

# Paucities of Monitoring and Evaluation Arrangements of Johannesburg-Based Non-Governmental Organisations Intervening in Substance Abuse, A Research Conceptualisation

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**Abstract:** Studies show that organisations, including non-governmental ones, believe that monitoring and evaluation provides for improved implementation and management as well as reformulation of interventions. Therefore, in the recent years most organisations have put in place arrangements to monitor and evaluate their interventions. However, where present, most of these arrangements are ineffective and in turn affects the implementation and management of their interventions. Using Johannesburg-based non-governmental organisations intervening in substance abuse this paper conceptualises a research that interrogates the paucities of monitoring and evaluation arrangements. Generally, the paper employs a summative thematic content analysis of literature around this subject. More specifically three sets of literature, that is, on the (i.) research's physical context or setting, (ii.) research problem, and (iii.) past and current studies on and evaluations of the research problem. Specifically, the interrogation on the research problem analysis makes use of the problem tree, trend analysis, and the theory of constraint. This restructured approach provides us with comprehensive and critical content that allows us to state the research problem, the research purpose, and the research questions on the paucities of monitoring and evaluation arrangements of Johannesburg-based non-governmental organisations intervening in substance abuse. It also provides for information to propose, yet to detail, the (i.) research strategy, design, procedure and methods as well as (ii.) frameworks that we can use interpret the resulting empirical results.

**Keywords:** Research conceptualisation, Research physical setting, Research problem analysis, Research knowledge gap analysis

## 1. Introduction

Debatable as it may seem, substance abuse is a problem that comes with devastating consequences especially among the youth and, therefore, should be curbed (Whiting, 2014). However, the interventions on substance abuse, like any other, should be conceptualised from empirical evidence so that they are effective, sustainable, relevant, and efficient (Peltzer *et al.*, 2010). Further, once formulated the implementation of these interventions should be monitored and evaluated to provide for their better implementation and management. Unfortunately, most substance abuse interventions suffer from absent or ineffective monitoring and evaluation (Mpanza & Govender, 2017; Whiting, 2014). Therefore, they cannot generate the needed empirical evidence to formulate, implement, and manage these interventions. In which case, a need arises to investigate the reasons behind the paucities of monitoring and evaluation arrangements of substance abuse interventions.

Before deciding 'how' to carry out a research, we need to interrogate literature to appreciate the problem and thereafter establish its knowledge gap. These two pieces of information provides for conceptualising 'what' facets of research we should and 'why' we should bother. This paper conceptualises a research on monitoring and evaluation arrangements of Johannesburg-based non-governmental organisations intervening in substance abuse. It employs the tools proposed in Wotela (2019), that is, use of summative thematic content analysis to interrogate literature on (i.) problems of monitoring and evaluation systems and (ii.) past and current research on monitoring and evaluation systems to establish the knowledge gap on this subject. Over and above summative thematic content analysis we also make use of the problem tree, trend analysis, and the theory of constraint also proposed in Wotela (2019).

It helps to understand the physical space where the research will take place in our case, Johannesburg-based non-governmental organisations intervening

in substance abuse, before we undertake a research problem analysis. Therefore, we devote Section 2 to understanding the research physical context or setting. On the basis of the discussion in Section 2, we then move onto Section 3. Here we employ the problem tree, trend analysis, and the theory of constraint to understand the problem of monitoring and evaluation arrangements in general and more specifically non-governmental organisations before we zero in on Johannesburg-based non-governmental organisations intervening in substance abuse. After appreciating the problem, we then move onto sourcing and reviewing past and current research on this subject in Section 4. In doing so, we appreciate the aim and objectives of such research; their conceptual frameworks, and; research approaches, procedure and methods. We also review their research results and findings from which we are able to deduce the knowledge gap on this subject. After appreciating the problem and establishing its knowledge gap, we then conceptualise this research spelling out (i.) the research problem statement, (ii.) research purpose statement, and (iii.) research questions as well as proposing an appropriate (iv.) research strategy, design, procedure and methods for such a research and (v.) frameworks that we can use to interpret anticipated empirical research results.

## 2. City of Johannesburg Non-Organisational Organisations Intervening in Substance Abuse

South Africa, as the name suggests, is a country in Southern Africa. At a subnational level, it is divided into nine provinces – that is, the Eastern Cape, the Free State, Gauteng, KwaZulu-Natal, Limpopo, Mpumalanga, the Northern Cape, North West and the Western Cape. Within Gauteng Province, lies the Metropolitan City of Johannesburg. According to the 2017-18 Integrated Development Plan, it is the biggest City not only in Gauteng Province but South Africa as a whole. Further, it has the biggest population size sitting at almost 6 million from about 5 million in 2016. Most South African migrants and international immigrants that end up in Johannesburg are estimated to be about three thousand per month. A third of the City's population is under 35 years old. Further, the City deals with several developmental issues such as poverty, unemployment, and crime.

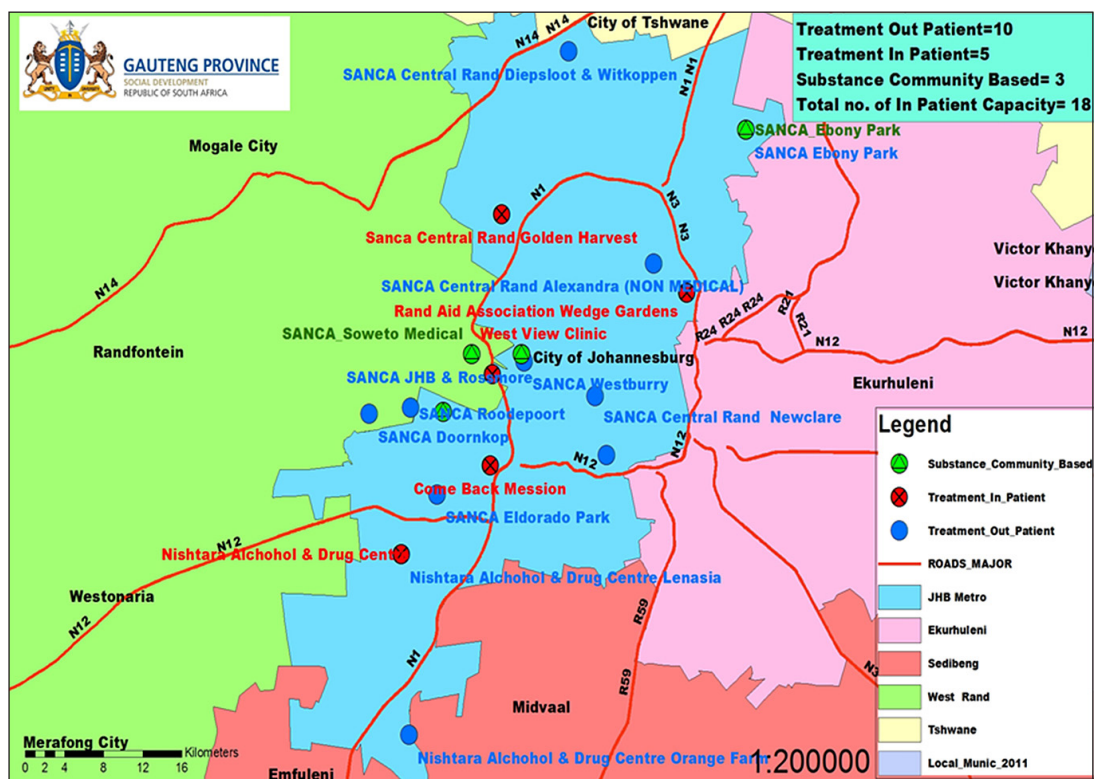
South Africa has several voluntary, not for profit, and autonomous non-governmental organisations

that help the government deal with its developmental issues (Nzimakwe, 2008; Banks & Hulme (2012). Kumaran and colleagues (2012) trace the history of South African non-governmental organisations to the 1940s during apartheid regime. At that time, most non-governmental organisations galvanised against the apartheid whose aim was to respond to the needs of deprived and underprivileged African and Coloured communities. There was another profilation of non-governmental organisations in the late 1970s through the 1990s that rose due to state-led development failures. The aim of these organisations was people-centred service delivery initiatives (Banks & Hulme, 2012). Therefore, focus on service delivery sparked collaboration with government that we see currently (Kumaran *et al.*, 2012).

Some non-governmental organisations focus on capacity building while others on service delivery as well as economic and social challenges (Banks & Hulme, 2012; Kumaran, Samuel & Winston, 2012). They do influence government policy, provide governance oversight, and shape the political landscape mostly to serve the third sector grassroots communities (Kumaran *at al.*, 2012). Further, Nzimakwe (2008) points out that some non-governmental organisations deliver services that governments can especially to communities that government cannot reach.

In South Africa, non-governmental organisations should be or are registered with the Department of Social Development (DSD). However, they are subsidised and monitored by different governmental departments (Kumaran *et al.*, 2012:32; NDMP, 2013-2017). The City of Johannesburg does have its fair share of non-governmental organisations in South Africa. As expected some are international while others are national, provincial, and local to the municipality. One such group of non-governmental organisations focuses on substance abuse interventions which are the focus for the conceptualisation of this paper. Figure 1 on the next page shows Gauteng-based non-organisational organisations intervening in substance abuse with the City of Joahhnesburg in blue. They are divided in three categories – that is, those rendering (i.) community based services, (ii.) out-patient treatment services, and (iii.) in-patient treatment services. There has also been a drastic increase in private substance abuse private treatment centres because the surge in on the increase in South Africa (Mpanza & Govender, 2017).

**Figure 1: Map of Non-Governmental Substance Abuse Treatment Centres in Gauteng Province**



Source: Gauteng Department of Social Development

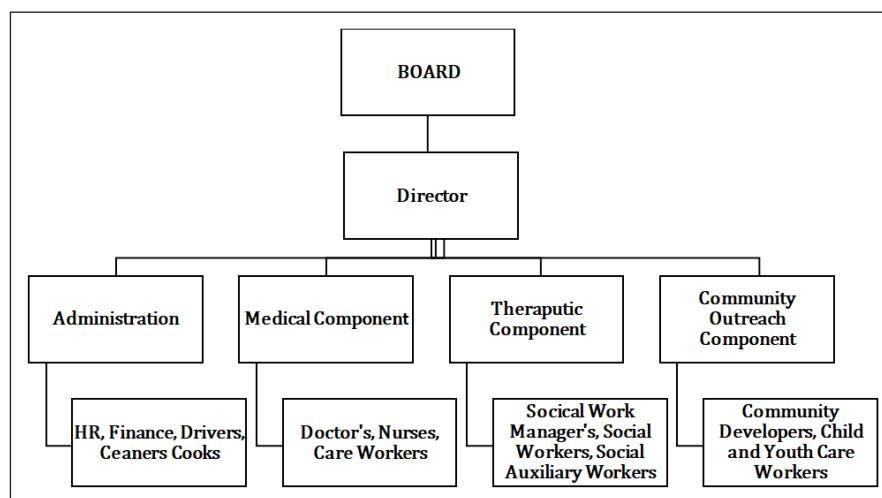
As expected, Gauteng-based non-organisational organisations intervening in substance abuse implement their interventions in conjunction with Government (Whiting, 2014). These organisations – for example, the South African National Council on Alcoholism and Drug Dependence (SANCA) – are represented on the Central Drug Authority and the Department of Social Development (National Drug Master Plan of 2013-2017). Figure 2 on the next page shows a typical organogram of Gauteng-based non-organisational organisations intervening in substance abuse. There are slight variations depending on the services offered. For example, organisation that offer in-patient treatment services normally do not have a community outreach component branch. The 2013-2017 National Drug Master Plan (NDMP) of South Africa is the country's blue print on implementation and management of substance abuse in South Africa. The document guides the operational plans of all stakeholders intervening in substance abuse. However, according to Whiting (2014), the National Drug Master Plan does not provide realistic arrangements for implementing the intervention – even though there is guidance on developing best practice models on substance abuse implementation by international protocols.

Like any other intervention, there is a need for monitoring and evaluation efforts in substance abuse. This includes, according to the National Drug Master Plan, tracking and assessing programme performance, organisational performance, financial performance, and relevance to community needs. However, monitoring and evaluation of the substance abuse intervention in South Africa has been a challenge because it lacks of comprehensive, accurate, and comparable information. Myers and others (2010) cited by Mpanza and Govender's (2017) study reports programme manager alluding to poor monitoring and evaluation of the programme probably because there is no ideal reference point to monitoring and evaluation substance abuse interventions. In turn, this affects implementation and management of the interventions.

### **3. Absent or Ineffective Monitoring and Evaluation Arrangements in Non-Governmental Organisations Intervening in Substance Abuse**

To appreciate the problem of monitoring and evaluation of the substance abuse intervention, we should begin with appreciating the problem of

**Figure 2: A Classic Organogram for Gauteng-Based Non-Organisational Organisations Intervening in Substance Abuse**



Source: The first author's conception from her experience as a Provincial Department of Social Development official

substance abuse in South Africa. Thereafter, we can interrogate the intervention and finally the problem of absent or ineffective monitoring and evaluation.

### 3.1 Substance Abuse: Root Causes and Consequences

Figure 3 depicts a problem tree of substance abuse more specifically the root causes and consequences configured from academic and non-academic literature. Several authors academic or otherwise, such as Peltzer and colleagues (2010), the Department of Social Development (2013), Whiting (2014) and Soul-City (2016) have linked substance abuse to the triple challenges, that is, inequality, unemployment, and poverty. On one hand, the way out of these economic and social challenges is dealing in these substances. On the other hand, substance abuse provides for coping with these economic and social ills. Other aspects that exacerbate substance abuse include cultural practices, urbanisation, dysfunctional family units, peer pressure, as well as pure thrill-seeking. As the Soul-City (2016) argues, globalisation provides for urbanisation which in turn allows for competitiveness that puts strain on parent with regards their role to bond, communicate, and oversee their children. This, coupled with its liberal approach, leads to an increase in substance abuse.

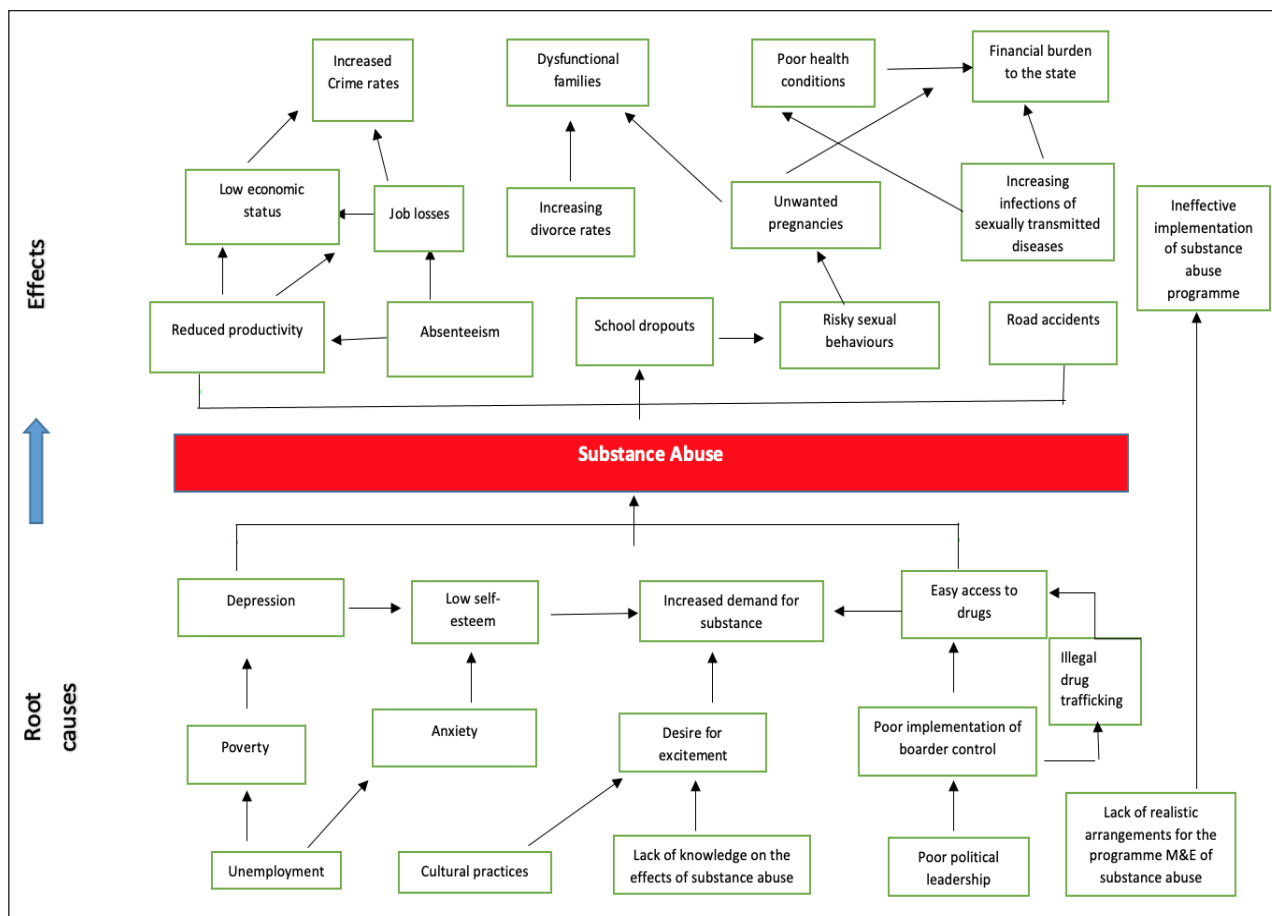
United Nations (1999), Peltzer and colleagues (2010), the Department of Social Development (2013), Whiting (2014), Soul-City (2016), as well as

Tshitangano and Tosin, (2016) suggest that weak South African border control is another root cause of substance dealing and abuse. Globalisation as well as the relaxation of land, air, and sea entry points and visa requirements at end of apartheid has provided for much needed international trade and 'global village fit in'. However, they have also made the country porous to illegal immigration and substances. Further, this is because the local authorities have challenges with enforcing the on lawlessness breeding public places, such as *shebeens*, that provide platforms for legal and illegal substance trading and abuse. Some of these places operate near schools with reports of sales of such substances on school premises. About nine percent of South African learners report being offered or sold drugs within school grounds (Department of Basic Education, 2013). This spirals into addiction and increased demand.

In turn, substance abuse affects the economic and social ills including functionality of such individuals as well as their families and consequently their communities and the country at large. First, as the United Nations (1999), Peltzer and colleagues (2010), as well as the Department of Social Development (2013) have noted, substance abuse places an additional demand on the already stretched curative health services and, therefore, primary health care sector. For example, smoking leads to respiratory diseases including lung cancer that can be fatal. Excessive alcohol consumption affects the liver as well as the foetus syndrome among if consumed by pregnant woman. Furthermore, substance abuse affects the



Figure 3: Showing a Literature-Supported Problem Tree of Substance Abuse



Source: Authors

human body's absorption of nutrients and, therefore, making recovery from opportunistic disease of such individuals harder for affected individuals (Smook *et al.*, 2014). Consequently, all these offshoots of substance abuse place a burden on the local, provincial, and national fiscals (Soul-City, 2016).

Second, as the Department of Basic Education (2013) and the Department of Social Development (2013) have noted, substance abuse has other non-health-related consequences. These include, but not limited to, crime, domestic violence, family disintegration, unemployment, decreased productivity, low economic growth, fiscal challenges, and political instability. Substance abuse results in job losses which in turn lead to unemployment and consequently poverty. Unemployment and poverty leads to domestic violence and family disintegration. Further, employers have reported losing out due to substance abuse through absenteeism, mistakes and accidents, and consequently low productivity (Smook *et al.*, 2014).

Lastly, interventions in substance abuse are costly. The National Drug Master Plan estimates that substance abuse interventions are about 6.4 percent of GDP per annum (Department of Basic Education, 2013). During 2009/10 financial year, the national government allocated more than 10 billion Rands substance abuse interventions (Whiting, 2014). These monies could have been used for economic and social development (Department of Social Development, 2013).

It may be debatable but legal and illegal substance abuse is a problem with devastating consequences especially among the youth and, therefore, should be curbed (Whiting, 2014). The youths that abuse substances disadvantages themselves in the short run but the entire community and the country in the long run (Department of Social Development, 2013; Soul-City, 2016). The resulting interventions on substance abuse, like any other, should be conceptualised from empirical evidence to be effective, sustainable, relevant, and efficient (Peltzer *et al.*, 2010).

Further, once formulated the implementation of these interventions should be monitored and evaluated to provide for their better implementation and management.

### 3.2 Substance Abuse: Mimicked Abridged Results-Chain and Results-Framework for the City of Johannesburg

Ideally, and in agreement with the National Drug Master Plan, 2013-2017, substance abuse should have three outcomes that is: reducing demand, reducing supply, and reducing harm. First, the outputs and activities that would reduce demand include outreach to increase awareness on the ill effects of substance abuse so that people are discouraged from abusing substances. Second, the outputs and activities that would reduce supply include regulating the production and distribution of legal and illegal substance abuse. This certainly involves legislation and law enforcement. Lastly, the outputs and activities that would reduce harm include provision of social, psychological, and health services to users and their families.

Table 1 below aims to provides a partially mimicked results-chain and accompanying results-framework for the anti-substance abuse intervention that incorporates the three strategies. The results-chain comprises the impact, outcomes, outputs, activities, and inputs while the indicators, baseline values, target values, assumptions, and risks make up the results-framework (Wotela, 2017).

Each outcome should have accompanying outputs and in turn each output should have accompanying activities. Finally, each activity should have accompanying inputs.

Similarly, the impact and each outcome, output, activity, and input is accompanied by assumptions and risks. In this case, the assumptions for the impact and outcomes would be (i.) availability of resources, (ii.) coordination amongst institutions and organisations intervening in substance abuse, (iii.) community participation, (iv.) sufficient family support for the substance abusers seeking help, (v.) maintaining sobriety among those rehabilitated.

**Table 1: A Partially Mimicked Results-Chain**

	<b>Indicators</b>	<b>Base Line-values</b>	<b>Target-values</b>
<b>Impact</b> Several communities in the City of Johannesburg leading a drug-free life	Rate of substance-abuse incidences in the City of Johannesburg	Current rate of substance-abuse	Future realistically reduced rate of substance-abuse
	Reduced rate of those harmed due to substance-abuse incidences in the City of Johannesburg	Current rate of those harmed due to substance abuse	Future realistically reduced rate of those harmed due to substance-abuse
<b>Outcome 1</b> Reduced demand for legal and illegal substances	Demand for substances in the City of Johannesburg	Current demand of substances	Future realistically reduced demand for substances
<b>Outcome 2</b> Reduced supply of illegal substances	Proportion of illegal substance hotspots in the City of Johannesburg	Current proportion of illegal substance hotspots	Future realistically reduced substances hot spots
	Proportion of illegal substance lords prosecuted in the City of Johannesburg	Current proportion of illegal substance lords	Future realistically reduced illegal substance lords
<b>Outcome 3</b> Increased provision of social, psychological, and health services to users and their families	Proportion of substance abusers using provided services in the City of Johannesburg	Current proportion of substance-abusers using provided services	Future realistically reduced proportion of substance-abusers using provided services
	Proportion of substance abusers that are rehabilitated and re-integrated with their families	Current proportion of substance-abuse that are unrehabilitated	Future realistically reduced proportion of substance-abusers that are unrehabilitated

Source: Authors

The results-chain and accompanying results-framework are fundamental to an effective monitoring and evaluation of any intervention. Mere absence of such for organisations intervention in substance abuse provides one hint why monitoring and evaluation arrangements in non-organisational organisations intervening in substance abuse are absent or ineffective. However, rather than speculate, let us interrogate this in the next section.

#### **4. Review of Studies on and Evaluations of Absent and Ineffective Monitoring and Evaluation Arrangements**

Thus far we gather that government has entrusted non-governmental organisations to help it intervene in anti-substance abuse. However, due the absent or ineffective monitoring and evaluation for these interventions we have no way of empirically assessing their effectiveness, sustainability, relevance, and efficiency. In turn, such an assessment would feed into formulation, implementation, and management of these interventions. We have since speculated that absent results-chain and accompanying results-framework could be the reason why monitoring and evaluation for these interventions is either absent or ineffective.

This section now reviews the methods, data, findings, and conclusions of primary and empirical studies on and evaluations of absent and ineffective monitoring and evaluation arrangements of these and similar interventions. In total we found four such studies. Only one of these studies is close to our research, that is, it assesses how we can assess the monitoring of service quality of substance abuse interventions. Though the other three studies focus on monitoring and evaluation in non-governmental organisations, it is not exactly in light of this research.

Karani, Bichanga and Kamau (2014) assess the effectiveness of HIV/AIDS interventions implemented by non-governmental organisations in Kenya. Using the national HIV/AIDS monitoring and evaluation framework as the benchmark, their key objective was to determine how effectively non-governmental organisations utilised monitoring and evaluation. Further, they also determined the factors that hinder effective utilisation of monitoring and evaluation in such interventions and how to mitigate such factors. Karani, Bichanga and Kamau's 2014 study applied a mixed research strategy but the design they used is not explicit though we can speculate

that it is cross-sectional. This paved the way to using both fully structured and semi-structured interview schedules as data and information collection instruments. They employed a combination of face-to-face interviews as well as observations to collect the data and information.

Karani, Bichanga and Kamau (2014) found that most of the non-governmental organisations are aware that monitoring and evaluation is key to any intervention. Some organisation even had monitoring and evaluations plans which they even disseminate to their stakeholders. However, lack of commitment and lack of capacity and skills are some of the factors that impede effective monitoring and evaluation of interventions that non-governmental organisations are implementing. The lack of commitment meant that monitoring and evaluation activities are not budgeted for. The lack of capacity and skills in monitoring and evaluation means that non-governmental organisations cannot formulate or utilise logical frameworks (results-chain and accompanying results-framework) in their quest to monitor and evaluate interventions.

Myers and colleagues (2014) explore the barriers that affect the monitoring of service quality among organisations intervening in substance abuse in KwaZulu-Natal and Western Cape. They employed a qualitative research strategy. This paved the way to using and semi-structured interview schedules as information collection instruments. They employed focus groups to collect information and used thematic content analysis to analyse the information they collected. Myers and colleagues (2014) found that most organisations would like to improve their various interventions as well as their performance measurement systems. However, using daunting outdated monitoring data collection approaches are a barrier to monitoring interventions. Such time-consuming approaches just over burden personnel with paperwork without any results to justify the effort. Further, lack of capacity and skills to analyse and interpret data and information also impede effective monitoring of interventions. Furthermore, in the absence of performance information and skills for its measurement, most substance abuse monitoring reports are limited to descriptive analysis which may not be as useful.

Maleka et al. (2017) account the monitoring and evaluation experiences of five South African based non-governmental organisations intervening in

HIV/AIDS through sport. All the non-governmental organisations included in this research aligned their interventions with the National Strategic Plan for HIV, sexually transmitted infections, and tuberculosis of South Africa. Maleka et al. (2017) employed a qualitative research strategy and collect their information through document review, in-depth interviews with key informants, and a focus group discussion. They use a descriptive framework and thematic content analysis to make sense of the information.

Maleka et al. (2017) found that the five non-governmental organisations could easily monitor the *inputs, activities, and outputs* of their interventions. However, four of the five non-governmental organisations had a challenge monitoring and evaluating the outcomes of the interventions. On introspection, the reason for this shortcoming is that these organisations did not have a dedicated monitoring and evaluation function and neither did they have the results-chain and its accompanying framework, at least one that spells out their outcomes. Maleka et al. (2017) conclude that non-governmental organisations need support in their monitoring and evaluation capacity.

Micah and Luketero (2017) focus on non-governmental organisations based in the Kenyan Bungoma South sub-County that are intervening in maternal health. They sought to determine how human resource capacity, monitoring and evaluation information systems and plans as well as stakeholder participation in monitoring and evaluation influences performance of these organisations. They employ a mixed research strategy as well as descriptive survey and correlation research designs. The report used structured and unstructured data and information collection instruments to collect their research data and information as well as descriptive statistics to analyse these data and information.

Micah and Luketero (2017) found that the staff of these organisations were trained in quality data and information collection, collation, processing, and analysis. However, the staff do not have capacity and skills with regards the logical framework or the results-chain and its accompanying results-framework as well as designing data and information collection tools. They also use paper-based, rather than technology, in their data and information collection, collation, processing, and analysis duties. Micah and Luketero (2017) conclude that in the

absence of understanding the entire value-chain of monitoring and evaluation, the interventions misaligned its systems and plans as well as its resources. Consequently, tracking and assessing the interventions was compromised. Micah and Luketero (2017) recommend alignment between human resource on one hand and on the other monitoring and evaluation information systems and plans.

All the studies describe the monitoring and evaluation arrangements employed by non-governmental organisations as well as the factors affecting these arrangements. First off, only one of these studies is actually on South African organisations intervention in substance abuse. Most studies on absent or ineffective monitoring and evaluation are on HIV/AIDS interventions. This in itself presents a 'physical contextual' as well as 'research focus or subject' knowledge gap.

Collectively, the studies found that the non-governmental organisations believe that monitoring and evaluation is the gate way to improving formulation of interventions as well as their implementation and management. Further, at most, monitoring and evaluation arrangements are in place in most non-governmental organisations. However, the problem is ineffectiveness of these monitoring and evaluation arrangements which in turn affected the implementation and management of their interventions. The reasons underlying ineffective monitoring and evaluation arrangements include monitoring and evaluation capacity especially with regards the logical framework, that is, results-chain and the accompanying results-framework. Further, there is a failure to integrate the monitoring and evaluation function within the organisation. For example, management has not clarified the responsibilities of some staff members involved in monitoring and evaluation and this function is missing on their job description. Another reason underlying ineffective monitoring and evaluation arrangements is a focus on outputs and less on outcomes and impacts.

A limitation of these studies as is the case with most qualitative and case study research is that their empirical results and findings cannot be generalised. Further, none of these studies assessed institutional arrangements for integrating monitoring and evaluation in these non-governmental organisations. This is another knowledge gap in this research subject.



## **5. Conceptualising a Research on the Paucities of Monitoring and Evaluation Arrangements of Johannesburg-Based Non-Governmental Organisations Intervening in Substance Abuse**

Thus far, we have interrogated on the research problem – that is, absent or ineffective monitoring and evaluation arrangements in non-organisational organisations intervening in substance abuse – within their physical research context or setting – that is, the City of Johannesburg. Further, we have reviewed the methods, data, results, findings, and conclusions of studies on and evaluations of absent and ineffective monitoring and evaluation arrangements. This interrogation provides us with the knowledge gap on this subject as well as some methodological approaches and procedures that we may consider in interrogating the empirical part of this research. Using this introspection, this section proposes how we should conceptualise a research on the paucities of monitoring and evaluation arrangements of Johannesburg-based non-governmental organisations intervening in substance abuse. Section 5.1 presents the proposed draft research problem statement and Section 5.2 presents the accompanying research purpose (aims and objectives) statement. Section 5.3 presents the research questions that we should pursue for such a research. Section 5.4 proposes the 'research strategy, design, procedure and methods' that we should consider employing for this research while Section 5.5 proposes the frameworks we should consider to interpret empirical results that we anticipate. Since this is just a research conceptualisation paper, we do not detail the proposals in Sections 5.4 and 5.5.

### **5.1 Research Problem Statement**

Following on the introspection of the literature we have reviewed the research problem on the paucities of monitoring and evaluation arrangements of Johannesburg-based non-governmental organisations intervening in substance abuse should be as follows:

The City of Johannesburg is one of the biggest cities in South Africa and the continent. Because of its economic hub status, it attracts local in-migrants and international immigrants. As result, it is culturally vibrant and diverse. Typical, a third of a population fitting this description will be young people, 35 years and below. Unfortunately, just like most cities

in developing countries, the City of Johannesburg suffers from the triple challenges of inequality, unemployment, and poverty. On one hand, these vulnerabilities propel some of its citizens to generate a living through selling illegal substances (Peltzer *et al.*, 2010). On the other hand, some of its citizens take to abusing substances to shield themselves from these vulnerabilities (Peltzer *et al.*, 2010; Whiting, 2014). Smook and colleagues (2014), as well as Tshitangano and Tosin (2016), agree that this makes substance abuse, which is a global problem, one of the thorniest challenges in South Africa. The magnitude of substance abuse problem in South Africa is twice the global scale. Therefore, it has to be resolved.

The South African government has looped in non-governmental organisations to help it address the substance abuse problem. The City of Johannesburg has about nine government-funded non-governmental organisations intervening in substance abuse programmes (Nzimakwe, 2008). They are strategic partners because of their ability to services to communities. Their activities and outputs have come at a great cost – about R20 billion per year and has taken over that of HIV/AIDS (Smook *et al.*, 2014) – are notable. However, the stakeholders hardly know the effectiveness, sustainability, relevance, and efficiency of their substance abuse interventions. The outcomes and impact of substance abuse interventions remain unknown due to ineffective or almost absent monitoring and evaluation arrangements. Monitoring and evaluation is essential because it fosters formulation, implementation, and management of interventions and, therefore, their performance (Gorgens & Kusek, 2009). Why is this crucial aspect missing in the substance abuse interventions? Whilst there are several studies – for example, Karani, Bichanga & Kamau (2014) as well as Maleka *et al.* (2017) – that have assessed the contribution of monitoring and evaluation HIV/AIDS interventions, there are few that assess its contribution in substance abuse and almost none on South Africa apart from Myers and colleagues (2014).

### **5.2 Research Purpose (Aim and Objectives) Statement**

To address the research problem, the research purpose (aim and objectives) statement should be as follows:

This interpretive study seeks to assess the paucities of monitoring and evaluation arrangements of Johannesburg-based non-governmental organisations

intervening in substance abuse. Invariably, we should deduce how ineffective monitoring and evaluation arrangements in these organisations are contributing to ineffective and possibly inefficient implementation and management of substance abuse interventions. To this list, we should also add if such shortcomings contribute to formulating ineffective substance abuse interventions. Therefore, the broad aim of this study is contributing to the body of knowledge on how effective monitoring and evaluation arrangements can contribute to effective formulation, implementation, management, and reformulation of interventions.

### 5.3 Research Questions

To respond to the research purpose (aim and objectives) statement and, therefore, address the research problem; the research should pursue the following research questions.

- What monitoring and evaluation arrangements are used to track and assess substance abuse interventions?
- How are the monitoring and evaluation products used to enhance implementation, management, and reformulation of substance abuse interventions?
- What tools and skills should be in place to enhance the monitoring and evaluation of substance abuse interventions and its use?

### 5.4 Proposed 'Research Strategy, Design, Procedure and Methods'

We have learnt that the past and current studies on and evaluation of absent or effective monitoring and evaluation arrangement employed either qualitative or mixed research strategy even though the quantitative side of the mixed research studies are hardly pronounced because they hardly tested any hypotheses. We, therefore, propose to pursue a qualitative research strategy as well because our study intends to decode the reasons underlying, rather than the extent, absent or ineffective monitoring and evaluation arrangements. Second, most of these studies pursue a case study research design. We also opt for such a design to allow us to get to the bottom of this subject rather than spread widely and thinly.

Third, the studies employed both structured and unstructured data and information collection

instruments. In our case, we opt for an unstructured information collection instrument that will allow us to capture aspects that maybe out there but missing in literature on this subject. Fourth, typical of studies that employ a qualitative research strategy and case study research design, most of these studies employed purposive selection of respondents from its cases. There are no strong reasons why we should depart from this choice because it will equally fulfill our research aim and objectives. Fifth, the studies employed a broad range of research data and information collection instruments – that is, document analysis, observations, focus groups, and in-depth interviews. Lastly, the studies reviewed employed thematic analysis and in one case descriptive statistics to analyse the research data and information that they collected. We intend to employ a thematic analysis, more especially summative thematic content analysis. This will allow us to create the themes from our theoretical and empirical interrogation to get a comprehensive picture.

### 5.5 Proposed Interpretive Frameworks

Again we gather, though not as explicitly, from the past and current studies on absent or effective monitoring and evaluation arrangements that the normalisation process theory as well as the organisational readiness for change theory should be the key frameworks to help us interpret the empirical research results and, therefore, discuss the research findings on the proposed study.

We have argued, with literature support, that the organisations are convinced that monitoring and evaluation would lead to improved implementation, management and reformulation of interventions. They have since put monitoring and evaluation arrangements to reap from its benefit. However, these arrangements are ineffective. Chances are that this is due to poor implementation of the monitoring and evaluation intervention. This is where the normalisation process theory comes in. May and colleagues (2009), May and Finch (2009), Murray *et al.* (2010), McEvoy and colleagues (2014), as well as Wood (2017) have argued that this framework resulted from a need to explore implementation of interventions. The normalisation process theory provides a map for understanding contextual issues with regards implementing an intervention to allow for embedding and integration. It is useful for interrogating implementations outcomes which is what our research intends to pursue.

Again, we have argued with literature support, that some organisations have literally imposed monitoring and evaluation and, as a result, the staff members actually see it as a burden. This implies the organisations are not prepared beforehand to take up monitoring and evaluation and this is what makes organisational readiness for change theory a relevant framework for our research. Weiner (2009), who pioneered this framework, argues that organisational readiness for change theory provides a framework to assess the readiness of organisations to implement new or change interventions. It takes on board three dimensions, that is, structural factors, psychological factors, and level of analysis (Ritchie, Puchalski & Straus, 2018).

## 6. Summary and Conclusion

In summary, this paper sought to conceptualise the research that interrogates the paucities of monitoring and evaluation arrangements, using thematic content analysis. In the interrogation of the problem analysis, we noted that the substance abuse is a problem with devastating and costly consequences some of which are a burden on the overstretched health sector (Smook *et al.*, 2014). This warrants holistic and specific interventions. Implementing these interventions requires monitoring and evaluation arrangements to track and assess effectiveness, relevance, sustainability, and efficiency of these costly efforts. Gorgens and Kusek (2009) have argued that organisations should have a good feedback system that should gauge their performance and inform decision makers. Though most organisations have monitoring and evaluation in place because they think it is important (Karani, Bichanga & Kamau, 2014), its implementation is ineffective. The question is what are the real reasons underlying ineffective monitoring and evaluation arrangements? Unfortunately, our search shows insufficient literature on this subject in our context. Most literature points to use of outdated data and information collection methods. None of the reviewed studies have assessed institutionalisation of monitoring and evaluation in non-governmental organisations. Therefore, this is the avenue that this research should be pursuing but, even before we do that, let us think about how we should conceptualise such research and this is the focus of this paper. We hoping that seeing this research through will help us figure out monitoring and evaluation arrangements that are effective. However, this depends on how well we conceptualise such a research. Part of

that decision is restricting this research to organisations that are intervening in substance abuse at subnational level.

Despite the monitoring and evaluation over tone, we should pursue this study from an implementation discourse. In South Africa, implementation of its 'very good' on paper interventions has been an important focus that continues to elude us (Brynard *et al.*, 2011). Whilst implementation has three avenues, namely, management, monitoring and process evaluation (Gamakulu & Wotela, 2016), it would help to extend the investigation in the light of 'monitoring and evaluation' interventions. How are these interventions managed? How are they monitored? Are they subjected to process assessment? We preliminary elect the normalisation process theory and the organisational readiness for change theory as the frameworks that would help us interpret the empirical research results of such a research.

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