviation of 0.587 and distributes roles with clear lines of responsibility and liability to the project team as supported by a mean of 3.368 with standard deviation of 0.974. The study further pointed out that majority of the respondents felt that project planning establishes all the resources required in the project as supported by a mean of 3.867 with standard deviation of 0.877, facilitates project reporting and review arrangements as shown by a mean of 3.694 with standard deviation of 0.912 and identifies and treats project risks as supported by a mean of 3.916 with standard deviation of 0.817.

Stakeholder Engagement and HIV Project Implementation

Table 4: Key Stakeholders Engagement

Stakeholders	Frequency	Percent
Special Groups	27	62
Voters	34	78
County Government Officials	21	48
Community Members	35	81
Donor	22	52

Table 4, The study found that the majority of the respondents, 62% agreed that special groups were their key stakeholders, 78% indicated voters, 48% indicated county government officials, 81% indicated community members,

and 52% indicated donors. This shows that there were several stakeholders in the HIV project implementation, and respondents were aware of the relevant stakeholders in each project.

Table 5: Stakeholders Engagement

Statement on Stakeholder Engagement.	Mean	Std. Dev
Projects take care of users' needs in all outcomes.	3.894	.817
Project beneficiaries are involved in project decision-making and project design.	2.069	1.078
The project allows users to take responsibility during the system initiation, design, and implementation process.	2.046	.918
Stakeholder participation makes all persons involved accountable for the results of specific activities and the implementation process.	1.953	1.043
Stakeholders' participation promotes users' ownership of the project.	3.794	.972
Stakeholders' Participation offers opportunities for users to, directly and indirectly, benefit from project implementation.	2.116	.865
Stakeholder participation facilitates users to agree on any correction measures during implementation.	2.186	.913

Table 5, The study established that more than 50% of the respondents were in agreement that projects took care of users' needs in all outcomes, as supported by a mean of 3.894 with a standard deviation of 0.817. The respondent could not remember whether the project beneficiaries were involved in project decision making and project design as shown by a mean of 2.069 with standard deviation of 1.078 and even they didn't information to support that the project managers allowed stakeholders to take responsibility during the system initiation, design, and implementation process as supported by a mean of 2.046 with standard deviation of 0.918. The majority of the respondents could not

demonstrate how, during the HIV projects implementation, the stakeholders were made accountable for the results of specific activities and tasks integral to the implementation process, as shown by a mean of 1.953 with a standard deviation of 1.043. The study pointed out that the majority of the respondents supported that Stakeholder Participation promotes shared ownership of the project, as supported by a mean of 3.794 with a standard deviation of 0.972. The project managers did not offer opportunities for stakeholders to, directly and indirectly, benefit from HIV project implementation as supported by a mean of 2.116 with a standard deviation of 0.865.

Monitoring and Evaluation and HIV Project Implementation

Table 6: Presence of Monitoring Plan and Monitoring Tools

Variable	Frequency	Percent
Yes	15	35
No	28	65

Table 6, The study established that 65% of the respondents disagreed that TASO South Sudan had a monitoring plan and monitoring tool, while 35% agreed. This shows that most of

the respondents disagreed that TASO South Sudan had a monitoring plan and monitoring tools.

Table 7: Frequency of Monitoring an Evaluation Exercise

Variable	Frequency	Percent
Once	9	21
Twice	12	27
Thrice	15	35
Four times	7	17

Table 7, The study established that 21% of the respondents indicated that the Monitoring and Evaluation exercise carried out on a project was done once, 27% indicated twice, 35% indicated thrice, and 17% indicated four times. The

study shows that the Monitoring and Evaluation exercise carried out on a project was done thrice, and the respondents were aware of the process.

Table 8: Monitoring and Evaluation

Statement	Mean	Std. Dev
Monitoring and evaluation were practiced in the TASO	2.023	1.021
Monitoring and evaluation enable the project manager to track the project performance.	3.842	.983
Monitoring and evaluation enable the TASO to have a communications matrix on the project.	3.615	.874
Monitoring and evaluation facilitate project reporting and review arrangements.	2.395	.948
Monitoring and evaluation establish feedback to the stakeholders.	3.714	.872

The study established that the majority of the respondents had a strong opinion that monitoring and evaluation were not practiced in the county, as supported by a mean of 2.023 with a standard deviation of 1.021. Monitoring and evaluation enables the project manager to track the project performance as supported by a mean of 3.842 with a

standard deviation of 0.983. Monitoring and evaluation enables the County to have a communications matrix on the project as shown by a mean of 3.615 with a standard deviation of 0.874.

The study further pointed out that monitoring and evaluation did not facilitate HIV project reporting and review

arrangements as supported by a mean of 2.395 with a standard deviation of 0.948. The majority of the respondents thought that monitoring and evaluation should establish

feedback to the stakeholders, as supported by a mean of 3.714 with a standard deviation of 0.872.

Inferential statistics
Model Summary

Table 9: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.857 ^a	.734	.696	2.06772

a. Predictors: (Constant), Stakeholder Participation, Monitoring and Evaluation, Project planning.

Table 9, The findings show that the coefficient of correlation R was 0.857, an indication of a strong positive correlation between the variables. The adjusted coefficient of determination R² was 0.696, which indicates that 69.6% of the changes in the dependent variable, HIV Project

Implementation, can be explained by four independent variables: Stakeholder Participation, Monitoring and Evaluation, and Project planning. The remaining 30.4% can be explained by other factors affecting the implementation of projects that were not included in the study.

Analysis of Variance

Table 10: ANOVA

Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	331.014	4	82.753	26.271	.000 ^b
Residual	119.713	38	3.150		
Total	450.727	42			

1. Dependent Variable: Project Implementation (Testing and Counseling (HTC))
2. Treatment and Care (ART), System Strengthening & Operational metric)
3. Predictors: (Constant), Stakeholder Participation, Monitoring and Evaluation, Project planning.
4. The probability value was 0.00<0.05, an indication that at least one independent variable significantly

5. Dependent Variable: Project Implementation. (Testing and Counseling (HTC) Treatment and Care (ART)System Strengthening & Operational metric)

Regression Coefficients
Table 11: Regression Coefficients

Model	Unstandardized	Standardized Coefficients			
	B	Std. Error	Beta	t	Sig.
(Constant)	19.613	8.957		2.190	.037
Project Planning	.297	.062	.497	4.777	.000
Stakeholder Participation	.308	.090	.392	3.431	.002
Monitoring and Evaluation of Projects	.240	.097	.263	2.486	.019

The regression analysis model becomes:

$$Y = 19.613 + 0.297(X_1) + 0.308(X_2) + 0.240(X_3)$$

Where: Y = Project Implementation

X₁ = Project Planning

X₂ = Stakeholder Participation

X₃ = Monitoring and Evaluation of HIV Projects

The findings established that, holding other factors constant, implementation of HIV projects in TASO South Sudan would be at 19.613.

A unit increase in project planning, holding other factors constant, implementation of HIV projects would be at 0.297. Project planning had a p-value of $0.00 < 0.05$, which implies that project planning is a significant determinant of HIV project implementation. Project planning is important because it demonstrates leadership and direction of the project. The strategic goals are delivered in the right way against the business opportunities. According to Brown and Hyer (2020), Project planning explains the aspects of forecasting techniques that help in predicting costs and cash flows. The author also found that project planning is key information of organizational structure and relates it to the functions of project implementation. Proper expectations of quality and timelines are set, ensuring all the risks are well managed and mitigated to avoid them becoming an obstacle in the implementation. Project planning involves the right people to be involved in the right activity and processes, and the processes follow the project life cycle. It ensures a project's progress is tracked and reported properly. Project planning is important because someone needs to be able to understand if everyone's doing what they should, and it learns from the successes and failures of the past.

A unit increase in stakeholder participation, while holding other factors constant, would result in the implementation of HIV projects being at 0.308. Stakeholders' participation had a p-value of $0.002 < 0.05$, which implies that stakeholders' participation is a significant determinant of HIV project implementation. The Author shows that effective correspondence between stakeholders would guarantee that the project is actualized effectively, and every single key player is on the same page, and the stakeholders' desires are met. Stakeholders' participation promotes the user's needs and project ownership. There is accountability since all participants expect to benefit from the projects. A unit increase in monitoring and evaluation of projects, while holding other factors constant, implementation of HIV projects would be at 0.240. Monitoring and Evaluation had a p-value of $0.019 < 0.05$, which implies that Monitoring and Evaluation is a significant determinant of HIV project implementation. A good monitoring team has good stakeholder representation. The author also indicates that an M&E team that embraces teamwork demonstrates strength, understanding, and is an ingredient for better project performance. Well done, project monitoring and evaluation where the right tools are employed, then the project success is assured. The team can identify and correct any mistakes.

There is always a good flow of processes since the communication and feedback are facilitated by Monitoring and evaluation.

Discussion

Project Planning and Design

The study revealed that while TASO engages in structured project planning, several operational challenges, such as limited data for forecasting, rapidly changing field conditions, and insecurity, affected the full implementation of planned activities. Most respondents agreed that annual work plans, budgets, and activity schedules are developed in line with donor and Ministry of Health guidelines. However, the dynamic context of Central Equatoria, marked by road inaccessibility and periodic violence, often led to delays or cancellations of planned activities. This supports findings from PMI (Project Management Institute) literature, which emphasize that adaptive planning is critical in fragile contexts. In South Sudan's unstable environment, rigid planning models are insufficient. TASO's flexibility in rescheduling activities and prioritizing high-impact interventions (e.g., ART delivery during instability) reflects adaptive project management approaches suited for humanitarian settings.

Stakeholder Engagement

The study showed that stakeholder involvement, including local government, community leaders, and beneficiaries, was generally strong but uneven. In some counties, community engagement improved ART adherence and reduced stigma, while in others, a lack of coordination with local authorities delayed program activities. Effective stakeholder engagement is crucial in project implementation, especially for health interventions that require behavior change and community buy-in. According to the Logical Framework Approach, stakeholder involvement enhances project ownership, sustainability, and alignment with local needs. TASO's approach to integrating local leaders into outreach campaigns and sensitization efforts is consistent with best practices, though greater decentralization and coordination with county health departments is needed.

Monitoring and Evaluation (M&E)

Monitoring and evaluation practices at TASO were found to be well-structured at the central level but inconsistently applied across all supported facilities. While central M&E officers had strong systems in place for data collection and reporting, rural facilities lacked adequate staff and

equipment for real-time data entry and analysis. As a result, delays and inaccuracies in reporting affected timely decision-making. TASO's use of mobile data collection tools and periodic supervision helped improve performance monitoring, but these efforts were constrained by road inaccessibility and insecurity, which limited physical site visits.

Conclusions

Project planning was found to be systematic but often disrupted by external factors such as insecurity and poor road infrastructure. Resource management, particularly the shortage of qualified health personnel and frequent stock-outs of essential HIV commodities, emerged as a key constraint on service quality and coverage. Additionally, while TASO's efforts to involve stakeholders and deploy community-based strategies were notable, the inconsistency in monitoring and supervision across rural facilities weakened overall performance tracking. Project planning and design had a p-value of $0.00 < 0.05$, which implies that project planning is a significant determinant of HIV project implementation.

On stakeholder's involvement, the study concludes that project managers did not take care of users' needs in all outcomes, the shared ownership of the projects, and facilitating users to influence any correction measure during implementation was not promoted. The opportunities for the users and stakeholders to benefit from HIV project implementation and assume some measure of responsibility during the system initiation were not offered, and therefore, the stakeholders could not be held accountable for the results of specific activities and processes implemented; hence, most of the HIV project implementations were unsuccessful. A unit increase in stakeholder participation, while holding other factors constant, would result in the implementation of HIV projects being at 0.308. Stakeholders' participation had a p-value of $0.002 < 0.05$, which implies that stakeholders' participation is a significant determinant of HIV project implementation.

In regard to monitoring and evaluation, the study concludes that monitoring and evaluation were practiced in the county projects, and project managers should apply monitoring and evaluation tools. Most of the project managers did not have enough skills and competency to apply the tools, and therefore, it was difficult to track the project performance and facilitate project reporting and review arrangements. The study further concludes that most of the projects fail because there was no clear established feedback to the stakeholders and a clearly defined communications matrix on the project. These lead to repeated mistakes, which could be addressed during the monitoring and evaluation of the project implementation. A unit increase in monitoring and evaluation of projects, while holding other factors constant, implementation of HIV projects would be at 0.240. Monitoring and Evaluation had a p-value of $0.019 < 0.05$,

which implies that Monitoring and Evaluation is a significant determinant of HIV project implementation.

Insecurity, road inaccessibility, and limited health system capacity were identified as persistent barriers to effective project implementation. However, TASO has demonstrated resilience and adaptability through strategies such as mobile ART delivery, task-shifting to community health workers, and flexible activity planning.

In conclusion, effective project management is essential but not sufficient on its own in a fragile and resource-constrained setting like South Sudan. The success of HIV project implementation depends on the ability to adapt project management practices to local realities while addressing systemic challenges through stronger partnerships, improved infrastructure, and long-term capacity building.

Recommendations

Strengthen Human Resource Capacity, recruit and retain more qualified staff, particularly in remote areas. Expand training in project management, M&E, and HIV service delivery for both clinical and non-clinical staff. Provide incentives such as hardship allowances and accommodation to retain health workers in insecure and hard-to-reach areas. Enhance Supply Chain Management, improve forecasting and inventory management systems at the facility level. Develop contingency stock and buffer systems, especially before rainy seasons or known periods of insecurity. Increase coordination with national supply agencies to prevent ARV and test kit stock-outs.

Improve Monitoring and Evaluation Systems, standardize M&E tools across all supported facilities, and ensure regular data quality audits. Invest in digital data collection and remote monitoring tools for inaccessible areas. Train facility-level staff on data analysis and its use for decision-making.

Strengthen Adaptive Project Planning, adopt more flexible and scenario-based planning approaches to respond to dynamic challenges like conflict or floods. Regularly update implementation plans based on real-time field data and risk assessments.

Recommendations to the Government of South Sudan

Invest in Health Infrastructure, rehabilitate roads and bridges in rural areas to improve access to health facilities. Support the construction and maintenance of storage facilities for medical supplies.

Support Workforce Development, expand training programs for health professionals, with emphasis on HIV management and rural deployment. Integrate community health workers into the formal health system to support long-term sustainability.

Strengthen Security and Local Governance, improve the security situation in volatile areas through community

policing and peace-building initiatives. Facilitate coordination between county health departments and implementing partners like TASO.

Recommendations to Donors and Development Partners

Support Flexible Funding Mechanisms, allow for reallocation of funds in response to emergencies (e.g., insecurity, floods) to enable adaptive project management. Prioritize long-term investments in health systems strengthening alongside service delivery.

Promote Local Ownership and Sustainability, support capacity-building initiatives that prepare local institutions to gradually take over HIV program management. Fund initiatives that foster community engagement, patient adherence, and stigma reduction.

Enhance Coordination, improve collaboration between donors, NGOs, and government agencies to reduce duplication and align strategies. Facilitate knowledge-sharing platforms to disseminate best practices in HIV project management in fragile settings.

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List of abbreviations

AIDS	Acquired Immune Deficiency Syndrome
ARV	Antiretroviral
HIV	Human Immune-Deficiency Virus
NGOs	Non-Governmental Organizations

PMI
TASO
UNAIDS
and AIDS.

Project Management Institute
, the AIDS Support Organization
United Nations Programme on HIV

Source of funding

The study was not funded

Conflict of interest

The author did not declare any conflict of interest

Data availability

Data is available upon request

Author contribution

Isaiah Tut collected data and drafted the manuscript of the study

Geard Kabuye supervised the study

Author biography

Isaiah Tut is a student of the master of Public Health at Team University

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