

**FACTORS INFLUENCING IMPLEMENTATION OF HEALTH PROJECTS IN  
GARBATULA SUB-COUNTY, ISIOLO COUNTY, KENYA**

**BY  
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**A Research Project Submitted in Partial Fulfilment of The Requirements for The  
Award of The Degree of Master of Arts in Project Planning and Management of The  
University of Nairobi**

**2018**

**DECLARATION**

I declare that this research project is my original work and has not been submitted for a degree in any other university or college for examination or academic purposes.

Signature: í í í í í í í í í í í í í í ..Date:í í í í í í í í í

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This research project has been submitted for examination with my approval as the University Supervisor.

Signedí í í í í í í í í í í í í í í Date í í í í í í í í í í ..

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## **DEDICATION**

Special thanks goes to my beloved wife Habiba Bora Huka and other family members who offered me moral and financial support. Thank you and God bless you abundantly.

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I am grateful to God Almighty for giving me renewed strength and new mercies every morning, and for helping me understand that courage is about not giving up, for good health and peace of mind throughout the duration of my course work and for his abundant provisions.

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I wish you all God's blessings and love.

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## **ABBREVIATIONS AND ACRONYMS**

<b>BOG</b>	:	Board of Governors
<b>CEOs</b>	:	Chief Executive officers
<b>GoK</b>	:	Government of Kenya
<b>ICT</b>	:	Information Communication Technology
<b>IFAD</b>	:	International Fund for Agricultural Development
<b>PM&amp;E</b>	:	Participatory monitoring and evaluation
<b>PTA</b>	:	Parent Representative
<b>SPSS</b>	:	Statistical Package for Social Sciences
<b>UNAIDS</b>	:	United Nations Programme on HIV/AIDS
<b>UNDP</b>	:	United Nations Development Programme

## ABSTRACT

Project implementation consists of challenging processes in the project management plan to satisfy the project specifications. This involves coordinating people and resources, as well as integrating and performing the activities of the project in accordance with the project management plan. The study established the factors influencing implementation of health projects in Garbatula Sub-County, Isiolo County. The study was guided by the following objectives; to examine how stakeholder involvement, budgetary allocation, project management and project monitoring influence implementation of health projects in Garbatula Sub-County, Isiolo County. The study was grounded on the empowerment theory which is supported by the public participation theory. The study adopted a descriptive research design. The target population for this study composed of the 268 stakeholders in Garbatula Sub-County, Isiolo County. A sample population of 158 was arrived at by calculating the target population of 268 with a 95% confidence level and an error of 0.05 using the below formula taken from Kothari (2004). The study selected the respondents using stratified proportionate random sampling technique. Primary data was obtained using self-administered questionnaires. Primary data was gathered directly from respondents and for this study, the researcher administered the questionnaire personally to the respondents. Data was analyzed using descriptive statistics. The qualitative data from the open-ended questions was analyzed using conceptual content analysis and presented in prose. Inferential data analysis was done using multiple regression analysis. The findings were presented in frequency tables. The study findings were also used by the government and particularly the County more so in implementation of government health projects. The study found that project monitoring had the greatest effect on the implementation of health projects, followed by stakeholder involvement, then budgetary allocation while project management had the least effect to the implementation of health projects in Garbatula Sub-County, Isiolo County. The study recommends that the county government should adopt an effective stakeholder mobilization strategy that help build collaborations with other health sector players like NGOs, CBOs and private companies for the realization of health goals in Kenya through devolved units, that the project management should engages the stakeholders more to harmonize its goals and objectives with the aspirations of the stakeholders and reduce dissonance levels thereby increasing satisfaction, that county government should improve integrated communications plan to improve project implementation and that management in health projects in Garbatula sub-county should ensure that they employ and deploy qualified and competent individuals for project monitoring process.

# CHAPTER ONE

## INTRODUCTION

### 1.1 Background of the Study

Traditionally projects are perceived as successful when they meet time, budget and performance goals (Shenhar, Dvir, Levy & Maltz, 2010). The Project Management Book of Knowledge, 2004 refers to project success being measured in terms of time, cost, scope, quality and customer satisfaction (Project Management Institute, 2014). This is commonly known as the 'triple constraint'. The 4th edition of the Project Management Book of Knowledge (2009) is similar, with the focus of 'performance management baselines' against project schedule, scope and cost (Project Management Institute, 2009). Often the scope, schedule and cost will be combined into a performance baseline that is used as an overall project baseline against which integrated performance can be measured (Project Management Institute, 2009). There is however criticism of traditional measures of project success. De Bakker, Boonstra and Wortman (2010) point out that this criticism is based upon the underpinning assumptions of the definition that: - the amount of time, the budget and the project's requirements can be set at the beginning of the project.

The project's is the same for each stakeholder. The project's success can be determined at the moment the project has produced its deliverables. There are many times when project success measured in time and budget is not sufficient, especially over a longer period of time after the project is complete. "Quite often, what seemed to be a troubled project, with extensive delays and overruns, turned out later to be a great business success (Shenhar et al., 2010). Shenhar et al (2010) and many others cite the example of the Sydney Opera House. It took three times longer and five times the cost than anticipated. But it quickly became Australia's most famous landmark, with few tourists wanting to leave Australia without seeing it (Shenhar et al., 2010).

Globally, effective project implementation is looked at in many ways to include a large variety of criteria. However, in its simplest terms, effectiveness of project implementation can be thought of as incorporating four basic facets. A project is generally considered to be successfully implemented if it comes in on-schedule (time criterion), comes in on-budget (monetary criterion), achieves basically all the goals originally set for it (effectiveness criterion), and is accepted and used by the clients for whom the project was intended (client satisfaction criterion). By its basic definition, a project comprises a defined time frame to completion, a limited budget, and a specified set of performance characteristics (Schultz &

Slevin, 2009). Further, the project is usually targeted for use by some client, either internal or external to the organization and its project team. It seems reasonable therefore, that any assessment of project implementation effectiveness should at least include these four measures among others.

In America, project implementation is about changing from the known to unknown, because the future is uncertain and may highly affect people's positions in organizations (Cummins & Worley, 2011). In many instances organization employees do not support change unless compelling reasons convince them to do so. In order to manage change, it's good to guide change efforts, it is useful to assess organization's readiness for project implementation. Readiness for change involves an assessment of the discrepancies that exist as well as the efficacy of the proposed change targets. Armenakis (2013) defines readiness for change as the cognitive precursor to the behaviors of either resistance to or support for a change effort. Employees become concerned and act to what is happening in their environment and make assumptions based on how they perceive that change. The assumptions made end up to be obstacles of an organization's readiness for projects (Wheatly, 2012). People naturally fear uncertainty; thus, resistance is common. Understanding obstacles of an organization's readiness for project implementation is required to understand change process.

In India, internationally accepted practices in project implementation are followed. Good quantitative and qualitative analytical synthesis is the grass root for successful and sustainable operations. Sustainability means relying on commercially priced and internally generated funds rather than on donors for growth (Garg, 2012). Employees will figure out what is happening and come up with conclusions about what can come out of the proposed strategies. Through this process, employees will form perceptions about the organization's readiness for project, which may be indicative of organization's ability to successfully make strategies work.

Selznick (1957) postulates that South Africa has been in the process of radical transformation. Within this environment government organizations rethink their strategies, redesign their structures and adjust their management practices in order to anticipate frequent changes and to respond proactively to meet anticipated demands. As an organization, the South African Police Service is able to transform itself to affect, forecast and activate rather than merely respond to environmental forces. The strategic management process provides such a mechanism. It represents a logical, systematic, and objective approach for determining the future direction of the South African Police Service. There is no proven plan of action for

achieving the organization's desired outcomes within a dynamic environment without a project (Schaap, 2012).

A successful project and the equally successful implementation of the project are the most reliable signs of good management. In Namibia, Management of institutions formulates strategies to guide operational activities on a yearly basis. Focus is on developing strategies that are effective in facilitating continuous improvement of operational activities at the institutions. The country's challenge is how to maintain consistency in managing the implementation process of strategic decisions (Sipopa, 2009). Schaap (2012) contends that managers are mainly comfortable with planning activities than with implementation, organizing, leading and control. This suggestion is supported by some managers who believe that project implementation is the responsibility of operational personnel.

In a developing country such as Kenya, health projects form a critical part of the health care sector. Health projects are undertaken to improve the health of the community through equity and access. Successful administration of benefactor subsidized undertakings depends fundamentally on legitimate venture choice, extend configuration, extend execution, observing and assessment. It has also been observed that, Organizations are frequently portrayed as the channel through which; wealth flows from rich to developing countries. Kenya included, poverty reduction, and empowerment of the poor (Engela & Ajam, 2010). This has led to explosive growth of international and local non-governmental organizations in Kenya. According to World Bank (2014), Kenya received public current transfers (money sent to non-governmental organizations and civil society organizations) worth US\$ 0.08 billion in the last year. Besides, values, standards, social conviction and assessments of the neighborhood individuals which are influenced specifically or by implication by advancement mediations ought to likewise be considered. Something else, manageability of such undertakings may by and large be addressed (Khwaja, 2014).

Despite the numerous achievements that have been made under Kenya's M&E system still faces challenges in the implementation namely: human capital, financial and infrastructural challenges (CLEAR, 2012). In its progress report UNDP Amkeni Wakenya highlights some of the challenges that it faced in monitoring and evaluation of community based projects in its grant making and capacity development mandates (Amkeni Wakenya, 2009). The narrative and financial reports from the project evaluators were not consistent in terms of quality, quantity and timeliness. Kenya's Vision 2030 is the country's development blue print which aims at transforming the country into an industrializing, middle income country

providing quality life to all its citizens by the year 2030. The vision is founded on three pillars namely; social, economic and political pillars which therefore require heavy investment in services resulting to a gap in expenditure given the annual Kenya's budget and allocation on spending (GoK, 2015).

Project implementation is a process whereby project inputs are converted to project outputs. It involves putting in action the activities of the project, putting into practice what was proposed in the project document and management of the project or executing the project intentions. Although the topic under review has been previously explored extensively out of the country but most of these studies were context specific, their implementation and implication are usually limited to countries, and the operating environment where these studies were conducted (Toor & Ogunlana, 2009). There is a lack of effort to contextualise the findings into local context where the structure, culture and maturity of the concerned organisations are different. Although emphasis has been given on the integration of process improvement programmes and conflict resolution process in the project management, but potential of human-related factors is not explored in detail. On the other hand, Lim and Mohamed (2009) suggested that project success can be classified into two categories, which are the macro- and micro-view point. Both viewpoints consider the usual criteria of time, cost and quality but remain silent on human-related factors as well.

In analysing project implementation, Pennypacker (2010) battles that there is no single arrangement of measures that all around applies to all organizations. The suitable arrangement of measures relies on upon the association's system, innovation, and the specific business and environment in which they contend. The creator assists diagrams benchmarking measures for project administration execution include: degree of profitability, efficiency (yield), quality, execution cost, plan execution, consumer loyalty, process duration, prerequisites execution, worker fulfilment and arrangement to vital business objectives. Project execution estimation alludes to a continuous assessment of the adequacy and importance of a given project. Execution estimation can be utilized to research the general execution of a worker or group of representatives in a given project. A project can likewise be dragged down because of horrendous correspondence, unequal workloads, or inability to co-work among laborers. There are numerous elements that figure out if or not a project is a win, fluctuating basically in light of the underlying goal of the project. Xavier, Harold Goodwin (2012) analyzed the prerequisites crucial for the achievement of a group tourism companies and reasoned that there had been characteristics which have been important in



clarifying achievement and disappointment in the execution of speculations: a durable and strong group; genuine group interest, ownership and control; appropriation of a business mentality, anticipating money related feasibility from the start; engagement with the private division; activities basically in view of market query and request driven item improvement; providing alluring, pleasant items principally in light of natural and social resources and which are more convenient to voyagers; time; engagement, support and coordinated effort in the association through partners with key ranges of skill; straightforward and responsible administration, administration and basic leadership structures and in addition sound, master monetary administration; and checking and differentiate so that groups and others can share and gain as a matter of fact and guarantee persevered achievement. In their research, Iyer and Jha (2011) recognized numerous variables as having affect project esteem execution, these incorporates: mission supervisor's ability, best organization direct, project chiefs planning and administration aptitudes, checking and criticism by method for members, decision making, coordination among project members proprietor's capability, social situation, financial situation and climatic conditions.

Pheng and Chuan (2012) portrayed wander accomplishment as the finishing of a project inside attractive time, cost and quality and achieving customer's fulfilment. Project achievement can be brought out through the brilliant execution of signs of the project. Thus, achievement alludes to task achievement and general execution alludes to general execution of pointers, for example, project administrators. Pheng and Chuan (2012) place that human components played a vital position in choosing the general execution. Scientific proof from people in general segment gives to some degree consolidated results. For instance, Hyndman and Eden (2010) met the CEOs of nine organizations in Northern Ireland. Every one of the respondents bring up that a focal point of consideration in mission, targets, points and execution measures had expanded the general execution of the association for the advantage all partners (Bushman et al, 2013). Respondents also demonstrated that the negative usage of the framework that esteem productivity over excellent and additionally transitory over long haul comes about, and in addition the inclination to overemphasize numbers to the detriment of judgment, could risk execution.

## **1.2 Statement of the Problem**

Project implementation consists of challenging processes in the project management plan to satisfy the project specifications. This involves coordinating people and resources, as well as integrating and performing the activities of the project in accordance with the project

management plan (PMBOK, 2009). The ability to implement projects can be more important than the project itself. Investors have come to realize that implementation is more important than the vision of the project (Charan & Colvin, 2009). Charan (2009) observed that despite the importance of project implementation process, far more research has been carried out into project preparation rather than into project implementation process, while Rutan (2010) concluded that literature is dominated by a focus on long range planning and project content rather than the actual implementation of projects, on which little is written or researched. A well-articulated project, great product, or breakthrough technology can put an organization on the competitive map, but only solid implementation can keep it there. Without effective implementation, no business project can succeed (Hrebiniak, 2011). Understanding the factors that determine effective project implementation therefore becomes critical in successful implementation of projects.

Most of the government health projects in Kenya (66.7%) fail due to poor monitoring and evaluation during the project implementation process. One of the critical problems concerning in Garbatula Sub-County health projects is the frequent and lengthy delays that occur during implementation. Also, the health sector has been devolved and now operating at County level, therefore the implementation of health projects has been experiencing a lot of challenges in terms of resource utilization and project management. In order to improve this situation, it is necessary to first identify the major causes of poor implementation, or non-implementation. Several studies have already been done around project success and failure in organizations (GoK, 2016).

Numerous local funded projects have failed mainly due to ineffective participatory monitoring and evaluation institution. For instance, Awino et al (2011) conducted a study on effects of planned change projects of selected firms in the Kenyan insurance industry. Kipyego (2011) did a study on effectiveness of PM&E on Kazi kwa Vijana projects in Kakamega Central District and found that there is political interference on the effectiveness of PM&E which leads to underperforming of Kazi kwa Vijana projects in the period of study, Ondieki and Matonda (2013) observed that there had been failure to engage local communities to air their views, needs, challenges and priorities as well as lacking capacity to plan, implement, monitor and evaluate projects in a participatory manner. Further, Mureithi, Mureithi, Asiabaka, Wamuongo, Moses and Mweri (2012) observed that there had been lack of emphasis put on community-based monitoring and evaluation during the implementation of development projects in Kenya. This is echoed by Oduwo (2014) who indicated that due to

the low level of education, the community members as stakeholders are not aware of their role in the projects. Odongo (2015) studied the mediating role of citizen empowerment in the relationship between participatory monitoring and evaluation and social sustainability: a case of Karemo area development programme, Siaya County Kenya while, Gakuu, Kidombo and Kibukho (2015) investigated the influence of participatory monitoring and evaluation on citizen empowerment outcomes: a case of Karemo division, Siaya County. They found that employee involvement always leads to a higher rate of success in the implementation of project change management coupled with higher productivity. Gichoya (2011) looked at the "Factors Affecting the Successful Implementation of ICT Projects in Government", Karuti and Winnie (2010) studied the "The non-profit sector in Kenya – what we know and what we don't know", Adel (2009) looked into the "Causes of delays in public sector construction projects in developing countries." However, none attempted to analyze the implementation of health projects in Garbatula Sub-County, Isiolo County. To the bridge gap on obstacles such as deviation on original objectives and lack of confidence about success, and to address the issues poised by the dynamism of projects, this study investigated the factors that determine effective project implementation at Gedo in Somalia.

### **1.3 Purpose of the Study**

The study established the factors influencing implementation of health projects in Garbatula Sub-County, Isiolo County.

### **1.4 Objectives of the Study**

The study was guided by the following objectives:

- i. To examine how stakeholder involvement influence implementation of health projects in Garbatula Sub-County, Isiolo County.
- ii. To determine how budgetary allocation influence implementation of health projects in Garbatula Sub-County, Isiolo County.
- iii. To assess how project management influence implementation of health projects in Garbatula Sub-County, Isiolo County.
- iv. To find out how project monitoring influence implementation of health projects in Garbatula Sub-County, Isiolo County.

## **1.5 Research Questions**

The study sought answers to the following research questions:

- i. What is the influence of stakeholder involvement on the implementation of health projects in Garbatula Sub-County, Isiolo County?
- ii. To what extent does budgetary allocation influence the implementation of health projects in Garbatula Sub-County, Isiolo County?
- iii. How does Project management influence the implementation of health projects in Garbatula Sub-County, Isiolo County?
- iv. What is the influence of Project monitoring on the implementation of health projects in Garbatula Sub-County, Isiolo County?

## **1.6 Significance of the Study**

### **1.6.1 Isiolo County Government**

The study findings would be used by the government and particularly the County more so in implementation of government health projects.

### **1.6.2 Health Sector**

The findings might further be used as a pilot project by other government corporations hence promoting project implementation encouraging inclusivity by tapping on indigenous knowledge therefore improving chances and status of project(s) sustainability in the health sector. The study also provides useful information to community development officials including project leaders, social workers, community development workers, civil society organizations and even government officials about challenges facing implementation of health projects.

### **1.6.3 Policy Makers**

Policy makers, planners and program implementers would benefit from the finding to formulate policies and strategies on effective implementation of development projects.

### **1.6.4 Researchers and Academicians**

The research findings would lay some foundations for further research on factors affecting implementation of projects in Kenya. It would also contribute to the available literature in project management. The study helps analysts and academicians to grow their examination

into the influence of various factors such as stakeholder involvement on project implementation of health projects in Kenya.

### **1.6.5 General Public**

The locals and general public are bound to benefit as the study highlights key areas of understanding the factors influencing implementation of health projects. Therefore, they may benefit from proper project implementation in the County. Recommendations from the study help to ensure appropriate management and implementation of the projects for sustainability and realization of the goal of improving the socio-economic status of community members.

### **1.7 Delimitation of the Study**

This study was on the factors influencing implementation of health projects in Garbatula Sub-County, Isiolo County. Garbatula Sub-County was chosen as the study area since it is one of the areas where most government projects are not successfully implemented. Health project stakeholders within the Sub-County based development projects would form the population for the study.

### **1.8 Limitations of the Study**

The study anticipated encountering some limitations that hindered access to information that the study sought. The respondents targeted in this study were reluctant in giving information fearing that the information being sought might be used to intimidate them or print a negative image about them. The researcher handled this by carrying an introduction letter from the University to assure them that the information they gave was treated with confidentiality and was used purely for academic purposes.

The other limitation was that the study was based in Garbatula Sub-County, Isiolo County. The study did not include more Sub-Counties around the Country owing to the amount of time and resources available. This study therefore suffered from generalizability of the results if the nature of projects undertaken is significantly different from those in Garbatula Sub-County such as donor funded and implemented projects. In addition, the findings of this study were limited to the extent to which the respondents were willing to provide accurate, objective and reliable information. The researcher checked for consistency and test the reliability of the data collected.

## **1.9 Basic Assumptions of the Study**

The study assumed that there were no serious changes in the composition of the target population that might affect the effectiveness of the study sample. This study also assumed that the respondents were honest, cooperative and objective in the response to the research instruments and was available to respond to the research instruments in time. Finally, the study assumed that the authorities in the institutions granted the required permission to collect data from employees.

## **1.10 Definition of Significant Terms Used in the Study**

The following are the definitions of terms that were used throughout this study:

**Project implementation:** Refers to the situation where a project meets its objectives within the required time lines, budgets and scope and satisfies the anticipated beneficiaries.

**Project monitoring:** a process in which the primary stakeholders of any development intervention are actively involved in examining whether the programme or project has achieved its objectives, or whether it is progressing in the right direction.

**Budgetary allocation:** Refers to sufficiency of an economic or productive factor required accomplishing an activity, or as means to undertake an enterprise and achieve desired outcome.

**Stakeholder involvement:** Staff competency is the possession of appropriate mix of skills, knowledge and expertise, the motivation and will to act, experience in carrying out monitoring and evaluation programs, accurateness in conducting monitoring and evaluation and the time taken to complete a particular monitoring and evaluation assignment.

## **1.11 Organization of the Study**

This study is organized into five chapters. Chapter one contains the introduction to the study. It presents background of the study, statement of the problem, purpose of the study, objectives of the study, research questions, significance of the Study, delimitations of the study, limitations of the Study and the definition of significant terms. On the other hand,

chapter two reviews literature based on the objectives of the study. It further looked at the conceptual framework and finally the summary. Chapter three covers the research methodology of the study. The chapter describes the research design, target population, sampling procedure, tools and techniques of data collection, pre-testing, data analysis, ethical considerations and finally the operational definition of variables. Chapter four presents analysis and findings of the study as set out in the research methodology. The study closes with chapter five which presents the discussion, conclusions, and recommendations for action and areas for further research.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.1 Introduction**

This chapter provides an extensive literature and research related to factors influencing implementation of health projects. The chapter is thus structured into theoretical, conceptual and empirical review. The study also presents the knowledge gap the chapter seeks to fulfill.

#### **2.2. Concept of Project Implementation**

There is growing recognition that different types of projects require different approaches to their management, requiring management procedures tailored to the needs of the project (Crawford et al, 2011) and project managers selected with appropriate competencies (Mulle & Turner, 2012). Increasing globalization of projects and project management adds to this diverse mix, creating intercultural challenges for project managers (Mulle & Turner, 2014). Professional associations are beginning to recognize this diversification of project management. The project management literature agrees that there are two components of project success (Jugdev & Mulle, 2011). Achieving project success is becoming more important in the highly competitive construction industry. Large and complex construction projects are becoming more difficult to complete successfully in developing countries such as Kenya (Swan & Khalfan, 2012).

Considerable literature has been published on the topic of success including in depth reviews on Project Management success (Muller & Jugdev, 2012). Muller and Jugdev (2012) examined literature on project success by using keywords and identified publications, each with over 200 citations in Google Scholar. The literature typically divides project success into two whereby project success factors are analogous to independent variables that contribute to the likelihood of success and project success criteria are measures used to determine if a project was successful or a failure. In the latter case, the success criteria are like the dependent variables (Muller & Jugdev, 2012).

In relation to this paper the various methods, tools, and techniques can be viewed of as independent variables and as outlined in the methodology section, the positive and negative project success factor counts are the dependent variables. The quest for achieving greater productivity in road construction projects, and their quality need has been the desire of road project clients in financing projects involving huge contract sums, yet this vision keeps failing due to the perceived conflicts of interest existing among project parties. In addition,



many projects have failed due to the inability to maintain standard procedures and the required operational effectiveness regarding the attainment of targeted project goals. The World Bank (2013) mentioned that some of these procedures are loose and are often supplemented by circulars that are unclear and often contradictory and this greatly influence project outcome. Clearly, the study has shown that seven out of ten projects surveyed suffered delays in their execution (Saleh, 2009).

### **2.3 Stakeholder Involvement and Implementation of Health Projects**

As indicated by Bown (2009), group interest in undertakings distinguishing proof and arranging advances new values, states of mind, learning and aptitudes among group individuals and assembles their ability as specialists of progress. Hence, certifiable interest is a need with a specific end goal to empower every constituent gathering of nearby group required at all phases of venture from configuration to assessment. Government specifically finances formative activities in different groups. For this situation it recognizes the need of the nearby group, starts and executes the program with no monetary, materials or work bolster from the groups. The significant issue with such a venture is, to the point that the general population may not be counseled. They may not take part in arranging, executing, checking and assessing the achievement or disappointment of these undertakings (Hassan & Oyebamiji, 2012).

Awareness is growing and participation by project beneficiaries in design and implementation brings greater ownership of project objectives, accountability and encourages the sustainability of project benefits. Objectives should be set and indicators selected in consultation with stakeholders, so that objectives and targets are jointly owned (Chesos, 2010). Traditionally monitoring and evaluation have been used by donor and government agencies to hold beneficiaries and programme recipients accountable to agreed goals and performance targets.

Stakeholder involvement is regarded not only as a means of holding project beneficiaries and programme recipients accountable, but also as a way for project participants and local citizens themselves to monitor and evaluate the performance of donor and governmental institutions. Chesos (2010) for instance, point out that there needs to be a fundamental realignment of the relationship between donor agencies and beneficiaries. They propose building partnerships between these major stakeholders, which would allow reciprocal evaluations to take place, so those donors themselves are subject to some form of

accountability. In this context, accountability becomes a two-way exchange relationship between those who provide financial resources and those who legitimize the disbursement of those resources. Further, the World Bank (2012) indicated that Monitoring and Evaluation should be participatory so as to empower the less privileged and also to improve on project transparency and accountability. Mulwa (2009) however, argues that there is a failure within the corporate in issuance of relevant reports as the organizations are afraid of being transparent and accountable.

The conceptualization of Stakeholder involvement has evolved over time, moving from its narrow definition as the mobilization of people to contribute free labor and materials, to more extensive interpretations as a process of empowering people and giving them authority to control programs (Muhangi, 2013). World Bank (2013) looks at stakeholder involvement from development perspective as a process through which beneficiaries influence and share control over development initiatives, decisions and resources that affect their lives.

In critiquing the development approach World Bank (2012) identifies capacity building as a major challenge to economic growth. According to AMREF (2010), there is much attention on Monitoring; procurement processes, disbursement of resources and financial use but little attention on capacity development. Karuoro (2010) presumes that good development depends on much more than good financial management. It is therefore apparent that, there is a need to improve the quality of the people too. Brock and Pettit (2012) adds that training is a key participatory approach that knowledge can be transferred from the facilitators to the beneficiaries hence enhancing beneficiaries skills and open more avenues for other strategies.

In South Africa it is a constitutional right for stakeholder involvement in development projects. According to Naidoo (2010), stakeholder involvement in South Africa focuses on empowering the beneficiaries, bringing on board the populars, enhancing transparency and accountability. The author argues that stakeholder involvement is very vital and important in promoting development and democracy.

The M&E system cannot function without skilled people who effectively execute the M&E tasks for which they are responsible. Therefore, understanding the skills needed and the capacity of people involved in the M&E system (undertaking human capacity assessments) and addressing capacity gaps (through structured capacity development programs) is at the heart of the M&E system (Gorgens & Kusek, 2010). The failure to have enough skilled and

knowledgeable M&E officers in organizations has led to poor development of the systems that mainly capture and develop too many indicators, focus on operations rather than the strategy to use to get better outcomes.

On the other hand, Mulwa (2009) points out that illiteracy is a key hindrance to Participatory Monitoring and Evaluation hence calling for capacity building. The aspects of PM&E is said to empower people in such areas hence promoting sharing and learning among stakeholders thus ensuring indigenous knowledge is brought on board (McCarthy, 2014).

Human capacity is a major constraint to monitoring and evaluation in many developing countries in Africa. While monitoring and evaluation units or committees do exist in many national programmes, they are generally dramatically understaffed and their work is often limited to managing sero-surveillance systems (UNAIDS, 2011). Capacity building is vital if monitoring and evaluation systems are to be strengthened. If capacity cannot be maintained within the national programme, networks can be created to access outside skills as necessary. Staffing is a special concern for monitoring and evaluation work because it demands special training and a combination of research and project management skills (Worldbank, 2014). Also, the effectiveness of monitoring and evaluation work often relies on assistance from staff and volunteers who are monitoring and evaluation experts. Thus, capacity building is a critical aspect of implementing good monitoring and evaluation work.

The lack of training and competence leads to inefficiencies which impede adoption of PM&E in management in many community development projects in Kenya. Political interference opens doors to incompetent people who do not understand the parameters used in monitoring and evaluation (GOK, 2009). In as much as M&E has been carried in school, effective adoption of participatory practice has not been realized. This is so because most the key participants who are board of governors (BOG) and parent representative (PTA) are not competent enough to carry out PM&E. In some cases they are unwilling to do this duty because they are not well remunerated (Oyuga, 2011).

#### **2.4 Budgetary allocation and Implementation of Health Projects**

Government agencies are required to utilize cash judiciously for the cause implied and upgrade the living prerequisites of the populaces intended to profit (Abernethy, Bouwens & Loaned, 2014). Regularly, employments of money are occupied to serve diverse courses of the project directors outside the extension and work arrangements of tasks (Anthony and Youthful, 2013). Great budgetary administration rehearses request that key administration

standards and norms, for example, manageability, responsibility and straightforwardness which are fundamental for organized formal procedures are set up. As indicated by Habeeb (2013) budgetary administration is the operation of an inward control framework. Monetary organization of a project must be effectively overseen; it is a fundamental period of the project organization prepare and ought to be looked into by the project director, budgetary group, partners and key project colleagues frequently (Jensen, 2014). By keeping up a nearby eye on the project spending plans, one will be sure that they are kept inside the figure set from the start.

Adequate budgetary allocation ensures effective and quality implementation of projects. It is critical to set aside adequate financial and human resources at the planning stage (Seith & Philippines, 2012). The required financial and human resources for implementation of projects should be considered within the overall costs of delivering the agreed results and not as additional costs. Dedicated staff time for effective implementation of projects, staff should be dedicated for the function. The practices of deployment of personnel for monitoring vary among organizations. Budget limitations are consistently one of the greatest constraints to implementing projects. While projects can often compensate for a lack of technical capacity through training and/or outsourcing, they cannot compensate for the lack of money. Carrying out implementation costs money and, depending on how ambitious project implementers are about their project, it can cost a lot of money.

National implementation of projects systems in resource-limited settings tend to be chronically challenged, with persistently incomplete reporting and inaccurate data posing a major threat to their utility (Kawonga, 2012; IFAD, 2012). Conducting implementation activities requires that an organization invest valuable resources, including money and peoplesø time. At the earliest stage of designing an implementation activity, key stakeholders must make a decision on whether the activity is worth pursuing given the expected use and costs. At least a rough budget for the activity is therefore needed as part of up-front planning. This may be done initially as part of an overall implementation plan and again as a first draft of ToR is developed (Estrella, 2010). The project budget should provide a clear and adequate provision for implementation of projects activities. A key function of planning for project is to estimate the costs, staff, and other resources that are needed for project work. It is important for project specialists to weigh in on project budget needs at the project design stage so that funds are allocated specifically and are available to implement key project tasks.

Financial resources for implementation of projects should be estimated realistically at the time of planning for implementation of projects (UNDP, Handbook on planning, monitoring and evaluating for development results., 2009). The availability of finances will determine what can be achieved as far as implementation, strengthening and sustainability of implementation of projects system is concerned (UNAIDS, 2009a). Quite often money to undertake project is not factored in implementation of many projects. One in four countries with a national project plan has not calculated the budgetary requirements (Report on the Global AIDS Epidemic, 2009). Project activities tend to be pushed to the periphery in the allocation of funds for project activities. In more than half of counties 54%, project activities are exclusively financed through external sources (Report on the Global AIDS Epidemic, 2009).

Financial resources for implementation of projects should be estimated realistically at the time of planning for implementation of projects (Perrin, 2012). While it is critical to plan for implementation of projects together, resources for each function should be separate. Sourcing and securing financial resources for implementation of projects of outcomes or programs can pose additional challenges, as there is not one project where these costs can be directly charged. The most commonly observed financing mechanism is to draw resources together from relevant projects. Some additional possibilities include: Creating a separate implementation of projects fund, facility or project associated with an outcome or a programme to which all the constituent projects would contribute through transfer of some project funds. This facility could be located in the same entity that manages the outcome or programme. Mobilize funds from partners directly for an outcome or program implementation of projects facility (Estrella, 2010).

In addition, it is important to allocate required funds annually for each outcome on the basis of planned costs of implementation of projects from overall programme budget to the facility or fund (Nisar, 2013). It is important that partners consider the resources needed for implementation of projects and agree on a practical arrangement to finance the associated activities. Such arrangements should be documented at the beginning of the programme to enable partners to transfer necessary funds in accordance with their procedures, which could take considerable time and effort Human resources are critical for effective implementation of projects, even after securing adequate financial resources. For high-quality implementation of projects, there should be an excellent learning tool as well as a means to improve programme.

The failure to consider Implementation of projects in the design stage and poor pay to evaluators is seen as a key challenge in setting up and running a project system (World Bank, 2009). According to Omiti, Mude, and John (2012), many organizations fail to decentralize and allocate resources as they consider Implementation of projects as just has an activity. In essence, Monitoring has assumed a major biasness compared to Evaluation that receive little or no attention if any. According to Rubin and Rubin (2009), organizations sight lack of funds to conduct Implementation of projects or even document aspects of project in their projects. Brock and Pettit (2012) argue that Participatory Implementation of projects is an expensive venture that requires a lot of resources but is a sure way of ensuring people are brought on board for sustainable development.

Financial availability is the stronghold of implementing a strong and effective implementation of projects (Global fund, 2013). IFAD (2012), in its report noted that most developing countries are being faced with the challenge of implementing a sound implementation of projects due to lack of control on their funding. Therefore, the donors need to put more emphasises on the establishment of sound implementation of projects systems through factoring this in the funding (World Bank, 2012). This is the only way to ensure that most of these projects realise their goals and leave a sustainable impact on the society. Similarly, in Kenya, project is not comprehensively done due to various factors among them allocation of insufficient funds for this process. There are doubts on quality management capabilities, training levels and effectiveness of the boards of governors in implementation of projects (GOK, 2013). Kaarin and Njuki (2013) indicate that resource availability is a basic element of participatory implementation of projects and increases the likelihood that running project activities and resource allocation could continue until the project ends and reach chance to grab advantages.

Conducting project activities requires that an organization invest valuable resources, including money and peoplesøtime. At the earliest stage of designing a project activity, key stakeholders must make a decision on whether the activity is worth pursuing given the expected use and costs. At least a rough budget for the activity is therefore needed as part of up-front planning. This may be done initially as part of an overall project plan and again as a first draft of ToR is developed (Estrella, 2010). The project budget should provide a clear and adequate provision for implementation of projects activities. A key function of planning for project is to estimate the costs, staff, and other resources that are needed for project work. It is important for project specialists to weigh in on project budget needs at the project design

stage so that funds are allocated specifically to project and are available to implement key project tasks.

## **2.5 Project Management and Implementation of Health Projects**

Project management is purposed to provide intensified, sustained and integrated management of complicated ventures. Project management involves focusing a substantial portion of the total organizational resources on specific objectives, highly interdependent specialized activities and relatively severe constraints with respect to cost, time, and performance of end product (Gardiner, 2009). The project management as earlier noted is the discipline of planning, organizing, motivating, and controlling resources to achieve specific goals (Nokes, 2012). The project management is the backbone of the project, through their actions and moves they determine the direction of the project. They have the right and responsibility to know what is happening in the program or project, which aspects need corrective action, what the results are expected, and which lessons can be learned and shared with one another, but they should not simply be recipients of monitoring and evaluation reports (Langi, 2009). One effective way for management to contribute to the achievement of program or project's objectives is to be directly involved in the monitoring and evaluation process - in the formulation of critical questions and in the collection and analysis of data. This enables them to participate directly in the assessment of the relevance, performance, and success of the program or project and in recommending how to improve the quality of current and future interventions

Project management is the team in charge of the project and it includes: project manager, project staff, PM&E staff and implementing partners (CARE, 2012). To ensure the success of the PM&E system, the management needs to support it (World Bank, 2011). The project management is responsible for making decisions and strategic planning of the project. It also manages the PM&E system by tracking indicators, producing quarterly project reports and annual strategic reports (IFRC, 2011). The project manager ensures that the project staffs carry out their jobs effectively (Guijt, 2009). The project staff does the implementation role where they collect monitoring data and present it in weekly and quarterly reports (IFRC, 2011).

According to Heagney (2012), the project management approach had been proved to considerably improve the chances of success of health projects. The project management approach involves relying more on resources management, processes and infrastructure,

coping with greater internal as well as external competition, delivering the outcomes in a proficient way as expected and improving effectiveness and efficiency. According to the Chaos Manifesto (2013), the CHAOS report of 2012 results indicated a rise in software project success rate, with 39 percent of all projects being successful (delivered on budget, on time and with the required features and functions); 43 percent were challenged (over budget, late and/or with less than required features and functions); and 18 percent failed (either cancelled before completion or delivered but never used). One of the reason that was credited to having led to the improvement in the success rate was applying project management skills in implementation of software projects (Standish Group International, 2013).

The realization of the importance of project management has led to major decisions being made by health projects owners. Effective October 1, 2005, the USA Department of State Foreign Affairs established an health Project Manager Program, which highlights the qualifications and continuing education prerequisite for project managers who are responsible for managing both prime and minor health projects. This program ensures continuing progress of project manager expertise with a qualifications baseline, this is followed by progressive education requirements and professional development, additionally Project managers are required to meet the requirements stipulated in the Project Management Program (U.S. Department of State Foreign Affairs, 2011).

A number of public and private companies worldwide have identified specific project management methodologies to be used in implementation of projects in their companies. Some of the methodologies being widely used include; agile software development, lean software development, scrum software development, extreme Programming (XP) software development methodology and Kanban which is a lean approach to agile software development (Kniberg, 2011).

Nwakanma (2013) recommends that experts in Information and Communication Technology (ICT) sector should adopt project management methodologies and technology skills. A project team is usually a function of an aggressive team or a task force consisting of members drawn from various functional specialist departments of the client led by a mature multidisciplinary generalist (Joy, 2014). The success of a building construction project is largely dependent on how the project team has been constructed, its organizational structure' expertise and commitment to the project success. is recommended that a successful building construction project team should consist of a project manager who is tasked with the responsibility of planning and scheduling project tasks and the day-to-day management of



project execution. Besides a project manager, the project team should include a qualified architect, structural engineer, and a services engineer and last but not least a fluid surveyor. Many of the building construction projects that have collapsed are because the clients more often than not have ignored the surveyor (Okumu 2011).

Käyhkö (2011) outlines a number of approaches that can be used in evaluating Project management in county government: First, Project management is approached as a strategic issue with the help of three subordinate questions; by exploring the various aspects of public management and the results definition, by scrutinizing Project management as a question of legitimacy and ethics, and by raising issues which concern the citizen. Käyhkö (2011) further argues that ensuring Project management can be useful in setting high level strategic objectives. Käyhkö puts more emphasis on the need for transformation from a pragmatic tone to the actual quality-oriented performance and ethical thinking. Therefore, critical Project management comprises of: A relationship where at least two parties are involved and that there is an exchange where by on one side there is a transfer of authority and/or resource, while in return there is some form of account or answerability and on the other side there is control based on this account or answerability.

## **2.6 Project Monitoring and Implementation of Health Projects**

Monitoring can be characterized as the continuous way by method for which partners get ordinary input on the advance being made toward accomplishing their objectives and goals while assessment is a thorough and autonomous assessment of either completed or progressing exercises to choose the degree to which they are accomplishing referred to destinations and adding to basic leadership (UNDP, 2009). Monitoring and evaluation is carried out for several reasons particularly to establish what works and what does not; to make informed decisions involving programme operations and provide service delivery based on objective data; to make certain efficient and environment friendly use of resources; to assess extent the programme is having its preferred impact; to create transparency and foster public trust and create institutional memory.

According to UNDP (2009), monitoring places focus on the implementation process and probes the key question on how well is the program being implemented while evaluation analyses the implementation process. Evaluation seeks to determine how well program activities have met objectives, examines extent to which outcomes can be attributed to project objectives and describes quality and effectiveness of program by documenting impact on

participants and community. Monitoring generates periodic reports throughout the program cycle, focuses on project outputs for monitoring progress and making appropriate corrections, highlights areas for improvement for staff and tracks financial costs against budget.

According to Kamunga (2010), State Corporations (SCs) have not been able to achieve their targets due to mismanagement, bureaucracy, wastage, pilferage, incompetence and irresponsibility by way of administrators and employees. Despite the government intervening to save the SCs by re-examining their objectives and targets, coaching employees, increasing their revenue and benefits, the state corporation's companies still did not improve on their overall performance. Wholey, Hatry and Newcomer (2010) states that assessment is utilized as a part of government to project straightforwardness, bolster responsibility, and enhance execution, though general execution organization structures build up result arranged objectives and general execution targets, screen advance, fortify execution upgrades, and convey results to higher strategy levels and people in general.

Powerful checking permits one to assemble data through information gathering with the goal that one can gauge and alter advance toward the project objectives. It licenses one to record project advance and acclamations to colleagues, partners, directors and customers and offers avocation for rolling out any essential improvements to the arrangement. As per (Lewis, 2012), Monitoring and Evaluation of a project involve the precise social meeting and investigation of measurements on project and their exercises. It distinguishes advance and also troubles that effect on usage and evaluate the accomplishment of the individual program's or project's targets.

M&E additionally evaluates an establishment's general execution towards the accomplishment of the objectives and destinations. Hence M&E aptitudes ought to be viewed as a vital component of administration that tracks execution calendars and exercises towards the satisfaction of the institutional targets and mandates. In case of funded work, it will be essential to distinguish between monitoring and evaluation that are internal to the agency of the project, and that which relates to the expectations or agreements with the funders or sponsors. An evaluation may also have more than one purpose, however it is essential for stakeholders to agree on the precedence purposes. Identifying stakeholders, and making sure that they agree about the major purpose of an evaluation, is integral in order to figure out on the approach and methods to be used in carrying it out. Frances (2013) argues that a funder has a function in an evaluation and this case the authorities has a role to play in the evaluation of initiatives funded by the government such as the Kazi Kwa Vijana initiative. Monitoring

and evaluation is conducted in order to generate specific details about the task implementation process and additionally to enhance the results in terms of why activities failed or succeeded (Mishra et al, 2012).

A monitoring and evaluation system is a component designed to screen, track and make a comparison of the project outcomes against the stated or planned targets (Cummings & Worley, 2011). It is a comprehensive undertaking that offers guidance in the screening and tracking of an ongoing project, recording data and systematically evaluating the data for comparison purposes in line with the project's set goals and objectives (Kerzner, 2013). M&E system is an integral system of reflection and communication supporting project implementation that should be planned for and managed throughout a project's life. Monitoring and evaluation budget can be obviously delineated within the overall project costing to give the monitoring and evaluation function the due recognition it plays in project running (Mackay, 2012). Efficiency of project planning improves overall Monitoring and evaluation of project, management and implementation and therefore various projects are started with the sole goal of changing positively the socio-political and economic status of the residents of a given region. The project information must be obtained in an orderly and sequential manner as the project is on-going (Mulwa & Nguluu, 2013).

Worldwide there has been a demand in the uptake of Monitoring and Evaluation as the need to improve inclusivity of beneficiaries in projects is being emphasized by donors. According to Mulwa (2009), the use of conventional Monitoring and Evaluation has been on the rise though there is a need to shift from the conventional Monitoring and Evaluation method to participatory Monitoring and Evaluation method which improves inclusivity. World Bank (2011) asserts that PM&E creates a good environment for interaction between stakeholders and bring on board resources available, use and monitor and evaluate impact brought by the resources. In this case, all stakeholders are able to improve on mitigation factors by engaging in development matters with the government, participatory resource audit, identification of gaps and suggesting the way forward.

According to Chikati (2010), participatory monitoring encourages continuous monitoring of projects by the community members with an aim of collecting, analyzing and communicating information in-order to put measures on where things are not working as per the plan. Participatory Monitoring and Evaluation is aimed at drawing lessons that can be used in future projects. Participatory monitoring and evaluation (PM&E) is a process of self-assessment, knowledge generation, and collective action in which stakeholders in a program

or intervention collaboratively define the evaluation issues, collect and analyze data, and take action as a result of what they learn through this process (Rossman, 2012).

A participatory approach is empowering because it claims the right for local people to control and own the process of making evaluation decisions and implementing them. Participating in an evaluation from start to finish can give stakeholders a sense of ownership over the results; provide timely, reliable, and valid information for management decision-making, increase cost-effectiveness of M&E information. The purpose of evaluation is to help the stakeholders of a project to better understand whether their hard work is having the impact they desire. In addition, evaluation aims to analyze the past to understand the future of the project (Gaventa & Blauert, 2012). Participatory Monitoring and Evaluation (PME) offers development organizations a host of opportunities for improving the performance of the projects undertaken by both the Government and private businesses.

## **2.7 Theoretical Orientation**

This section discusses the theoretical foundation on which the study is anchored. The study will be grounded on the empowerment theory which is supported by the public participation theory.

### **2.7.1 Empowerment Theory**

PM&E processes are usually implemented in communities with the objective of empowering citizens (Bailey, 2009). The origin of empowerment as a form of theory is traced back to the Brazilian humanitarian and educator, Paulo Freire (Hur, 2012). Paulo Freire's, *The pedagogy of the oppressed* (1970) provided the conceptual base for the debates on empowerment. However, according to Bailey (2009), Ernst Friedrich Schumacher's '*Small is Beautiful*' (1973), which came into circulation at a similar time with Freire's piece, is also known to have influenced the debate on empowerment. Empowerment theory postulates that participation in decision-making may enhance individual's sense of empowerment and that empowered individuals are likely to be active in community organisations and community activities.

Empowerment as a construct is multifaceted. Theories of empowerment touch on different dimensions of life. Hur (2012) argues that empowerment theories are not only concerned with the process of empowerment, but also with results that can produce greater access to resources and power for the disadvantaged. An empowering intervention is that which builds capacity of individuals to positively influence their wellbeing outcomes. Just like social

capital, empowerment is operative at various levels: personal or individual, interpersonal, organizational, community, and collective (Hur, 2012). Zimmerman et al. (2009) observes that the focus of both empowerment theory and practice is to understand and strengthen processes and context where individuals gain mastery and control over decisions that affect their lives. Thus, interventions that provide genuine opportunities for individuals to participate may help them develop a sense of psychological empowerment (Zimmerman, 2009; Zimmerman et al., 2009). Therefore, an empowering development process might begin with an environmental assessment of the opportunities to participate and develop strategies to include participants in the design, implementation, monitoring and evaluation of interventions.

Empowerment, however, is not a panacea for all individual and social illness. It has been criticized as overly individualistic and conflict-oriented, resulting in an emphasis on mastery and control rather than cooperation and community (Hur, 2012). According to Hur (2012), although the practice of empowerment is effective for the removal of powerlessness, certain factors still exist that may inhibit the manifestation of empowerment. He cites organizational aspects, such as an impersonal bureaucratic climate, supervisory styles described as authoritarianism and negativism as well as arbitrary reward systems as hindrances to empowerment. The other argument against the empowerment theory is the 'loose' manner in which empowerment as a concept is framed.

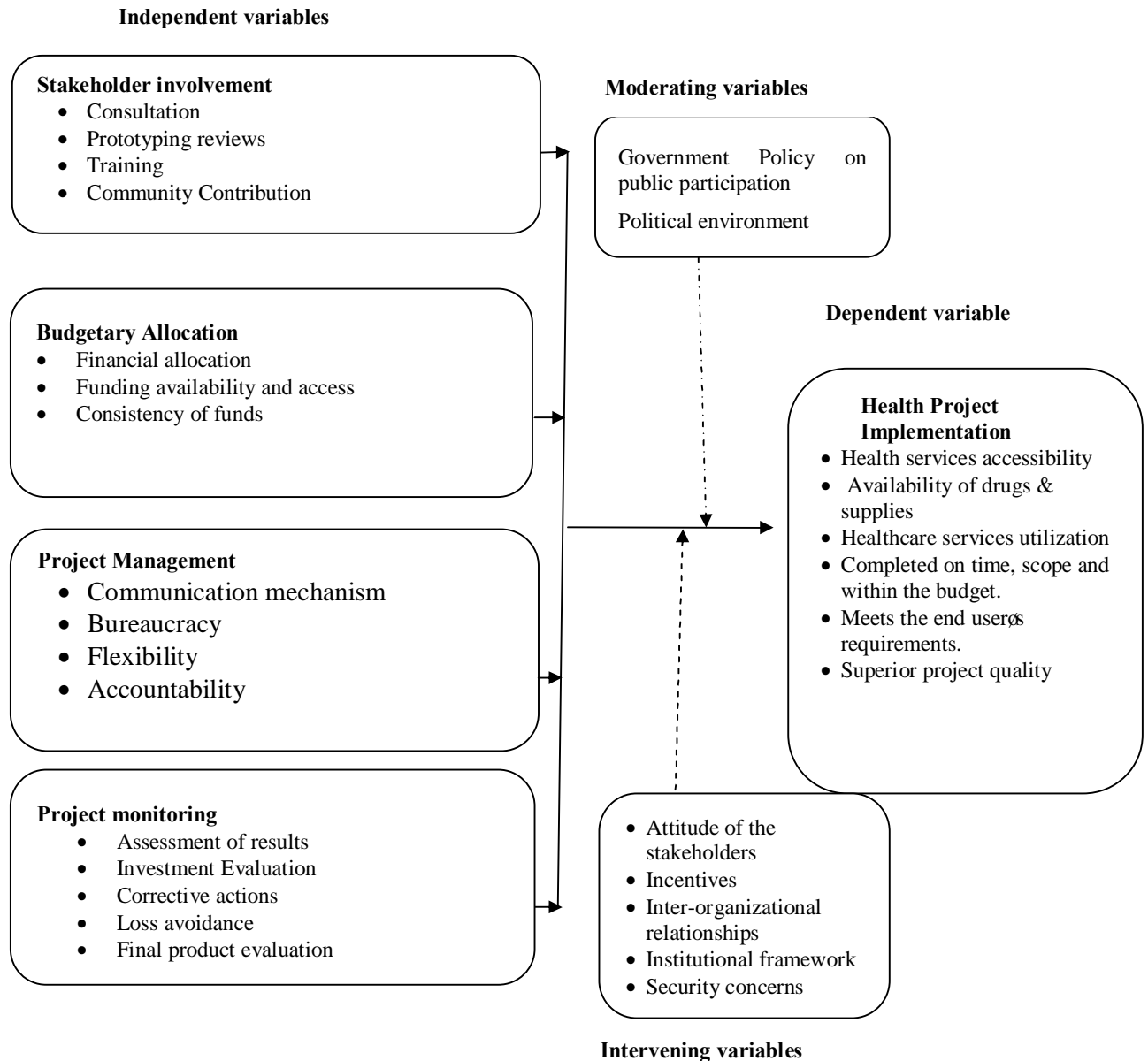
### **2.7.2 Public Participation Theory**

It is until recently that, scholars and many researchers have concurred that project success concerns not only cost, time and quality, but also the satisfaction and effective management of all the stakeholders involved (Bourne & Walker, 2011). They further define stakeholders as those individuals or group of individuals who have a claim or interest in a project and its activities. The theory underscores the fact that the creation and the ongoing operations of each project/programme are as a result of several actors' activities, who are the stakeholders. The central idea therefore is that a programme/project's success is dependent on how well the organization manages the relationships with key groups such as customers, employees, suppliers, communities, financiers, and others that can affect the realization of the project objectives. The social responsibility of the government owned Special Purpose Vehicle (SPV) therefore significantly increases, and external relationships become crucial for the success of the project. In any government projects, stakeholder management is a decisive

factor as well for a project's success or failure and therefore identification of stakeholders and their involvement should be part of the project's planning process (Bourne & Walker, 2011). Most projects/programme consist of individuals and groups with different interests and motivational incentives, hence this makes most of government projects/programmes complex in particular because of the need to incorporate perspectives of a large number of parties involved (Yescombe, 2013).

## **2.8 Conceptual Framework**

The conceptual framework of the study shows the relationship between independent variables are; stakeholder involvement, budgetary allocation, project management and project monitoring while dependent variable is health project implementation. Furthermore, it also shows other factors, moderating and intervening variables that can play in and affect both independent and dependent variables in this study as shown in the Figure 1.



**Figure 1: Conceptual Framework**

### 2.9 Summary and Research Gaps

This study is grounded on the public participation theory, which has over the years gained prominence in response to demands for greater individual and community control over the activities of governments towards its citizens. Poorly functioning public-sector institutions and weak governance are major constraints to growth and equitable development in many developing countries. Ensuring Project management can be useful in setting high level

strategic objectives. Objectives should be set and indicators selected in consultation with stakeholders, so that objectives and targets are jointly owned.

Project management, with proper training and experience is vital for the production of the results. There is need to have an effective human resource capacity in terms of quantity and quality, hence human resource management is required in order to maintain and retain a stable staff. In addition, adequate resources ensure effective and quality monitoring and evaluation. It is critical to set aside adequate financial and human resources at the planning stage. The required financial and human resources for monitoring and evaluation should be considered within the overall costs of delivering the agreed results and not as additional costs. Dedicated staff time for effective monitoring and evaluation, staff should be dedicated for the function. The practices of deployment of personnel for monitoring vary among organizations. Further, ensuring Project management can be useful in setting high level strategic objectives.

Most of the reviewed studies in this chapter have been conducted in developed countries whose approach to project implementation could be different from that of Kenya. Awino et al (2011) conducted a study on effects of planned change projects of selected firms in the Kenyan insurance industry. Kipyego (2011) did a study on effectiveness of PM&E on Kazi kwa Vijana projects in Kakamega Central District and found that there is political interference on the effectiveness of monitoring which leads to underperforming of Kazi kwa Vijana projects in the period of study, Ondieki and Matonda (2013) observed that there had been failure to engage local communities to air their views, needs, challenges and priorities as well as lacking capacity to plan, implement, monitor and evaluate projects in a participatory manner. Further, the studies have been conducted on other types of projects other than the community based development projects. Again, most of the studies have focused on generally the factors influencing the implementation of the health projects focusing on both the internal and external factors. This study therefore sought to fill all these literature gaps by exploring the factors influencing implementation of health projects in Garbatula Sub-County, Isiolo County.



## CHAPTER THREE

### RESEARCH METHODOLOGY

#### 3.1 Introduction

This chapter presents key methodological issues that were followed to conduct this research study and provides a general framework for this research. The chapter presents details of the research design, target population, sampling procedures, methods of data collection, validity and reliability of instruments, data collection process, methods of data analysis and ethical considerations while conducting the study.

#### 3.2 Research Design

The study adopted a descriptive research design. A descriptive design is concerned with determining the frequency with which something occurs or the relationship between variables (Bryman & Bell, 2011). Descriptive research design was chosen because it enabled the researcher to generalize the findings to a larger population. This type of research design presents facts concerning the nature and status of a situation, as it exists at the time of the study (Creswell, 2014). It also brings out relationships and practices that exists, beliefs and processes that are ongoing, effects that are being felt or trends that are developing. Thus, this approach was suitable for this study, since the study intended to collect comprehensive information through descriptions which was helpful for identifying variables. Bryman and Bell (2011) assert that a descriptive design seeks to get information that describes existing phenomena by asking questions relating to individual perceptions and attitudes.

#### 3.3 Target population

According to Sekaran and Bougie (2010), a population is the total collection of elements about which we wish to make inferences. The target population for this study composed of the 268 stakeholders in Galbatula Sub-County, Isiolo County as shown in Table 3.1.

**Table 3. 1: Target Population**

Category	Population	Percentage
County representatives	24	9
Community Health Worker	64	24
Project Management team	113	42
Chiefs, assistants & village elders	67	25
<b>Total</b>	<b>268</b>	<b>100</b>

### 3.4 Sample size and Sampling Procedures

Sampling is a deliberate choice of a number of people who are to provide the data from which a study drew conclusions about some larger group whom these people represent. The section focused on the sampling size and sampling procedures.

#### 3.4.1 Sampling Size

The sample size is a subset of the population that is taken to be representatives of the entire population (Kumar, 2011). A sample population of 158 was arrived at by calculating the target population of 268 with a 95% confidence level and an error of 0.05 using the below formula taken from Kothari (2004).

$$n = \frac{z^2 \cdot N \cdot \partial_p^2}{(N - 1)e^2 + z^2 \partial_p^2}$$

Where;  $n$  = Size of the sample,

$N$  = Size of the population and given as 268,

$e$  = Acceptable error and given as 0.05,

$\partial_p$  = The standard deviation of the population and given as 0.5 where not known,

$Z$  = Standard variate at a confidence level given as 1.96 at 95% confidence level.

The sample size fits within the minimum of 30 proposed by Saunders, Lewis and Thornhill (2012).

**Table 3. 2: Sampling Frame**

Category	Population	Ratio	Percentage
County representatives	24	0.59	14
Community Health Worker	64	0.59	38
Project Management team	113	0.59	67
Chiefs, assistants & village elders	67	0.59	40
<b>Total</b>	<b>268</b>		<b>158</b>

#### 3.4.2 Sampling Procedures

The study selected the respondents using stratified proportionate random sampling technique. Stratified random sampling is unbiased sampling method of grouping heterogeneous population into homogenous subsets then making a selection within the individual subset to ensure representativeness. The goal of stratified random sampling is to achieve the desired

representation from various sub-groups in the population. In stratified random sampling subjects are selected in such a way that the existing sub-groups in the population are more or less represented in the sample (Kothari, 2004). The study used simple random sampling to pick the respondents in each stratum.

### **3.5 Research Instruments**

Primary data was obtained using self-administered questionnaires. The questionnaire was made up of both open ended and closed ended questions. The open-ended questions were used so as to encourage the respondent to give an in-depth and felt response without feeling held back in illuminating of any information and the closed ended questions allow respondent to respond from limited options that had been stated. According to Saunders (2011), the open ended or unstructured questions allow profound response from the respondents while the closed or structured questions are generally easier to evaluate. The questionnaires were used in an effort to conserve time and money as well as to facilitate an easier analysis as they are in immediate usable form.

### **3.6 Pilot Testing**

Pilot testing refers to putting of the research questions into test to a different study population but with similar characteristics as the study population to be studied (Kumar, 2011). Pilot testing of the research instruments were conducted using staff working in health projects in Isiolo County. 16 questionnaires were administered to the pilot survey respondents who were chosen at random. After one day the same participants were requested to respond to the same questionnaires but without prior notification in order to ascertain any variation in responses of the first and the second test. This is very important in the research process because it assists in identification and correction of vague questions and unclear instructions. It is also a great opportunity to capture the important comments and suggestions from the participants. This helped to improve on the efficiency of the instrument. This process was repeated until the researcher is satisfied that the instrument does not have variations or vagueness.

### **3.7 Validity of Research Instruments**

According to Golafshani (2012), validity is the accuracy and meaningfulness of inferences, based on the research results. One of the main reasons for conducting the pilot study was to ascertain the validity of the questionnaire. The study used content validity which draws an inference from test scores to a large domain of items similar to those on the test. Content validity is concerned with sample-population representativeness. Gillham (2011) stated that

the knowledge and skills covered by the test items should be representative to the larger domain of knowledge and skills. Expert opinion was requested to comment on the representativeness and suitability of questions and give suggestions of corrections to be made to the structure of the research tools. This helped to improve the content validity of the data that was collected. Content validity was obtained by asking for the opinion of the supervisor, lecturers and other professionals on whether the questionnaire was adequate.

### **3.8 Reliability of Research Instruments**

Instrument reliability on the other hand is the extent to which a research instrument produces similar results on different occasions under similar conditions. It's the degree of consistency with which it measures whatever it is meant to measure (Bell, 2010). Reliability is concerned with the question of whether the results of a study are repeatable. The questionnaire was administered to a pilot group of 16 randomly selected respondents from the target population and their responses used to check the reliability of the tool. This comprised of 10% of the sample size. A construct composite reliability co-efficient (Cronbach alpha) of 0.7 or above, for all the constructs, is considered to be adequate for this study (Rousson, Gasser & Seifer, 2012). Reliability of the data collection instrument was done using the split half method (Gay, 2012) then be calculated using Spearman Brown correlation formulae to get the whole test reliability. If the sum scale is perfectly reliable, we expected that the two halves are perfectly correlated (i.e.,  $r = 1.0$ )

Where:

$r_2$  = corrected reliability

$r_1$  = uncorrected reliability

$n$  = number of parts (e.g. for halves  $n=2$ )

### **3.9 Data Collection Procedures**

The researcher obtained an introduction letter from the university which was presented to each stakeholder so as to be allowed to collect the necessary data from the respondents. Primary data was gathered directly from respondents and for this study; the researcher used a questionnaire. The researcher administered the questionnaire personally to the respondents. The advantage of researcher administering questionnaires is that the questions can be clarified to the respondents during data collection. This ensured that the respondents understand the questions, thereby enabling the researcher obtain the right kind of information required to meet the study objectives. The drop and pick method was preferred for questionnaire administration so as to give respondents enough time to give well thought out

responses. The researcher booked appointment with respondent organizations at least two days before visiting to administer questionnaires. The researcher personally administered the research instruments to the respondents. This enables the researcher to establish rapport, explain the purpose of the study and the meaning of items that may not be clear as observed by Best and Khan (2013).

### 3.10 Data Analysis Techniques

Data was analyzed using Statistical Package for Social Sciences (SPSS Version 21.0). All the questionnaires received were referenced and items in the questionnaire was coded to facilitate data entry. After data cleaning which entails checking for errors in entry, descriptive statistics such as frequencies, percentages, mean score and standard deviation was estimated for all the quantitative variables and information presented in form of tables. The qualitative data from the open-ended questions was analyzed using conceptual content analysis and presented in prose

Inferential data analysis was done using multiple regression analysis. Multiple regression analysis was used to establish the relations between the independent and dependent variables. Multiple regression was used because it is the procedure that uses two or more independent variables to predict a dependent variable. Since there are four independent variables in this study the multiple regression model generally assumed the following equation;

$$Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_4 X_4 + \epsilon$$

Where:-

Y= Health Project Implementation

$\beta_0$ =constant

$\beta_1, \beta_2, \beta_3$  and  $\beta_4$ = regression coefficients

$X_1$ = Stakeholder involvement

$X_2$ = Budgetary Allocation

$X_3$ = Project Management

$X_4$ = Project monitoring

$\epsilon$ =Error Term

In testing the significance of the model, the coefficient of determination ( $R^2$ ) was used to measure the extent to which the variation in health project implementation is explained by the variations of the institutional factors. F-statistic was also computed at 95% confidence level

to test whether there is any significant relationship between health project implementation and the factors influencing it. The finding was presented in charts and tables.

### **3.11 Ethical Considerations**

The researcher observed the following standards of behaviour in relation to the rights of those who become subject of the study or are affected by it: First, in dealing with the participants, they were informed of the objective of the study and the confidentiality of obtained information, through a letter to enable them give informed consent. Once consent is granted, the participants maintained their right, which entails but is not limited to withdraw or decline to take part in some aspect of the research including rights not to answer any question or set of questions and/or not to provide any data requested; and possibly to withdraw data they have provided. Caution was observed to ensure that no participant is coerced into taking part in the study and, the researcher seeks to use minimum time and resources in acquiring the information required. Secondly, the study adopted quantitative research methods for reliability, objectivity and independence of the researcher. While conducting the study, the researcher ensured that research ethics are observed. Participation in the study was voluntary. Privacy and confidentiality was also observed. The objectives of the study were explained to the respondents with an assurance that the data provided was used for academic purpose only.

### **3.12 Operationalization of Variables**

The operationalization of variables is shown in Table 3.3.

**Table 3. 3: Operationalization of variables**

<b>Objectives</b>	<b>Type of Variable</b>	<b>Indicator</b>	<b>Measuring of Indicators</b>	<b>Scale</b>	<b>Tools of analysis</b>	<b>Type of analysis</b>
To examine how stakeholder involvement influence implementation of health projects in Garbatula Sub-County, Isiolo County.	Independent	Stakeholder involvement	<ul style="list-style-type: none"> <li>• Consultation</li> <li>• Prototyping reviews</li> <li>• Training</li> <li>• Community Contribution</li> </ul>	Interval Ordinal Ordinal Ordinal	Percentages Mean score	Descriptive statistics Regression analysis
To determine how budgetary allocation influence implementation of health projects in Garbatula Sub-County, Isiolo County.	Independent	Budgetary Allocation	<ul style="list-style-type: none"> <li>• Financial allocation</li> <li>• Funding availability and access</li> <li>• Consistency of funds</li> </ul>	Interval Ordinal Ordinal Ordinal	Percentages Mean score	Descriptive statistics Regression analysis
To assess how project management influence implementation of health projects in Garbatula Sub-County, Isiolo County.	Independent	Project Management	<ul style="list-style-type: none"> <li>• Communication mechanism</li> <li>• Bureaucracy</li> <li>• Flexibility</li> <li>• Accountability</li> </ul>	Ordinal Ratio Interval	Percentages Mean score	Descriptive statistics Regression analysis
To find out how project monitoring influence implementation of health projects in Garbatula Sub-County, Isiolo County.	Independent	Project monitoring	<ul style="list-style-type: none"> <li>• Assessment of results</li> <li>• Investment Evaluation</li> <li>• Corrective actions</li> <li>• Loss avoidance</li> <li>• Final product evaluation</li> </ul>	Ordinal Ordinal Ordinal Ordinal	Percentages Mean score	Descriptive statistics Regression analysis
Health project implementation	Dependent	Health Project Implementation	<ul style="list-style-type: none"> <li>• Health services accessibility</li> <li>• Availability of drugs &amp; supplies</li> <li>• Healthcare services utilization</li> <li>• Completed on time, scope</li> </ul>	Interval Ordinal Ordinal Interval Interval	Mean score	Descriptive statistics Regression analysis

			and within the budget. <ul style="list-style-type: none"><li>• Meets the end users requirements.</li><li>• Sustainable project benefits</li><li>• Superior project quality</li></ul>	Interval		
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**CHAPTER FOUR**  
**DATA ANALYSIS, PRESENTATION AND INTERPRETATION**

**4.1 Introduction**

This chapter begins by considering the return rate of questionnaires administered by the researcher as well as the response of respondents who were subjected to interview using a written schedule. The background information of the respondents is also discussed in detail. Data that was collected was analyzed, presented and interpreted as guided by the research questions.

**4.2 Response Rate**

The researcher targeted 158 respondents to respond to questionnaires. However, data was collected from 137 respondents giving a response rate of 86.71%. According Jankowicz (2010), a response rate of 50 percent or more is acceptable for analyses.

**Table 4. 1: Response Rate**

<b>Response</b>	<b>Frequency</b>	<b>Percentage</b>
Response	137	86.71
No response	21	13.29
<b>Total</b>	<b>158</b>	<b>100.0</b>

**4.3 Reliability Analysis**

In this study, construct reliability was determined using Spearman Brown coefficients that test internal consistency of items on a scale and were thus considered reliable if the as the results showed that the Spearman Brown coefficient associated with the variables of the study were above 0.70 threshold as recommended by Bell (2010) where it is asserted that Spearman Brown's should be in excess of 0.70 for the measurement intervals. The results of the reliability analysis are presented in the table 4.2.

**Table 4. 2: Reliability of Measurement Scales**

	<b>Spearman Brown</b>	<b>Decision</b>
Stakeholder involvement	.818	Reliable
Budgetary Allocation	.772	Reliable
Project Management	.802	Reliable
Project monitoring	.862	Reliable

From the table it was found that project monitoring (spearman brown coefficient =.862) was the most reliable followed by stakeholder involvement (spearman brown coefficient = .818)

then project management (spearman brown coefficient =.802) while the budgetary allocation (spearman brown coefficient =0.772) was the least.

#### 4.4 Background Information

In this study, the researcher collected data from different groups of respondents based on their gender, how long they have been working in health projects in Garbatula Sub-County, Isiolo County, their highest level of education and their age bracket.

##### 4.4.1 Gender of the Respondent

The researcher collected data based on the respondents' gender by asking them to indicate their age. This data was then summarized and presented in Table 4.3.

**Table 4. 3: Gender of the Respondent**

	Frequency	Percent
Male	73	53.3
Female	64	46.7
<b>Total</b>	<b>137</b>	<b>100</b>

According to the results in table 4.3, most of the respondents were male as shown by 53.3% while the rest were female as illustrated by 46.7 %. This infers the study was not biased based on the gender since the researcher collected reliable information irrespective of the gender of the respondents.

##### 4.4.2 Respondents Period Worked in Health Projects

The researcher further explored how long the respondents have been working in health projects in Garbatula Sub-County, Isiolo County. The results are in Table 4.4.

**Table 4. 4: Respondents Period Worked in Health Projects**

	Frequency	Percent
Less than 3 years	36	26.3
3 to 9 years	34	24.8
9 to 12 years	50	36.5
Above 12 years	17	12.4
<b>Total</b>	<b>137</b>	<b>100</b>

Majority of the respondents indicated that they had have been working in health projects in Garbatula Sub-County, Isiolo County for a period of 9 to12 years as shown by 36.5%. The remainder indicated they had have been working in health projects in Galbatula Sub-County, Isiolo County for a period of less than 3 years as shown by 26.3%, 3 to 9 years as shown by 24.8% and above 12 years as illustrated by 12.4%. This shows that most of the respondents

had worked in health projects in Garbatula Sub-County for long enough to be able to understand the subject under study and give reliable to the researcher.

#### 4.4.3 Respondents Highest Level of Education

The researcher enquired on the respondents' highest level of education by asking them to respond to questions based on their highest level of education. Table 4.5 is a summary of their replies.

**Table 4. 5: Respondents Highest Level of Education**

	Frequency	Percent
Certificate	25	18.2
Diploma	29	21.2
Degree	52	38
Masters	18	13.1
PhD	13	9.5
<b>Total</b>	<b>137</b>	<b>100</b>

On the respondents' highest level of education, majority of the respondents indicated to have a degree as illustrated by 38%. Other respondents indicated to have a diploma as shown by 21.2%, certificate as shown by 18.2%, masters as illustrated by 13.1% while those who had PhD were 9.5%. This shows that all the respondents who participated on the study were learnt enough to understand and give reliable information on the subject under study.

#### 4.4.4 Respondents Age Bracket

The respondents age bracket was also explored in this study where the respondents indicated to which age bracket do they belong. Table 4.6 shows the replies.

**Table 4. 6: Respondents Age Bracket**

	Frequency	Percent
20-30 years	30	21.9
31-40 years	24	17.5
41-50 years	70	51.1
51-60 years	13	9.5
<b>Total</b>	<b>137</b>	<b>100</b>

On the age of the respondents, the study found that the majority of the respondents were between 41-50 years as shown by 51.1%, 21.9% were aged between 20-30 years, 17.5% were aged between 31-40 years while 9.5% were aged between 51-60 years. This implies that majority of respondents who filled in the questionnaires were mature enough to cooperate and give reliable information on the subject under study.

## 4.5 Factors Influencing Implementation of Health Projects

Under this section the researcher focused on the factors that influence the implementation of health projects. These include stakeholder involvement, budgetary allocation, project Management and project monitoring.

### 4.5.1 Stakeholder Involvement

The study sought to examine how stakeholder involvement influence implementation of health projects in Garbatula Sub-County, Isiolo County. The respondents were requested to indicate the extent to which Stakeholder involvement influence implementation of health projects. Their responses were presented in Table 4.7.

**Table 4. 7: Extent that Stakeholder Involvement Influence Implementation of Health Projects**

	<b>Frequency</b>	<b>Percent</b>
Low extent	16	11.8
Moderate extent	45	33
Great extent	58	42
Very great extent	18	13.2
<b>Total</b>	<b>137</b>	<b>100</b>

The respondents indicated that stakeholder involvement influence implementation of health projects greatly as shown by 42% and moderately as shown by 33%. The respondents also indicated that stakeholder involvement influence implementation of health projects very greatly as shown by 13.2% and lowly as shown by 11.8%. This reveals that stakeholder involvement influence implementation of health projects greatly.

The researcher further asked the respondents to indicate the extent to which various aspects of Stakeholder involvement influence implementation of health projects. Their responses were as presented in table 4.8.

**Table 4. 8: Extent that Aspects of Stakeholder Involvement Influence Implementation of Health Projects**

	<b>Mean</b>	<b>Std. Dev.</b>
Consultation	4.1557	0.8595
Prototyping reviews	2.5755	0.6946
Training	4.0519	0.8610
Community Contribution	3.7642	0.7975

From the study results, the respondents indicated that consultation as illustrated by a mean of 4.1557 and training as illustrated by a mean of 4.0519 greatly influence implementation of health projects. The respondents also indicated that community contribution as illustrated by

a mean of 3.7642 also influence implementation of health projects greatly. The respondents finally indicated that prototyping reviews as illustrated by a mean of 2.5755 influence implementation of health projects in a moderate extent.

#### 4.5.2 Budgetary Allocation

The study further sought to determine how budgetary allocation influence implementation of health projects in Garbatula Sub-County. Therefore, the researcher asked the respondents to indicate the extent to which budgetary allocation influences the implementation of health projects. Their responses were as shown in Table 4.9.

**Table 4.9: Extent that Budgetary Allocation Influence Implementation of Health Projects**

	Frequency	Percent
Low extent	8	6.0
Moderate extent	12	9.0
Great extent	29	20.9
Very great extent	88	64.2
<b>Total</b>	<b>137</b>	<b>100.0</b>

From the study findings portrayed in table 4.6, most of the respondents (64.2%) indicated that budgetary allocation influences the implementation of health projects to a very great extent, 20.9% said to a great extent, 9% said to a moderate extent while 6% of the respondents were of the view that budgetary allocation influences the implementation of health projects to a Low extent. This shows that implementation of health projects is influenced very greatly by budgetary allocation.

The researcher also requested the respondents to indicate the extent to which various aspects of budgetary allocation influence implementation of health projects. Their replies were as shown in Table 4.10.

**Table 4.10: Extent that Aspects of Budgetary Allocation Influence Implementation of Health Projects**

	Mean	Std. Dev.
Financial allocation	4.6716	.56106
Funding availability and access	3.8925	.68253
Consistency of funds	2.8926	.68253

According to the findings, majority of the respondents indicated that the financial allocation influence implementation of health projects to a very great extent as shown by mean of 4.6716. The respondents also indicated that funding availability and access as illustrated by a

mean score of 3.8925 greatly influence implementation of health projects while consistency of funds had a moderate influence on implementation of health projects as shown by a mean score of 2.8926.

#### 4.5.3 Project Management

The study further sought to assess how project management influence implementation of health projects in Garbatula Sub-County. The respondents were asked to indicate the extent that project management influence of the implementation of health projects. Their replies were as shown in Table 4.11.

**Table 4.11: Extent that Project Management Influence Implementation of Health Projects**

	Frequency	Percent
Moderate extent	2	1.5
Great extent	39	28.4
Very great extent	96	70.1
<b>Total</b>	<b>137</b>	<b>100.0</b>

From the findings as shown by Table 4.8, 70.1% of the respondents indicated that project management influences the implementation of health projects to a very great extent, 28.4% said to a great extent while 1.5% said project management influences the implementation of health projects to a moderate extent. This makes it clear that project management influences the implementation of health projects to a very great extent.

Further the respondents were asked to indicate the extent to which aspects of project management influences implementation of health projects. Their replies were as shown in Table 4.12.

**Table 4.12: Extent that Aspects of Project Management Influence Implementation of Health Projects**

	Mean	Std. Dev.
Communication mechanism	4.0166	.49875
Bureaucracy	2.6269	.51745
Flexibility	4.2418	.59548
Accountability	3.9254	.85835

From the findings, the respondents indicated that include the flexibility as expressed by a mean of 4.2418, communication mechanism as shown by a mean score of 4.0166 and accountability as shown by a mean score of 3.9254 influence implementation of health

projects to a great extent. However, the respondents indicated that bureaucracy as shown by a mean of 2.6269 moderately influence implementation of health projects.

#### 4.5.4 Project monitoring

The study sought to find out how project monitoring influence implementation of health projects in Garbatula Sub-County, Isiolo County. Thus, the respondents were requested to indicate the extent to which project monitoring influences the implementation of health projects using a likert scale of 1-5. Their responses were presented in Table 4.13.

**Table 4. 13: Effect that Project monitoring Influence Implementation of Health Projects**

	Frequency	Percentage
Low Extent	14	10.3
Moderate Extent	22	16.2
Great Extent	58	42.6
Very Great Extent	43	30.9
<b>Total</b>	<b>137</b>	<b>100</b>

From the results in Table 4.9, the respondents indicated that project monitoring influences the implementation of health projects greatly as shown by 42.6%, very greatly as shown by 30.9%, moderately as shown by 16.2% and lowly as shown by 10.3%. This reveals that there is a great extent to which the project monitoring affects the implementation of health projects.

The researcher further asked the respondents using a likert scale of 1-5 to indicate the extent to which aspects of project monitoring influence the implementation of health projects. Their responses were a shown in table 4.14.

**Table 4. 14: Extent that Aspects of Project monitoring Influence Implementation of Health Projects**

	Mean	Std. Dev.
Assessment of results	3.9191	0.9678
Investment Evaluation	4.3822	0.6561
Corrective actions	2.8612	0.6141
Loss avoidance	4.3024	0.9050
Final product evaluation	3.4498	1.1343

As per the study results, the respondents indicated that investment evaluation as shown by a mean of 4.3822, loss avoidance as expressed by a mean score of 4.302 and assessment of results as shown by an average of 3.9191 greatly influences the implementation of health projects. However, the respondents indicated that final product evaluation as illustrated by a mean score of 3.4498 and corrective actions as shown by a mean of 2.8612 moderately influenced the implementation of health projects.

#### 4.5.5 Health Project Implementation

The researcher also requested the respondents to indicate the trend of the various aspects of aspects of health project implementation for the last five years. Their responses are presented in Table 4.15.

**Table 4. 15: Trend of the Various Aspects of Health Project Implementation**

	Mean	Std. Dev.
Health services accessibility	2.6509	0.6164
Availability of drugs & supplies	4.0094	0.7909
Healthcare services utilization	3.8726	0.7714
Completed on time, scope and within the budget	4.3491	0.7093
Meets the end user's requirements	4.1462	0.8501
Sustainable project benefits	3.7783	0.7745
Superior project quality	3.2547	0.7096

The respondents indicated that completed on time, scope and within the budget as shown by a mean score of 4.3491, meets the end user's requirements as shown by a mean score of 4.1462 and availability of drugs & supplies as shown by a mean score of 4.0094 had improved for the last 5 years. The respondents also indicated that healthcare services utilization as shown by a mean score of 3.8726 and sustainable project benefits as shown by a mean score of 3.7783 had improved for the last 5 years. Further the outcomes showed that superior project quality as shown by a mean score of 3.2547 and health services accessibility as shown by a mean score of 2.6509 had been constant for the last 5 years.

#### 4.6 Regression Analysis

The study used a regression model to test the hypothesis between stakeholder involvement, budgetary allocation, project management and project monitoring and implementation of health projects.

**Table 4. 16: Model Summary**

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	0.827	0.684	0.674	2.084

The outcome of table 4.16 found that R-Square value (coefficient of determination) is 0.673, which indicates that the independent variables (stakeholder involvement, budgetary allocation, project management and project monitoring) explain 67.4% of the variation in the dependent variable (implementation of health projects) leaving 32.6% percent unexplained. This implies that their other factors that influence implementation of health projects that were not covered in this study.

**Table 4. 17: Analysis of Variance**



Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	1268.88	4	317.220	71.415	0.000
	Residual	586.33	132	4.442		
<b>Total</b>		<b>1855.21</b>	<b>136</b>			

The results are shown in Table 4.17 revealed that the model had predictive value and thus it was significant. This was because its p-value was less than 5%,  $p=0.000$  and F calculated (71.415) was significantly larger than the critical F value (2.4472).

Model coefficients provide unstandardized and standardized coefficients to explain the direction of the regression model and to establish the level of significance of the study variables. The results are captured in table 4.18.

**Table 4. 18: Regression Coefficients**

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
	(Constant)	1.053	0.117		
Stakeholder involvement	0.782	0.249	0.759	3.141	.003
Budgetary Allocation	0.701	0.311	0.680	2.254	.030
Project Management	0.599	0.206	0.581	2.908	.006
Project monitoring	0.813	0.091	0.789	8.934	.000

As per the SPSS generated table above, the equation ( $Y = \beta_0 + \beta_1X_1 + \beta_2X_2 + \beta_3X_3 + \beta_4X_4 + \epsilon$ ) becomes:

$$Y = 1.053 + 0.782X_1 + 0.701X_2 + 0.599X_3 + 0.813X_4$$

The findings showed that if all factors (stakeholder involvement, budgetary allocation, project management and project monitoring) were held constant at zero implementation of health projects will be 1.053. The findings presented also show that taking all other independent variables at zero, a unit increase in the stakeholder involvement would lead to a 0.782 increase in the scores of implementations of health projects. The findings also show that a unit increase in the scores of budgetary allocations would lead to a 0.701 increase in the scores of implementations of health projects. Further, the findings show that a unit increases in the scores of projects management would lead to a 0.599 increase in the scores of implementations of health projects. The study also found that a unit increase in the scores of resources would lead to a 0.813 increase in the scores of implementations of health projects.

As per the findings, at 95% confidence level, the study revealed that project monitoring had the greatest effect on the implementation of health projects, followed by stakeholder involvement, then budgetary allocation while project management had the least effect to the implementation of health projects in Garbatula Sub-County, Isiolo County. All the variables were significant as the p-value was less than 0.05.

## **CHAPTER FIVE**

### **SUMMARY, DISCUSSION, CONCLUSION AND RECOMMENDATIONS**

#### **5.1 Introduction**

Chapter five outlines the summary of this research, discussion of the findings, conclusions and recommendations based on research findings as well as suggestion of areas which may require further consideration as far as future research is concerned.

#### **5.2 Summary**

##### **5.2.1 Stakeholder Involvement**

The study sought to examine how stakeholder involvement influence implementation of health projects in Garbatula Sub-County, Isiolo County. The study found that stakeholder involvement influence implementation of health projects greatly. Moreover, it was revealed that consultation, community contribution and training greatly influence implementation of health projects while prototyping reviews were established to influence implementation of health projects in a moderate extent.

##### **5.2.2 Budgetary Allocation**

The study further sought to determine how budgetary allocation influence implementation of health projects in Garbatula Sub-County and found that implementation of health projects is influenced very greatly by budgetary allocation. The study established that the financial allocation and funding availability and access influence implementation of health projects to a very great extent while consistency of funds had a moderate influence on implementation of health projects.

##### **5.2.3 Project Management**

The study further sought to assess how project management influence implementation of health projects in Garbatula Sub-County. It was established that project management influences the implementation of health projects to a very great extent where this was as a result of great influence by flexibility, communication mechanism and accountability as on the implementation of health projects to a great extent. However, the study found that bureaucracy moderately influence implementation of health projects.

#### **5.2.4 Project Monitoring**

The study sought to find out how project monitoring influence implementation of health projects in Garbatula Sub-County, Isiolo County. The study revealed that there is a great extent to which the project monitoring affects the implementation of health projects. It was found that investment evaluation, loss avoidance and assessment of results greatly influences the implementation of health projects. Though, the study found that final product evaluation and corrective actions moderately influenced the implementation of health projects.

#### **5.43 Discussion of the Findings**

##### **5.3.1 Stakeholder Involvement**

The study examined the stakeholder involvement influence and found that it influence implementation of health projects greatly. This concurs with Chesos (2010) who notes that stakeholder involvement is regarded not only as a means of holding project beneficiaries and programme recipients accountable, but also as a way for project participants and local citizens themselves to monitor and evaluate the performance of donor and governmental institutions. Brock and Pettit (2012) adds that training is a key participatory approach that knowledge can be transferred from the facilitators to the beneficiaries hence enhancing beneficiaries skills and open more avenues for other strategies.

Moreover, it was revealed that consultation, community contribution and training greatly influence implementation of health projects while prototyping reviews were established to influence implementation of health projects in a moderate extent. These conformed with Mulwa (2009) who argues that there is a failure within the corporate in issuance of relevant reports as the organizations are afraid of being transparent and accountable. The conceptualization of Stakeholder involvement has evolved over time, moving from its narrow definition as the mobilization of people to contribute free labor and materials, to more extensive interpretations as a process of empowering people and giving them authority to control programs

##### **5.3.2 Budgetary Allocation**

It was clear that found that implementation of health projects is influenced very greatly by budgetary allocation. This was in line with Omiti, Mude, and John (2012) who argued that many organizations fail to decentralize and allocate resources as they consider Implementation of projects as just has an activity. In essence, Monitoring has assumed a

major biasness compared to Evaluation that receive little or no attention if any. According to Rubin and Rubin (2009) also argued that organizations sight lack of funds to conduct Implementation of projects or even document aspects of project in their projects and that Participatory Implementation of projects is an expensive venture that requires a lot of resources but is a sure way of ensuring people are brought on board for sustainable development.

The study established that the financial allocation and funding availability and access influence implementation of health projects to a very great extent while consistency of funds had a moderate influence on implementation of health projects. These findings corelate with Estrella (2010) who notes that conducting project activities requires that an organization invest valuable resources, including money and peoplesø time. At the earliest stage of designing a project activity, key stakeholders must make a decision on whether the activity is worth pursuing given the expected use and costs. At least a rough budget for the activity is therefore needed as part of up-front planning. This may be done initially as part of an overall project plan and again as a first draft of ToR is developed.

### **5.3.3 Project Management**

It was established that project management influences the implementation of health projects to a very great extent. This agrees with Heagney (2012) who argued that the project management approach had been proved to considerably improve the chances of success of health projects. The project management approach involves relying more on resources management, processes and infrastructure, coping with greater internal as well as external competition, delivering the outcomes in a proficient way as expected and improving effectiveness and efficiency.

The study found that there was a great influence by flexibility, communication mechanism and accountability as on the implementation of health projects to a great extent. However, the study found that bureaucracy moderately influence implementation of health projects. These are similar to findings by Nwakanma (2013) who recommends that experts in Information and Communication Technology (ICT) sector should adopt project management methodologies and technology skills where a project team is usually a function of an aggressive team or a task force consisting of members drawn from various functional specialist departments of the client led by a mature multidisciplinary generalist.

### **5.3.4 Project Monitoring**

The study find out that project monitoring influenced implementation of health projects in Garbatula Sub-County, Isiolo County greatly. According to UNDP (2009), monitoring places focus on the implementation process and probes the key question on how well is the program being implemented while evaluation analyses the implementation process. Evaluation seeks to determine how well program activities have met objectives, examines extent to which outcomes can be attributed to project objectives and describes quality and effectiveness of program by documenting impact on participants and community. Monitoring generates periodic reports throughout the program cycle, focuses on project outputs for monitoring progress and making appropriate corrections, highlights areas for improvement for staff and tracks financial costs against budget.

It was found that investment evaluation, loss avoidance and assessment of results greatly influences the implementation of health projects. Though, the study found that final product evaluation and corrective actions moderately influenced the implementation of health projects. These findings concur with Kamunga (2010) who argue that a participatory approach in monitoring and evaluation is empowering because it claims the right for local people to control and own the process of making evaluation decisions and implementing them. Participating in an evaluation from start to finish can give stakeholders a sense of ownership over the results; provide timely, reliable, and valid information for management decision-making, increase cost-effectiveness of M&E information. The purpose of evaluation is to help the stakeholders of a project to better understand whether their hard work is having the impact they desire. In addition, evaluation aims to analyze the past to understand the future of the project.

### **5.4 Conclusions**

The study concluded that stakeholder involvement influenced implementation of health projects greatly, positively and significantly. This was attributed to great influence on implementation of health projects by consultation, community contribution and training as well as a moderate influence of prototyping reviews on implementation of health projects.

The study further concluded that there was a significant influence of budgetary allocation on implementation of health projects. This was as a result of very great influence by budgetary allocation. It could also be attributed financial allocation and funding availability and access

influence implementation of health projects greatly influencing on implementation of health projects.

The study concluded that project management influenced implementation of health projects very greatly and significantly. The study deduced that flexibility, communication mechanism and accountability greatly influenced implementation of health projects while bureaucracy moderately influenced implementation of health projects.

The study concluded that project monitoring influenced implementation of health projects in a great extent and significantly. It was deduced that investment evaluation; loss avoidance and assessment of results greatly influenced the implementation of health projects while final product evaluation and corrective actions moderately influenced the implementation of health projects.

Finally, the study concluded that all the variables were significant with project monitoring had the greatest effect on the implementation of health projects, followed by stakeholder involvement, then budgetary allocation while project management had the least effect to the implementation of health projects. in Garbatula Sub-County, Isiolo County.

## **5.5 Recommendations**

The study recommends that the county government should adopt an effective stakeholder mobilization strategy that help build collaborations with other health sector players like NGOs, CBOs and private companies for the realization of health goals in Kenya through devolved units. This will ensure all the stakeholders are fully involved in the implementation of the health projects.

Based on the present findings and analysis, the study recommends an enforcement of Kenya's Health Policy 2011-2030 and the 2010 Constitution of Kenya both of which require an appropriate and equitable distribution of health workforce in public health facilities and their subsequent training and development, enhancing their retention packages and incentives and upgrading of institutional and health worker productivity and performance. It further recommends that the county government with the help other central government agencies and the ministry of health should put in place measures that would ensure health grants from international governments are utilized for the implementation of intended health care projects.

The study recommends that the project management should engage the stakeholders more to harmonize its goals and objectives with the aspirations of the stakeholders and reduce dissonance levels thereby increasing satisfaction. This will ensure that the stakeholders support the activities of the project.

The study revealed that project monitoring greatly affects implementation of health projects. This study, therefore, recommends that project stakeholders should capacity build on monitoring and evaluations guidelines with more emphasis on reporting and participatory M&E. This will effective assessment of results which full enhances the implementation of the health projects.

The study also revealed that communication mechanisms influences implementation of health projects. Therefore, the study recommends that the project management should be encouraged to communicate the risk associated with implementation of health projects to relevant stakeholders, develop a risk review process so as to ensure projects are successfully implemented.

The study recommends that county government should improve integrated communications plan to improve project implementation. The content of such communications plan should include clear explanation of what new responsibilities, tasks and duties need to be performed by the affected implementers. It also includes the why behind changed job activities and more fundamentally the reasons why the new project decision was made firstly. This will enhance communication of change during and after an organizational change on organizational developments to all levels in the appropriate manner.

The county government should allocate sufficient funds to projects and ensure there is independency in utilization of the funds. The study further recommends that management in health projects in Galbatula sub-county should ensure that they employ and deploy qualified and competent individuals for project monitoring process. In addition, they should employ monitoring/supervision mechanism, to allow efficiency in project implementation.

The study recommends that the project management office or committee should continuously assess stakeholder interests; this will help to promote their buy-in and eliminate intergroup conflicts thereby improving project performance. The study also recommends that stakeholders should be included in all pre-implementation and inception meetings as well as their views being incorporated in planning and execution. This will increase the acceptability,



and create a bridging social investment for the health projects, well as enriching the project with more ideas.

### **5.6 Recommendations for Further Research**

This study was limited to health projects in Garbatula sub-county. Therefore, the study recommends that the same study should be done based on other sub counties in Isiolo county.

Further the same study could be conducted in other counties in Kenya to establish factors influencing implementation of health projects. This will enhance a better generalization of the study findings. Additionally, the study focused on health projects. To get a complete understanding of the factors influencing implementation of projects in the health sector in Kenya, it is suggested that a similar study be done based on other projects such as Dispensary project in Kenya. A study on factors affecting project implementation in other sectors like roads is also suggested.

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## APPENDICES

### Appendix I: Letter of Transmittal

P.O Box 23,

GARBATULA.

Dear Sir/ Madam,

#### **RE: ACADEMIC RESEARCH PROJECT**

I am a Master of Arts in Project Planning and Management student at University Of Nairobi. I wish to conduct a research entitled factors influencing implementation of health projects in Garbatula Sub-County, Isiolo County. A questionnaire has been designed and will be used to gather relevant information to address the research objective of the study. The purpose of writing to you is to kindly request you to grant me permission to collect information on this important subject from your organization.

Please note that the study will be conducted as an academic research and the information provided will be treated in strict confidence. Strict ethical principles will be observed to ensure confidentiality and the study outcomes and reports will not include reference to any individuals.

Your acceptance will be highly appreciated.

Yours faithfully,

Wario Abdi

Reg.No:L50/85055/2016

## Appendix II: Research Questionnaire

This questionnaire is to collect data for purely academic purposes. The study seeks to investigate the *factors influencing implementation of health projects in Garbatula Sub-County, Isiolo County*. All information will be treated with strict confidence. Do not put any name or identification on this questionnaire.

*Answer all questions as indicated by either filling in the blank or ticking the option that applies.*

### SECTION A: DEMOGRAPHIC INFORMATION

SECTION A: Background Information (Please tick (ç) appropriate answer)

- 1) Please indicate your gender: Female  Male
- 2) For how long have you been working with health projects in Garbatula Sub-County, Isiolo County?

Less than 3 years  3 to 9 years   
9 to 12 years  Above 12 years

- 3) State your highest level of education

Certificate  Diploma  Degree  Masters  PhD

Others (Specify) -----

- 4) Please Indicate your age bracket 20-30 yrs  31-40 yrs   
41-50 yrs  51 ó 60

#### Stakeholder involvement

- 5) To what extent does stakeholder involvement influence the implementation of health projects in Garbatula Sub-County, Isiolo County?

Not at all  Low extent   
Moderate extent  Great extent   
Very great extent

- 6) To what extent do the following influence the implementation of health projects in Garbatula Sub-County, Isiolo County?





