STAKEHOLDER PARTICIPATION AND PERFORMANCE OF FAMILY PLANNING PROJECTS IN KENYA: A CASE OF THE ADVANCED FAMILY PLANNING PROJECT IN COMMUNITY PHARMACIES IN NAIROBI COUNTY, KENYA

ANNASTASIAH NGUNJIRI

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DECLARATION

This research project report is my original work and has not been presented for award of degree in any other university.

Candidate

Signature..... Date...9TH OCTOBER, 2023.....

Annastasiah Ngunjiri L50/39234/2021

Supervisor

This research project report has been submitted with my approval as the University of Nairobi supervisor.

Signature Date 9TH OCTOBER, 2023

Dr. Reuben Kikwatha

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I thank God due to the strength given to me throughout the research process. I also acknowledge the invaluable input of Dr. Kikwatha who was my supervisor for professionally guiding me on my research.

More appreciation is to the respondents for willingly giving the information required to accomplish this research project.

DEDICATION

My dedication goes to my family and friends for encouraging and supporting me during research work. Further dedication goes to my classmates as they contributed in giving me ideas and collaboration in the development of this research project.

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ABSTRACT

This research inquest was to establish the influence of stakeholder participation and performance of family planning projects in Nairobi Kenya. The research used a case of the Advanced Family Planning project in community pharmacies in Nairobi County. The project was rolled from 2020 in Kenya to introduce injectables in community pharmacies. Stakeholder participation has increasingly become a key element in project development and implementation. Stakeholders inform policy developments and guidelines in projects, hence their participation is crucial. Family planning uptake in Kenya is currently below the target of 2 children per couple, therefore more needs to be done to improve this situation. Descriptive survey was applied as the research design in data collection on stakeholder participation and performance advanced family planning project in community pharmacies in Nairobi, Kenya. The research was carried out on a study population of 110 respondents among them pharmacy superintendents, project officers, supervisors and managers. A census was done using a questionnaire for pharmacy superintendents and project officers and a key informant guide for the supervisors and managers. The study showed that stakeholder participating in project identification, project implementation, project planning, and project tracking and evaluation has a positive significant influence on performance of family planning projects. Data analysis concluded that stakeholder participating in the project cycle indeed impact on performance of family planning projects to a very great extent. In health projects and specifically family planning projects, participation of stakeholders at the grassroots among them pharmacists in community pharmacies has proved beneficial in reaching the masses who have unmet needs for modern birth control. The move has solved issues of long distances to the clinics and waiting long hours for service, hence time saving. Many women are given easier access to family planning commodities. In addition women go home with a family planning method of their choice. The recommendation made herein is the introduction of more family planning methods to the grass root especially in the community pharmacies. Additionally, stakeholders should be brought on board during the project cycle in family planning projects to enable all women with unmet needs for family planning to have easier access of family planning methods of their choice.

CHAPTER ONE: INTRODUCTION

1.1 Background of the Study

Globally, family planning projects are crucial in achieving the broader target of sexual and reproductive health. Family planning (FP) limits or delays child birth as to the client's wishes (Götmark & Andersson, 2020). Moreover, FP plays part in reduction of population growth and poverty, preservation of the environment and also contributes to demand for public goods and services (Namukunda & Ogolla, 2016). Additionally, FP reduces unwanted pregnancies, and can minimize injury; sickness and death linked to child birth, abortions and sexually transmitted diseases, which includes Human Immunodeficiency Virus and Acquired Immunodeficiency Syndrome. Therefore, projects in the health sector that offer FP services improvement, expanded access and education on effective contraception, are socially valuable for mothers, their children and households (Binanga & Bertrand, 2016).

Stakeholders play a crucial role in in supporting and implementing family planning projects. According to wall (2018), stakeholder participation is a structured approach to interact with stakeholders in identifying and involving organizations and persons in identifying, planning, implementing and monitoring of projects. In Kenya delivery of reproductive health projects is done through a multi- sectoral approach which necessitates many stakeholders such as the national government, county government, International organizations such as World Bank, Development Bank and United Nations. Other stakeholders include manufacturing companies, local and religious groups, non- governmental organizations (NGOs) and private sector health facilities. The Ministry of Health through the reproductive health department coordinates plus it supervises all health projects (MOH, 2018). Interestingly, stakeholder participation is linked to having a potential in contributing to the success of family planning projects (Magassouba, 2019). Therefore, for project managers in family planning projects to carry out these projects successfully and meet user requirements, active participation and commitment of all stakeholders is paramount. Challenges in identifying and working out costs and quality constraints and other problems within the project cycle require active Participatory strategy from stakeholders. Consequently, project performance is predominantly projected by the outcome of the decisions made by the stakeholders (Bryson, 2013)

Recently there have been efforts by the stakeholders in projects concerned with family planning in Kenya to expand and increase supply for family planning services in community pharmacies through various family planning projects. Among these projects is the introduction of contraceptive injectables through the advanced family planning project (AFP) by JHPIEGO. The move was informed by the fact that ten per cent of clients seeking family services, according to the Kenya Health Demographic Survey (KDHS), obtain their method of choice from community pharmacies since those facilities are closer to the people (KDHS, 2014).

This stakeholder theory guided the study, which holds that anyone affected by the organization or its undertakings is considered a stakeholder. The second theory that guided this study is integrated behavioral model which holds that the best predictor of behavior is the intention to perform or not perform a behavior. Performance is influenced by behavioral beliefs, normative beliefs and individual perceived behavioral control or self-efficacy when performing the behavior. Stakeholder participation on projects introducing family planning injectables in community pharmacies is viewed as enhancing women's contraception method and choices hence it is weighted as good.

1.1.1 Stakeholder Participation in Family Planning Projects

Stakeholder participation in organizations ensures that the aspirations of anyone who is a stakeholder in that institution are proactively looked at, which builds confidence, assurance and a buy-in for critical initiatives of that organization. Before starting a project, project officers should look for forums for engaging stakeholders. In family planning projects stake holders such as the Ministry of Health both at the county and national government capacities, service providers and service beneficiaries are included (MOH, 2018). Policies and program guidelines are developed at the national level in MOH as the counties make operational decisions for implementation of the programs. (Kalibala & Nutley, 2019; MOH, 2020).

Role sharing aids in family planning project implementation. For successful delivery of the project the owner of the overall project is accountable and is the key leadership figure in driving the change forward and ensuring that the project delivers expected objectives. The MOH have two sub-committees under the training and coordination committee which deal with the work of planning and reporting for revising of the plans for implementation together with stakeholders

and facilitate churning out of the training programs (Baruwa et al., 2022; Harvey, 2011; MOH, 2020). In Kenya, the MOH Department of Monitoring Evaluation and Health Informatics liaises with reporting subcommittee to keep abreast with family planning reporting by service providers. A partner such as JHPIEGO continues to engage with key stakeholders and support monitoring and evaluation efforts by the government (JHPIEGO 2021; Binanga & Bertrand, 2016; Harvey, 2011).

1.1.2 Performance of Family Planning Projects

Performance of a project is realized when stakeholders are satisfied through utilizing the allocated budget, timeliness, delivering on project scope and achieving high levels of responsiveness by the clients, technical standards for quality, operations and safety. Project output is the general quality in relation to gains made to the beneficiaries, effectiveness, and efficiency of execution and making it sustainable. Additionally, project performance is derived by ensuring enterprises maximize realized benefits, minimizes uncertainties and risks, and realizes project goals and objectives (Olwande C.J. (2017).

Indicators of project performance differ from project to project and different variables, including the context and nature of a project and influence though quality and cost are key dimensions of measuring project success (Banda & Pretorius, 2016). Quality performance can be measured depending on whether a project outputs delivers the predetermined technical performance parameter or cost success which is determined by the percentage difference between original project budget and budget overruns or under runs. Timeliness; within budget expenses and contribution to shareholder value are also considered as indicators of performance. An effective approach to identifying performance indicators helps to make effective decisions on the standards of performance to be established. Well-designed performance indicators in family planning projects should enable decision makers to establish baseline information such as current performance (Gomes & Romão, 2018)

1.1.3 The Advanced Family Planning Project in Community Pharmacies in Nairobi Kenya

The Advanced Family Planning (AFP) Project of John Hopkins Bloomberg, currently known as JHPIEGO, advocates for quality family planning to communities through financial investment and political commitment by government, private organizations and NGOs. With the

introduction of the subcutaneous injectables in community pharmacies, AFP supports contraceptive logistics systems, tracking contraceptive stock levels using cell phones and monitoring and evaluation of the contraceptive uptake (Binanga & Bertrand, 2016). AFP was started in 2009 and since then they have had advocacy wins in setting policy, they have come up with financial investments, and have pushed the family planning agenda to the national and global stakeholders. AFP is supported by three foundations, one of them being the Bill & Melinda Gates the second one being William and Flora Hewlett, the third one is David and Lucile Packard Foundations, and other local partners among them JHPIEGO (Gillespie, Hawks, Whit marsh, Bodenheimer, & Karklins, 2016).

Community pharmacies in Kenya were allowed to provide injectable contraceptives by the MOH in 2018 after amending the Kenya's family planning guidelines (MOH, 2021). The project roll out was done in the community pharmacies through the Advanced Family Planning project by JHPIEGO in 2020 (JHPIEGO, 2021). Previously in Kenya, community pharmacies were only allowed to dispense condoms and emergency contraceptive pills over the counter. Community Pharmacies are retail pharmacies that allows public access to both over the counter (OTC) or non-prescription and prescription medicine, they also offer advice on health, as opposed to hospital pharmacies which are also retail but patients are required to have a doctor's prescriptions in order to obtain medicines (Yolanda, 2022; Pharmacy and Poisons Act Kenya, 2012). Community pharmacies in Kenya have become a preferred choice for family planning services because of their flexibility and proximity to people as opposed to many other health care facilities. This trend seems to have been increasingly observed especially during and post Covid -19 periods (Gonsalves et al., 2020, MOH, 2021)

JHPIEGO advocated for over three years to engage stakeholders for policy change and was allocated the project in 2020 by the ministry of health in phase one. Phase two was collaboration with pharmacists to roll out the project in the community pharmacies. The pharmacy staff must first be trained in a health facility and afterwards get certification from MOH for them to stock and administer the contraceptive injectables. The two injectables are; Subcutaneous Depot Medroxyprogesterone Acetate and Intramuscular Depot Medroxyprogesterone Acetate in the third phase. Monitoring and evaluation was carried out through all the three phases (JHPIEGO, 2021). Nairobi County represents the highest number of unplanned pregnancies and has a huge

population segment of people whose needs for family planning have been unmet. This is because the major slums in Kenya are located in Nairobi. They include Kibera, Mathare, Dandora, Kawangware, Kangemi, Huruma, Kayole and Korogocho (NCPD, 2021).

1.2 Problem Statement

Stakeholder participation and support have been sighted as one of the reasons that lead to Poor implementation and performance of family planning projects (Binanga, 2016). In Africa, 42% of young women in their reproductive age have been reported to have unmet needs for modern birth control (WHO, 2020). For instance access to contraception injectables in Kenya has been low as they were often only administered by hospitals. Consequently, distances to the clinics were long, clients waited long hours for service, and occasionally there were stock outs these made many women to go home without getting the family planning method of their choice (Gonsalves ,2019). Inevitably, engagement and participation of more Stakeholders to avail these family planning commodities at the grass root levels is required. Stakeholder engagement, involvement and participation will easily supply contraceptives, thereby raising demand at the community level closer to the people. Among the stakeholders targeted by family planning projects for scaling up family planning projects, are the pharmacist at the community pharmacies (JHPIEGO, 2021: MOH, 2020).

Studies done elsewhere on stakeholder participation and performance of family planning projects brought about contextual gaps as they could not be generalized to represent Nairobi Kenya. There were two studies of interest in this research the first one was by Duodu E.O. (2021), Stakeholder engagement and uptake of family planning in krachi Ghana concluded that increased stakeholder participation improve the uptake family planning through enhancing recognition of family planning commodities at the local levels. This works by reducing myths, misconceptions and rumors. The second one was Magassouba (2019), Stakeholders Involvement on Performance done in Guinea where he concluded that stake holder participation increase project success. Other studies done in Nairobi focused on projects in other areas other than family planning, for example Olwande C.J. (2017), was in supply chain project of antiretroviral therapy. Njogu, E. M. (2016) was in automobile emission control and Kipkoech A. (2022) was in housing projects.

As a social concern, unmet needs for family planning impact negatively on individuals as it poses social- economic burdens on them. Stakeholder participation could alleviate these problems if utilized to maximize their benefits throughout the project cycle. Therefore, the question this study was looking answers for was; what is the influence of stakeholder participation and performance of family planning projects in Nairobi, Kenya?

1.3 Research Objectives

The general objective of this study was to establish the influence of stakeholder participation and performance of family planning projects in Nairobi.

The specific objectives were:

- i. To establish the influence of stakeholder participation in project identification and performance of family planning projects in Nairobi County, Kenya.
- ii. To determine the influence of stakeholder participation in project planning and performance of family planning projects in Nairobi County, Kenya.
- iii. To examine the influence of stakeholder participation in project implementation and performance of family planning projects in Nairobi County, Kenya.
- iv. To determine the influence of stakeholder participation in project monitoring and evaluation and performance of family planning projects in Nairobi County, Kenya.

1.4 Value of the Study

This project contributes to stakeholder model theory since activities and processes for project identification, planning, implementation and monitoring & evaluation involve different types of people who are the stakeholders. Secondly, to the integrated behavioral model where stakeholder participation on projects introducing family planning injectables in community pharmacies is viewed as enhancing women's contraception method choices hence it is weighted as good.

In practice stakeholder participation in family planning projects would contribute in furnishing the unfulfilled needs for modern contraception. Consequently a study on stakeholder participating in family planning projects in Nairobi and performance of those projects, will add value in shedding light on issues that touch on stakeholder participation and their influence in project performance. This study's findings of will help stakeholders design strategies and

policies that will alleviate gaps in current and future programs. This will consequently promote successful family planning project implementation and expand delivery of family planning services. Moreover women will have more added choices of family planning at the grass root level.

CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

Standpoints of researches conducted on participation of stakeholders in family planning projects and performance of those projects is discussed in this chapter. Participation of stakeholders in the project cycle and performance of family planning projects are the variables discussed under this research. This chapter also reviews the theoretical and conceptual theories, summary of literature scrutinized and gaps realized.

2.2 Theoretical Framework

Theoretical frameworks target specific theories concerned with human reality to furnish distinct viewpoints through which to scrutinize a theme or subject (Ngulube & Mathipa, 2015). The Stakeholder theory and Integrated Behavioral Model are the two theories that guide this study.

2.2.1 Stakeholder Theory

Stakeholder model theory originated from Edward in 1984, where he said that stakeholders include individuals, groups or organization that have stake in the project. Stakeholders include governmental and nongovernmental groups, environmental groups, local communities' employees, suppliers and customers. According to Donaldson and Preston (2002), descriptive approach classifies stakeholders according to their own interests. There are four approaches; Instrumental approach which interlinks stakeholder management and financial outcomes. Normative approach where the stakeholders who are among them peers and competitors have informal control of the industry, Functional stakeholders among them suppliers, employees, and unions who impact on the input and distributors, retailers and customers, who affect the outputs. Finally, diffused stakeholders among them organizations such as NGOs, mass media organizations and voters, hold less immediate relationship but are likely to influence the organizations (Donaldson and Preston, 2002).

It is not possible to attend to the aspirations of the different contributors of the project in equal measures, as critics have argued. At different times in the project or process one or more stakeholders will be disadvantaged. Equally, some of the stakeholders will hold more authority than others, creating friction. A stakeholder management plan can easily resolve these problems

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for project managers. Any of the group of stakeholders' expectations plus the rules for engagement must be detailed there in. Further, stakeholder management plan gives importance to different participants on the grounds of their level of impact on the project outcomes (Jeremy, 2022).

For this study there are several stakeholders. They include; the government, NGOS; AFP and JHPIEGO, pharmacists and the users of family planning. The approach here can be considered as normative. In relation to interests the ministry of health can be said to be enabling stakeholders, JHPIEGO diffused stakeholders and pharmacists and users as functional stakeholders.

2.2.2 The Integrated Behavioral model

The integrated behavioral model (IBM) was invented in 2000 by Fishbein and Ajzen. It is also known as the Reasoned Action Approach (Montano and Kasprzyk, 2015). IBM model basically focuses on the determinants of behavioral motivations it adds that an individual need to have the knowledge as well as have the skills to act (Montano and Kasprzyk 2015)

IBM holds that behavior prediction is based on the intent to execute a behavior or the intention not to perform a behavior. There are two beliefs in the IBM; behavioral beliefs and normative beliefs. Behavioral beliefs are expectations on negative or positive outcomes in relation to performing a behavior that lead to creation of attitudes. Normative beliefs are perceptions of what other people think about the behavior, or beliefs on what other people are doing. Both beliefs promote perceived normative pressure in relation to the behavior. Additionally, there is also a control belief which concern barriers to and facilitators of the behavior and determine behavioral control or self-efficacy when conducting the behavior. IBM also integrates background factors such as, personality, race, education, income, gender and past behavior.

The overall evaluation of the behavior is directly measured by the attitude that is whether stakeholder participation on projects introducing family planning injectables in community pharmacies is seen as good or bad. The person's beliefs that engaging in the behavior is linked with certain outcomes are indirect measures. Consequently, a behavioral belief on stakeholder participation in provision of family planning injectables in community pharmacies has the likelihood of enhancing women's choices of contraception method; is weighted as good.

2.3 Empirical literature Review

The literature review of the five variables on stakeholder participation and performance of family planning projects for this research is presented here.

2.3.1 Stakeholder participation in Project Identification and performance of Family Planning Projects

During initiation stage in a project, definition and determination of the project's nature and scope is carried out. Stakeholders' participation helps to bring in the element of understanding best strategies and scope of investing resources. Binanga, 2016 looked into how stake holder involvement, among them nurses and pharmacist participated in identifying areas in which they would improve family planning uptake in Kinshasa Congo. In the piloting and stakeholder involvement project awareness of Sayana Press injectable to stakeholders was increased. The move increased participation at the community level and even included community health workers who would also identify areas that would increase family planning uptake. Project management stakeholders' participation benefits the project in making key decision. It is through Participation that the stakeholders get the feeling of joint ownership to the project. Among the measures employed was aggressive consultation with, negotiation efforts and finally making decisions together (Baruwa et al., 2022; Bertrand & Binanga, 2016).

According to Olwande, 2017 in ARV supply chain projects stakeholders among them pharmacist and NGOs; ownership by stakeholders motivates them to sponsor the project. The stakeholders get a feeling that the project is taking into consideration of their perspectives. Sustainability is achieved when all the stakeholders involved own the project and they actively participate. Participation of stakeholders in project identification of the project is vital for delivery of the performance objectives of the project. If this phase is not carried out properly the performance will likely be jeopardized.

According to Magassouba, 2019 in development projects, performance in Guinea; organizations are influenced by stakeholder participation in project identification. The stakeholders need to fully understand the project environment. In addition, stakeholders make requisite and technical specifications incorporated into the project. Moreover, any shortfalls must be identified, reported for recommendation to correct them. Stakeholder's participation in the initiation stage must be

involved in selecting the most favorable project after doing the need assessment of the community or organization. Stakeholders are involved in assigning roles such as that of the project in charge. Needs assessment and definition, costs, goals and benefits of the project also involves stakeholders. Grasping the influence and power levels of stakeholders is crucial in understanding legitimacy and rationality in stakeholder participation processes.

2.3.2 Stakeholder participation in Project planning and performance of Family Planning Projects

Participation of Stakeholders in project formulation and organization supports project managers in strengthening projects output. According to Kipkoech, 2022, in the construction of Ngara Parkroad housing project in Nairobi city, Kenya, stakeholders' involvement in the planning phase included activities such as rationale of the project's quality, specifications and task scheduling and resources allocation. In addition, risks were determined and evaluated in this phase. According to Binanga, 2016 in the piloting of Sayana press injectables at the community level in Kinshasa Congo which was a new way of doing things they had to obtain authorization for marketing and distribution of the injectables in the planning stage and this included stakeholder's involvement.

According to Duodu, 2021 stakeholder participation in the family planning uptake in krachi west district Ghana, the planning phase impacts the understanding of roles and duties of stakeholders in establishing how to plan, creating the work breakdown structure (WBS) and schedule. Moreover, forecasting of the resources, time and cost for the project, inclusive of risks was done in the planning phase. Stakeholders participated in obtaining approvals from relevant authorities to commence the project .Common techniques utilized in the stakeholder participation in planning phase includes Milestones Reviews and project Plans. Project managers set objectives to each participant, prepare the project budget, and plan works.

2.3.3 Stakeholder participation in Project implementation and performance of Family Planning Projects

According to Kipkoech 2022 in housing project in Nairobi County, in the project implementation phase, Stakeholder participation is crucial to the outcomes of projects. In this phase Project managers harmonize coordination of people, proper evaluation of risks and adept utilization of resources in accordance with the project plan. According to Binanga, 2016, the implementation of the pilot program for Sayana press injectable was done from July to December 2015, she asserts that stakeholder participation in family planning projects implementation is vital to convert the objective and plans for programs to fruition.

According to Njogu 2015, the intricacy of stakeholder commitment in project implementation involves different attributes of a project such as the duration, the size of investment and other unplanned and unanticipated aspects. Stakeholder's participation support implementation to great extent consequently considering stakeholder's interests and claims throughout the project implementation stages is imperative (Magassouba 2019). A bilateral effect is seen with the association between programs and stakeholders participation and these affects the standards of the project output (Joaquin, 2010)

2.3.4 Stakeholder participation in Project monitoring & evaluation and performance of Family Planning Projects

According to Binanga, 2016, stakeholders among them sponsors like john Hopkins of the AFP project Program supported monitoring and evaluation process by controlling, and assessing the program inputs plans and implementation programs. Planned works were compared with actual outcomes to establish results of the family planning project. Additionally, the assessment of the uptake and the findings of family planning services project were shared with stakeholders in family planning services. When evaluating projects it was for the purpose of determining whether the actual position of a project and the planned position were in line, for the purpose of assessing project progress. Stakeholder Participation in project tracking plus evaluation greatly affects quality of the project, therefore it is crucial to use suitable control for the expected performance of the project (Magassouba, 2019).

According to Bhim Chimoriya, 2014 a project should be appraised before and after it's implemented. The ultimate goal of keeping track of activities and evaluation is to approximate the impact of each activity and assess its contribution in the outcome of the project. Control

forms part of an extensive process for planning, decision-making and sustainability of a project. A positive connection has been reported between participation of stakeholder in the tracking and evaluation phase and the execution of projects.

2.3.5 Performance of Family Planning Projects

According to Carvalho 2015, Project performance can be assessed from different dimensions depending on the projects or programs involved. Risk management in the project cycle has been cited as an aspect that influences performance in projects. It is argued that even low levels of risks may affect project performance. Nevertheless, these findings leave out the capabilities of stakeholders among them negotiation, leadership attributes and conflict resolution skills. Ideally these are the skills employed in stakeholder participation in the project cycle.

According to Binanga, 2016, the critical success factor for performance for family planning is stakeholder participating in project identification, planning, implementation, tracking and evaluation. Stakeholder participating in improving access at community level by nurses and community health workers was due to winning their support in committing to the project. Consequently the prospect for sustainability after completion of the project was high. According to Duodu, 2021, a positive impact on execution of the project is achieved by pinpointing the roles and recognizing the responsibilities of the engaged stakeholders and having an affable working environment.

Performance of family planning projects to a great extent relies on the outlook of the different stakeholders in that project. The major stakeholders in the project must be devoted in carrying out their roles as per the project requirement throughout the project failure to which it will negatively impact on the performance entire project (Magassouba, 2019). Measurement of family planning project success includes the responsiveness from clients, project cost, quality and users' satisfaction. In addition timeliness is seen as an important indicator in project performance (Binanga, 2016)

2.4 Summary of Literature Reviewed and Knowledge Gaps

Selected literatures that had documented Stakeholder participation and performance of Family Planning Projects are reviewed here in. The gaps are expressed in the subsequent table.

Table 2.1 Summary of Literature Gaps

Author	Study Focus	Study	Metho	Findings	Knowle	Focus of
		variables	dology		dge	current
					Gaps	study
Kipkoec	Stakeholder	Stakeholder	Descri	Stakeholder	Focused	Focused
h (2022)	participation and	participation in	ptive	participation helps	on	on
	performance of	project cycle	survey	to achieve good	construc	family
	Ngara Parkroad	and	design	project performance	tion	planning
	housing project in	performance			project	project
	Nairobi.					
Doudu	Stakeholder	Stakeholder	Mixed	stakeholder	Study	Study
(2021	engagement and	involvement in	metho	engagement is more	done in	done in
	its influence on	the project	ds,	likely to improve	Ghana	Kenya
	family planning	cycle and	survey	family planning		
	uptake in krachi	uptake of	and ,	uptake by		
	west district	family planning	intervi	increasing the rate		
			ews	of acceptance of		
				family planning		
				services in		
				communities		
Magasso	Stakeholders	Stakeholder	Survey	Stakeholder	Study	Study
uba	Involvement on	involvement in	and ,	participation in	done on	done in
(2019)	Development	project cycle	intervi	project cycle	Guinea	Kenya
	Project	and	ews	increase project		
	Performance in	performance of		success		
	Guinea	development				
		projects				
Olwande	Stakeholder	Stakeholder	Descri	Engagement of	Study	Study

(2017	engagement and	involvement in	ptive	stakeholder in the	area was	area is
	performance	the project	survey	project improved	on	on
	ARV therapy	cycle and	design	performance of the	antiretro	family
	supply chain	performance in		ARV supply chain	viral	planning
	project by	antiretroviral		project especially	therapy	
	national aids and	therapy supply		engagement with	supply	
	sexually	chain project		pharmacists	chain	
	transmitted				project	
	infections control					
	program in health					
	facilities					
Njogu	Stakeholder's	Stakeholder	Descri	Engagement of	The	Study
(2016)	involvement on	involvement in	ptive	stakeholder	study	area is
	project	the project	survey	enhance the	area was	on
	performance of	cycle and	design	performance of a	on	family
	NEMA	performance		project in a greatly	environ	planning
	automobile				mental	project
	emission control				project	
	project in Nairobi					
Binanga	Pilot Research as	Family planning	Survey	stakeholder	Study	Study
(2016)	Advocacy on	access, uptake	,	involvement,	done in	done in
	Sayana Press in	and expansion,	intervi	improve training	Congo	Kenya
	Kinshasa.	logistics and	ews	and monitoring &	Kinshas	
		monitoring and	and in-	evaluation in	a	
		evaluation	depth	delivery of		
			intervi	contraception		
			ews	services		

2.5 Study Hypothesis

H01 Stakeholder participation in project identification does not significantly influence performance of family planning projects in Nairobi County, Kenya.

H02 Stakeholder participation in project planning does not significantly influence performance of family planning projects in Nairobi County, Kenya.

H03 Stakeholder participation in project implementation does not significantly influence performance of family planning project in Nairobi County, Kenya.

H04 Stakeholder participation in project monitoring and evaluation does not significantly influence performance of family planning projects in Nairobi County, Kenya.

Conceptual Framework

Conceptual framework points out the fundamental concepts in the research, and the assumed relationships between them (Tamene, 2016).

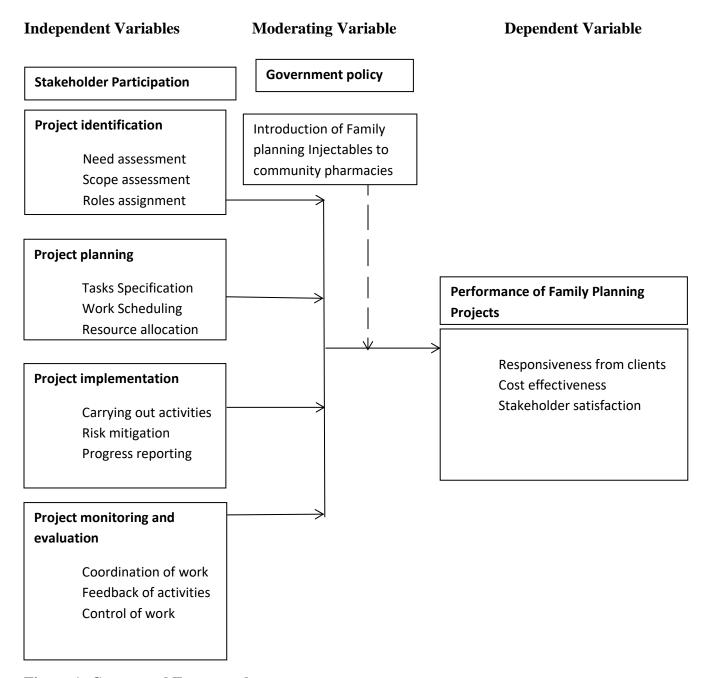


Figure 1: Conceptual Framework

CHAPTER THREE: RESEARCH METHODOLOGY

3.1 Research design

Descriptive survey was the research design applied as it emerged suitable for the research. This research design facilitated detailing of the characteristics of the population targeted, and exploring their social interactions, through the use of both key informant interviews and questionnaires.

3.2 Target Population

Targeted population for the study was 110 respondents. These respondents were among them the 100 pharmacy superintendents from the pharmacies in the JHPIEGO's advanced family planning project plus the 5 project officers, 3 project supervisors and 2 project managers.

Table 3.1 Target population

Respondent type	Population
Project managers	2
Project supervisors	3
Project officers	5
Pharmacy superintendents	100
Total	110

3.3 Sample Design

A census was conducted for the pharmacy superintendents and project officers while purposive sampling was done for the key informants who among them are project supervisors and managers.

3.4 Data collection

A Key informant interview guide and a questionnaire were used in data collection with the researcher providing guidance where necessary. Questionnaires are advantageous as data collection instrument since they allow anonymity and privacy and therefore present a high likelihood of getting honest answers from respondents. In addition Questionnaires are inexpensive and less time consuming to administer. Moreover, use of questionnaires in survey

designs is stressed as they compress the information thereby reducing misrepresentation in the final analysis (Thomas & Goulart, 2018). Key informant interview guides have the advantage in that information given provide flexibility of exploring new ideas as they develop in the interview. Key informants may offer information on incidents and other happenings in their stories that the interviewer could not think of putting down in the interview guide.

To ensure that the respondents give valid answers, some principles of questionnaire and key informant interview guide construction was observed. Simple questions that are easy to understand, free from grammar: spelling and punctuation errors were applied. In addition, the questions were not biased or leading. The questionnaire was presented to the pharmacy superintendent at the community pharmacy and project officers. Meanwhile, the Key informant interview guide was presented to supervisors and managers. The participants were asked to answer the questionnaire, and then it was collected for analysis. For the reasons of ascertaining and evaluating the quality of the questionnaire, pilot testing to guarantee its reliability and validity was conducted. A questionnaire sample is in appendix 3. Project supervisors and managers were requested for appropriate time in their schedule for which the key informant interview can be conducted. A sample of the key informant interview guide can be found in appendix 4.

3.4.1 Piloting the Instruments

Pilot study could be seen as a burden in conducting a large scale study but researchers can realize benefits that outweigh the efforts in these investigations. A pilot study of the questionnaire and the interview guide was done to provide suitable feedback. The piloting was performed on a sample size of at least 10% of the total samples (Brooks, Reed & Savage, 2016). The questionnaires and an interview guide in pilot testing were carried out in a similar manner the full research was performed. The researcher therefore issued 13 questionnaires and one interview guide to corresponding respondents for pilot testing.

3.4.2 Validity of the instruments

The questionnaire and the interview guide were adjusted accordingly for accuracy and measurability of the collected data after pretesting. Colleagues and supervisor were requested to

examine the questionnaire for the purpose of critiquing it. The aim of the research was also made clear to the respondents to make sure they don't hold back on crucial information.

3.4.3 Reliability of the Instrument

Questionnaire and the interview guide reliability was done by reviewing and verifying the connotation of the specific questions as written in the questionnaire. In addition, the piloting was conducted on participants with similar attributes. Questions were rewritten for precision. Requisite levels of reliability were measured by use of Cronbach's Alpha. In social sciences research Reliability of about .7 or higher is regarded as appropriate (Cronbach, 1951; Brink & Hilla 2018).

3.5 Data Analysis

The information gathered was arranged, characterized, coded and then classified for simplicity of investigation. Version 21 of Statistical package for social sciences was applied in analyzing quantitative data; the frequencies were calculated. Reporting of the findings was done by applying descriptive and inferential analysis methods. Multiple linear regressions was applied for the model; $Y = \alpha + \beta 1X1 + \beta 2X2 + \beta 3X3 + \beta 4X4 + \varphi$

The analysis for qualitative data was based on the key informant interview guide. Analysis of qualitative data was done using narrative analysis of the themes.

Hypothesis testing was done to the null hypotheses at a significant level of 0.05.

Finally, tables were utilized in data presentation and a conclusion and recommendations were made.

3.5.2 Operationalization of Variables

The process of operationalization of variables defines and measures specific variables for the purpose of accurate replication of the research process (Daniel, 2012).

Table 3.2 Operationalization of Variables.

Objective	Independe	Indicators	Measu	Data analysis
	nt		rement	

	variables		of scale	
To establish the influence of stakeholder	Project identificati	Need assessment Scope	Ordinal and	Descriptive and inferential; mean,
participation in project	on	Roles assignment	Interval	standard deviation,
identification and				regression analysis
performance of family				and hypothesis testing
planning projects in				
Nairobi county, Kenya.				
To determine the	Project	Tasks Specification	Ordinal	Descriptive and
influence of stakeholder	planning	Scheduling	and	inferential; mean,
participation in project		Resource allocation	Interval	standard deviation,
planning and				regression analysis
performance of family planning projects in				and hypothesis testing
Nairobi county, Kenya.				
To establish the	Project	Activities	Ordinal	Descriptive and
influence of stakeholder	implementa	Risk mitigation	and	inferential; mean,
participation in	tion	Progress reporting	Interval	standard deviation,
implementation and				regression analysis
performance of family				and hypothesis testing
planning projects in				
Nairobi county, Kenya. To determine the	Duoisse	Coordination	Ondinal	Descriptive and
influence of stakeholder	Project monitoring	Feedback	Ordinal and	Descriptive and inferential; mean,
participation in	and	Control	Interval	standard deviation,
monitoring and	evaluation	Control		regression analysis
evaluation and				and hypothesis testing
performance of family				
planning projects in				
Nairobi county, Kenya.				
	Dependent variable			
	Performanc	Responsiveness	Ordinal	Descriptive and
	e of Family	Cost effectiveness	and	inferential; mean,
	Planning	Stakeholder	Interval	standard deviation,
	Projects	satisfaction		regression analysis
				and hypothesis testing

CHAPTER FOUR: DATA ANALYSIS RESULTS AND DISCUSSION

4.1 Introduction

A discussion of the outcomes of the collected data and its analysis about this research project, on influence of stakeholder participation and performance of advanced family planning project in community pharmacies in Nairobi is given on this chapter. The outcomes are demonstrated in here in table format.

4.2 Response Rate

Questionnaires provided to the participant were tallied to determine the response rate. The analysis details were recorded in table 4.1.

Table 4.1 Response Rate

Response	Frequency	Percentage
Returned questionnaires	88	80
Unreturned questionnaires	12	20
Total	110	100

The questionnaires that were filled and provided relevant information were 88 in number. Questionnaires that were not returned by the participants were 12. Consequently the response rate was 88 percent. Mugenda, 2003 found that a percentage of 70 percent or more means that the data collection and analysis was best achieved.

4.3 General information

Respondent's general information collected detailed their gender, years of practice and level of education.

4.3.1 Gender of the respondents

The respondent's gender is demonstrated in table 4.2

Table 4.2 Gender of the respondents

Gender	Frequencies	Percentage	
Male	68	62	
Female	42	38	
Total	110	100	

Respondents indicated their gender on the questionnaire, from which the results showed that 62% of the participants were male and 38% were female. This meant that the research constituted of both genders. Men were more, representing the higher number of men in social-economic activities. From the study the ratio of women to men (0.61) was low as a ratio of 1 is more desirable (Lynn P.N. 2022)

4.3.2 Respondent's level of education

Level of education of the participants was reported as recorded in table 4.3.

Table 4.3 Level of education respondent's

Level	Frequency	Percentage
Post graduate	12	14
Bachelor's Degree	30	34
Diploma	46	53
Total	88	100

Respondents indicated that 53% of them had diplomas 34% of them had bachelor's degree and 14% of them had post graduate level of education. Consequently, the collected data was from well informed and literate respondents with a high understanding of the objectives of the research.

4.3.3 Respondent's years of practice

Respondent's years of practice is summarized and recorded in table 4.4

Table 4.4 Respondent's years of practice

Years	Frequency	Percentage	
Above 10 years	38	43	
Between 5 and 10 years	34	39	
Under 5 years	16	18	
Total	88	100	

Respondents indicated their years of practice, where 43% had been in pharmacy practice for over 10 years, 39% had been in pharmacy practice for between 5 and 10 years and 18% had been in pharmacy practice for less than 5 years. Consequently, this stipulated that the respondents had a good understanding on stakeholder participation on family planning projects.

4.4 Stakeholders participation and performance of family planning projects data analysis.

Respondents rated stakeholder participation and performance of family planning projects on a scale of one to five units, where 5 indicates Very great extent, 4 indicates Great extent, 3 indicates Neutral, 2 indicates low and1denotes very low extent .The results applied in calculating the standard deviation and mean in each category. These results are presented in tables followed by the discussion of the outcomes.

4.4.1 Stakeholders participation in identification of the project and performance of Advanced Family Planning project in community pharmacies in Nairobi County.

Project identification involves activities that assess the feasibility of a project. Consequently, communication and engagement with the stakeholders for their input in the AFP initial stages was paramount.

Table 4.5 Stakeholders participation in identification of the project

Stakeholders participation in identification of the project	Mean	Standard	
		Deviation	
Stakeholder communication for engagement is carried out	4.70	0.72	
Stakeholders participate in need assessment	4.58	0.81	
Scope of work is identified with the contribution of stakeholders	4.77	0.94	
Timeline for deliverables is agreed on by stakeholders	4.24	0.86	

Composite	4.59	0.79	
Responsibilities are shared among the stakeholders	4.67	0.68	
Stakeholders participate in roles identification	4.57	0.77	

Respondent ascertained that stakeholder communication was carried out with a mean of (4.7, 0.72), scope of work was identified and responsibilities shared among stakeholders to a great extent with a mean; (4.77, 0.94) and (4.67, 0.68) each. Meanwhile, the three indicators were above the composite mean of 4.59. Moreover, respondents concurred that to great extent stakeholders participated in role identification; need assessment and agreeing for timelines for deliverables.

In general stakeholders participated in identification of the project and performance of Advanced Family Planning project in community pharmacies to a great extent in Nairobi with a composite mean; 4.59. "Participation by stakeholders in the identification stage was done to a great extent as it was crucial since it determined the accomplishment or non-performance of the project including inability to start the works of the said project", said one of the project managers in the key informant guide.

The findings concurred with Binanga (2016) where stake holder involvement, among them pharmacist participated in identifying areas in which they would improve family planning uptake in Kinshasa Congo. The findings also agreed with Magassouba (2019) in development projects, performance in Guinea; in project identification stakeholders make requisite specifications incorporated on the project and select the most favorable project after doing the need assessment of the community or organization.

4.4.2 Stakeholders participation in planning of the project and performance of Advanced Family Planning project in community pharmacies in Nairobi County

Project planning involves work plans, schedules and budgeting. Participation of stakeholders in contribution of ideas and resources is required for the smooth running of the project.

Table 4.6 Stakeholders participation in planning of the project

Stakeholders participation in planning of the project	Mean	Standard	
		Deviation	
Task specification is done with stakeholder contribution	4.23	0.66	
Stakeholders are involved in Work break down	4.08	0.79	
Stakeholders are involved in work scheduling	4.07	0.75	
Stakeholder contribute in resource allocation	4.20	0.70	
Stakeholders participate in drawing the project budget	3.99	0.58	
Stakeholders contribute in securing donor funding	3.96	0.64	
Composite	4.09	0.68	

Table 4.6 indicates that task specification was done with stakeholder contribution to a great extent shown by the average mean of (4.23) as well as Stakeholder contribution in resource allocation with a mean of (4.20). Stakeholders were involved in Work break down with a mean of (4.08, 0.79). Stakeholders were involved in work scheduling with a mean (4.07, 0.75). Stakeholder participated in drawing the project budget (3.99, 0.58). Finally Stakeholders contribute in securing donor funding with a mean of (3.96, 0.64)

Overall stakeholders participated in project planning and performance of Advanced Family Planning project in community pharmacies to a great extent in Nairobi with a composite mean average of 4.09. According to the informants there were many meetings and training sessions in the planning stage as the managers supervisors, project officers sought to gather the best work plan as possible.

The findings concurred with Duodu, 2021; stakeholder participation in the family planning uptake in krachi west district Ghana, the planning phase includes assigning roles and duties of stakeholders, creating the work breakdown structure (WBS) and schedule, forecasting of the resources, time and cost for the project. According to Binanga, 2016 in the piloting of Sayana press injectables at the grass root level in Kinshasa at the planning stage included stakeholder's involvement.

4.4.3 Stakeholders participation in implementation of the project and performance of Advanced Family Planning project in community pharmacies in Nairobi County

Project implementation involves carrying activities set during project identification and project planning. Stakeholder participation in this phase contributes to the progress of the project as well as mitigates unforeseen risks.

Table 4.7 Stakeholders participation in implementation of the project

Stakeholders participation in implementation of the project	Mean	Standard
		Deviation
Stakeholders share work in project activities during	4.50	0.80
implementation		
Stakeholders make decisions on how to handle risks	4.33	0.78
Stakeholders carry out the work given to them during	4.05	0.85
implementation		
Stakeholders take care of cost overruns	3.60	0.67
Progress reporting is done with the contribution of stakeholders	4.77	0.96
Stakeholders act on the progress reports during implementation	4.89	0.80
Composite	4.36	0.81`

Table 4.7 recorded that participants agreed to a great extent that stakeholders act on the progress reports during implementation with a mean of (4.89, 0.80). The participants also concurred to a great extent that Progress reporting is done with the contribution of stakeholders with a mean of (4.77, 0.96). Further, respondents ascertained that stakeholders share work in project activities during implementation with a mean of (4.50, 0.80). The mean of the above three indicators was above the weighted average and the implication was that stakeholders participated to a great extent in those three areas. Stakeholders participation in making decisions on how to handle risks carrying out the work given to them during implementation taking care of cost overruns was also done to great extent with means of (4.33, 0.78) (4.05, 0.85) and (3.60,0.67).

Overall stakeholders participated in project planning and performance of Advanced Family Planning project in community pharmacies to a great extent in Nairobi with a composite mean; 4.09. Key informants concurred that stakeholders participated in the project in all the activities during project execution.

The findings concurred with Magassouba (2019) that stakeholder's participation support implementation to great extent. Kipkoech (2022) reiterated that in the project implementation phase, Stakeholder participation is crucial to the outcomes of projects. According to Binanga,

2016, she asserts that stakeholder participation in family planning projects implementation is vital to convert the objective and plans for programs to fruition.

4.4.4 Stakeholders participation in monitoring and evaluation of the project and performance of Advanced Family Planning project in community pharmacies in Nairobi County

Project monitoring and evaluation involves activities geared towards coordination, feedback and taking control of the project deliverables for successful results in accordance with the project plan. Stakeholder participation is crucial for any adjustments needed for the work in progress.

Table 4.8 Stakeholders participation in monitoring and evaluation of the project

Stakeholders participation in monitoring and evaluation of	Mean	Standard
the project		Deviation
Coordination of project activities involves stakeholders	4.18	0.68
Communication is done on project activities to the stakeholders	4.02	0.65
Stakeholders participate in giving Feedback on project progress	4.10	0.72
Stakeholders participate in posting the uptake of FP injectables	4.80	0.95
on ODK app		
Stakeholders participate in controlling the outcome of the project	3.70	0.62
Stakeholders participate in adjustments for improvements	3.90	0.75
Composite	4.12	0.73

According to table 4.8 respondents the two indicators that stakeholder participated in more than others in monitoring and evaluation category were, posting the uptake of FP injectables on ODK app with a mean of (4.80, 0.95) and coordination of project activities with a mean of (4.18, 0.68). Respondents also ascertained that stakeholders participated in giving Feedback on project progress with a mean of (4.10, 0.72). Moreover, stakeholders participated in adjustments for improvements with a mean of (3.90, 0.75) communication on project activities to the stakeholders was done at a mean of (4.02, 0.65).

In general stakeholder participated in project tracking and performance of Advanced Family Planning project in community pharmacies to a great extent in Nairobi with a composite mean; 4.12. According to key informants the stakeholders participated to a great extent during project tracking of this project.

The findings concurred with Binanga (2016) where stakeholders supported monitoring and evaluation process by controlling, and assessing the program inputs plans and implementation programs. Planned works were compared with actual outcomes to determine the results of the project in family planning. According to Duodu, 2021, participation of stakeholders in project tracking greatly affects quality of the project.

4.5 Performance of Advanced Family Planning project in community pharmacies in Nairobi County

Table 4.9 Performance of Advanced Family Planning project

Performance of Family Planning Projects	Mean	Standard
		Deviation
Customers use the family planning commodities made available by	4.24	0.88
the project		
There is cost saving in the process of acquiring family planning	4.40	0.76
commodities		
The stakeholder are satisfied by the project	4.22	0.89
There is time saving in the process of acquiring family planning	4.45	0.65
commodities		
There is easier access of family planning commodities	4.33	0.60
There is added choices of family planning commodities	4.38	0.73
Composite	4.25	0.75

Looking at performance of Advanced Family Planning project in community pharmacies in Nairobi County, cost saving, time saving and added choices of family planning commodities are the three indicators that respondents agreed that stakeholder participation had a positive significant influence on. Cost saving had mean and standard deviation of (4.40, 0.76), time saving (4.45, 0.65), and added choices (4.38, 0.73) respectively. In addition there were high mean in project success in making access of family planning commodities easier at (4.33 0.60) and consequently customers were using them. Finally respondents agreed that the stakeholders were contented with the outcome of the project having a mean of (4.22, 0.89).

Overall performance of Advanced Family Planning project in community pharmacies in Nairobi County had a weighted mean of 4.25. A great number of the respondents strongly concurred that stakeholder participation enhanced performance of family planning project. Clients at the

grassroots where the community pharmacies are open for long hours accessed added choices of contraceptives among them contraceptive injectables, easily.

The findings agreed with Binanga, 2016, that the critical success factor for performance for family planning is stakeholder participation in project implementation, identification, tracking and planning,. According to Duodu, 2021, stakeholders in the project must be devoted in carrying out their roles for positive performance of the entire project. Measurement of family planning project success includes the responsiveness from clients and easier access of the family planning commodities.

4.6 Regression Analysis

A multiple regression was applied as demonstrated below;

$$Y = \alpha + \beta 1X1 + \beta 2X2 + \beta 3X3 + \beta 4X4 + e$$

Y denotes Family Planning Projects Performance

α denotes the Constant Term,

X1 denotes the participation of stakeholders in identification of the project

X2 denotes the participation of stakeholders in planning of the project

X3 denotes the participation of stakeholders in implementation of the project

X4 denotes the participation of stakeholders in monitoring and evaluation of the project

Table 4.10 Summary of the Model

Model					
	R	R square	Adjusted R	Std Error of	Sig
			Square	the Estimate	
1	.866a	.742	.709	.533	001

The model indicated that $R^2 = 0.742$ and therefore the predictors have a strong effect on performance of Advanced Family planning project in community pharmacies in Nairobi Kenya.

The model also indicates Adjusted $R^2 = 0.709$ which suitability of the independent variables used in the study.

4.6.1 ANOVA

The variance was calculated as demonstrated by table 4.11

Table 4.11 ANOVA

Model		Sum	of	df	Mean	F	sig
		square			square		
	Regression	18.624		4	4.281	12,544	$.000^{a}$
	Residual	61.998		96	.632		
	Total	80.622		100			

Independent variables were; Participation of stakeholders in identification of the project, in planning of the project, in implementation of the project and in monitoring and evaluation of the project are denoted by a.

Performance of Advanced Family planning project in community pharmacies in Nairobi Kenya is denoted by b.

The regression analysis was proven to be working effectively with F ratio of 3.342= 12544, p<0.05 at 95% confidence level.

Table 4.12 Analysis of Regression Coefficients

Coefficients			Unstanda	rdized	Standardize	t	Sig
			coefficie	nts	d		
					coefficients		
			В	Std.	Beta		
				Error			
1(Constant)			3.001	.867		7.899	.001
Stakeholder	participation	in	.265	.198	.144	2.984	.001
project identi	fication						
Stakeholder	participation	in	.398	.167	.234	6.203	.000
project planni	ing						

Stakeholder	participation	in	.435	.1	134	.298	5.987	.000
project imple	ementation							
Stakeholder	participation	in	.635	.1	155	.345	7.564	.001
project	monitoring	and						
evaluation								

The predictors; Participation of stakeholders in identification of the project, in planning of the project, in implementation of the project and in monitoring and evaluation of the project are denoted by a.

Performance of Advanced Family planning project in community pharmacies in Nairobi Kenya b denotes is denoted by b.

$$Y=3.001+265X_1+.398X_2+.435X_3+635X_4+e$$

Unstandardized coefficients beta indicated that the dependent variable varied in that for each unit of increased participation of stakeholder in the identification of the project will prompt an increase of 0.265 in performance of Advanced Family planning project in community pharmacies in Nairobi Kenya. Moreover, an increase in one unit of participation of stakeholders in planning of the project, implementation of the project and monitoring and evaluation of the project could advance performance of Advanced Family planning project in community pharmacies in Nairobi Kenya by 0.398, 0.435 and 0.635 respectively

From the analysis the outcomes demonstrated that there was a significantly positive link with the performance of Advanced Family planning project in community pharmacies in Nairobi Kenya and stakeholders participation in the project identification (001)p<0.05. Further, stakeholder participation in project planning (.000) p<0.05 had a significantly positive link in the performance of Advanced Family planning project in community pharmacies in Nairobi Kenya. Stakeholder participating in project implementation (.000) p<.05 and stakeholder participating in monitoring and evaluation of the project (.001) p< .05 also had a significantly positive link with the performance of Advanced Family planning project in community pharmacies in Nairobi Kenya.

The analysis rejected the null hypotheses H01; participation of stakeholders in identification of the project does not significantly influence performance of family planning projects in Nairobi (0.001p<0.05). The analysis rejected the second hypothesis H02; participation of stakeholders in planning of the project does not significantly influence performance of family planning projects in Nairobi (0.001p<0.05). Furthermore, H03; participation of stakeholders in implementation of the project does not significantly influence performance of family planning project in Nairobi was also rejected (0.001p<0.05). Finally, H04; participation of stakeholders in monitoring and evaluation of the project do not significantly influence of performance of family planning projects in Nairobi (0.002p<0.05) was rejected too.

Standardized coefficients beta indicated that with a unit increment of participation of stakeholder in identification of the project, it will improve the performance of Advanced Family planning project in community pharmacies in Nairobi Kenya by 0.144. One unit increment of stakeholder participation in project planning will improve performance by 0.234, then 0.298 and 0.345 for stakeholder participation in implementation of the project and participation of stakeholder in monitoring and evaluation of the project, respectively.

CHAPTER FIVE: SUMMARY CONCLUSION AND RECOMMEDATION

5.1 Introduction

The discussion in this chapter is about data findings on stakeholder participation and performance of Family Planning projects: A case of Advanced Family planning project in community pharmacies in Nairobi. Further, a summary of the concluded results and future recommendations for research are discussed.

5.2 Summary of Findings

Main aim of this research primarily was to examine stakeholder participation and performance of Family Planning projects and in particular Advanced Family planning project of community pharmacies in Nairobi County, Kenya.

5.2.1 Stakeholders Participation in Project Identification Influence Performance of Family Planning Projects

Assertion from this research was that indeed stakeholder participation in project identification influenced performance of family planning projects to a great extent. The composite mean; 4.59 supported this conclusion. The study showed that communication to stakeholder, identifying scope of work and sharing responsibilities among stakeholders were some of the activities that carried more weight in project identification. Further, it was found that respondents concurred that to great extent that stakeholders participated in role identification; need assessment and agreeing for timelines for deliverables.

According to regression analysis done on the study, it emerged that stakeholder participating in activities in project identification has a significantly positive influence in performance of family planning projects (β 1=.265, p=001<0.05). The analysis therefore prompted the rejection of the null hypothesis: H01 Stakeholder participation in project identification does not significantly influence performance of family planning projects in Nairobi.

5.2.2 Stakeholders Participation in Project Planning Influence Performance of Family Planning Projects

Assertion by the study was that the participation stakeholder in project planning influenced the performance of family planning projects to a great extent in Nairobi, with a composite mean; 4.09. Among indicators most significant in influencing the performance of family planning projects were participation of stakeholder in task specification and Stakeholder contribution in resource allocation. The study also established that stakeholders' involvement in Work break down, work scheduling, drawing the project budget and securing donor funding influenced performance of family planning projects in Nairobi County to a great extent.

Data analysis revealed that stakeholder participating in project planning was significantly positive to the performance of family planning projects ($\beta1$ =.398, p=000<0.05). Consequently the analysis prompted the rejection of the null hypothesis: H02 Stakeholder participation in project planning does not significantly influence performance of family planning projects in Nairobi.

5.2.3 Stakeholders Participation in Project Implementation Influence Performance of Family Planning Projects

This research demonstrated that stakeholder participating in project implementation influenced the performance of family planning projects to a great extent in Nairobi with a composite mean; 4.36. There were three indicators that were highly rated to influence the performance of family planning projects to a great extent. Firstly, stakeholders participation on acting on the progress reports, secondly participation in progress reporting and thirdly stakeholders share work in project activities during implementation with a mean; 4.89, 4.77 and 4.50 each. Participants further ascertained that stakeholders' participation in making decisions on how to handle risks carrying out the work given to them during implementation taking care of cost overruns was also done to a great extent

The data analysis demonstrated that stakeholder participation in project implementation had a significant positive influence on the performance of family planning projects (β 1=.398, p=000<0.05). Further, the analysis prompted the rejection of the null hypothesis: H03 Stakeholder participation in project implementation does not significantly influence performance of family planning projects in Nairobi.

5.2.4 Stakeholders Participation in Project Monitoring and Evaluation Influence Performance of Family Planning Project.

Research conducted demonstrated that stakeholder participating in project monitoring and evaluation influenced the performance of family planning projects in Nairobi County to a great extent with a composite mean; 4.12. There were two indicators that stakeholder participated in more than others in monitoring and evaluation category. Firstly, posting the uptake of FP injectables on ODK app with a mean of and secondly coordination of project activities with a composite mean; (4.80, 0.95) (4.18, 0.68) respectively. Respondents also ascertained that stakeholders participated in giving Feedback on project progress with stakeholders participated in adjustments for improvements communication on project activities to the stakeholders was done to a great extent.

According to the results of the analysis its seen that stakeholder participating in project monitoring and evaluation was having a significant positive influence on the performance of family planning projects (β 1=, p=.635, 001<0.05). Further, the analysis prompted the rejection of the null hypothesis: H04 participation of stakeholders in project monitoring and evaluation does not significantly influence performance of family planning projects in Nairobi.

5.3 Conclusion

The conclusion for this study was that stakeholder participation in project identification influence performance of family planning projects to a great extent. With stakeholder participation need assessment is done, scope of work identified and timeline for deliverables agreed upon. In addition roles and responsibilities are identified and shared among the stakeholders.

Participation of stakeholders in project planning influence performance of family planning projects to a great extent. Stakeholders participate in task specification, work break down and work scheduling. Further, stakeholders participate in resource allocation, drawing the project budget and securing donor funding.

Stakeholders Participation in project implementation influence performance of family planning projects to a great extent. Stakeholders share work in project activities, make decisions on how to

handle risks and take care of cost overruns. Moreover, Progress reporting and taking actions on the report is done with the participation of stakeholders.

Stakeholders Participation in project monitoring and evaluation, influence performance of family planning projects to a great extent. Coordination of project activities involves stakeholders. Stakeholders participate in giving Feedback on project progress, posting the uptake of FP injectables on ODK app, controlling the outcome of the project and making adjustments for improvements.

Participation of stakeholder throughout the project cycle enhances performance of family planning projects to a great extent. Customers use the family planning commodities made available by the project. There is cost and time saving in the process of acquiring family planning commodities. The stakeholders are satisfied by the project. There is easier access and added choices of family planning commodities.

5.4 Recommendation

Introduction of injectables in community pharmacies has made women access an added choice of contraceptive easily. The Kenyan government through the ministry of health should strengthen public–private stakeholder partnerships, in developing capacity of health workers in contraception delivery methods. The move should be designed to enable expeditious transfer of all family planning delivery methods skills in the health system through family planning projects. Community pharmacists should be engaged and given on-job training on all other family planning methods. Community pharmacies should then be allowed to provide these family planning services at the grass root levels closer to the underserved areas.

This study recommended the integration of stakeholder participation throughout the family planning project cycle to enhance performance. In all the phases stakeholders among them pharmacist at the community pharmacies should be communicated to, about the initiation, progress and expected outcomes of the family planning projects. Moreover, adequate support should be given to the stakeholders in the process of onboarding new family planning methods.

This study recommends using descriptive survey research design, through the use of both key informant interviews and questionnaires since it proved to be very useful in gathering relevant

information. Moreover, multiple linear regression and ANOVA facilitated accuracy in analyzing in the results of the collected data. The findings pointed out new knowledge in the direction of engaging more stakeholders to participate in family planning projects to improve family planning services delivery. Additionally, introducing more family planning methods to the grass root gives women easier access and added choices resulting to increased uptake of modern family planning.

5.5 Recommendation for Further Studies

Research on other areas such as challenges of implementation of family planning projects in community pharmacies in Nairobi County is recommended. In addition, a study on opportunities of on - job training on family planning project participation of pharmacist at the community pharmacies should be carried out. Moreover, a study on problems that lock out community pharmacist as stakeholders to onboard family projects in supplying all types of family planning services is recommended.

REFERENCES

- Banda, R. K., & Pretorius, L. (2016). The effect of scope definition on infrastructure projects: A case in malawi's public and private implementing agencies. The South African Journal of Industrial Engineering, 27(4), 203–214. https://doi.org/10.7166/27-4-1562
- Baruwa, S., Tobey, E. & Okafor, E. (2022). The role of job aids in supporting task sharing family planning services to community pharmacists and patent proprietary medicine vendors in Kaduna and Lagos, Nigeria. BMC Health Serv Res 22, 981 (2022). https://doi.org/10.1186/s12913-022-08360-0
- Bryson, J. M., Quick, K. S., Slotterback, C. S., & Crosby, B. C. (2013). Designing public participation processes. Public administration review, 73(1), 23-34.
- Chang, Y. (2013). Performance measurement and adoption of balanced scorecards: a survey of municipal governments in the USA and Canada, International Journal of Public Sector Management, 17 No.3, pp.204-21.
- Duodu E.O. (2021) Stakeholder engagement and its influence on family planning uptake: a case of krachi west district Ghana
- Gillespie, D., Hawks Cuellar, M., Whitmarsh, S., Bodenheimer, A., & Karklins, S. (2016). Connecting Global Goals to Local Priorities. Global Health Governance, 10(3).
- Gomes J, Romão M. (2018) Information System Maturity Models in Healthcare. J Med Syst. 2018 Oct 16;42(12):235. Doi`: 10.1007/s10916-018-1097-0. PMID: 30327955.
- Gonsalves L, Wyss K, Gichangi P, Say L, Martin Hilber A (2019) Regulating Pharmacists as Contraception Providers: A qualitative study from Coastal Kenya on injectable contraception provision to youth. PLoS ONE 14(12): e0226133. https://doi.org/10.1371/journal.pone.0226133
- Götmark, F., Andersson, M. Human fertility in relation to education, economy, religion, contraception, and family planning programs. BMC Public Health 20, 265 (2020). https://doi.org/10.1186/s12889-020-8331-7
- Jane T Bertrand & Arsene Binanga (2016). Pilot Research as Advocacy: The Case of Sayana Press in Kinshasa, Democratic Republic of the Congo Global Health: Science and Practice Dec 2016, 4 (4) 542-551; DOI: 10.9745/GHSP-D-16-00236
- JHPIEGO (2021). https://www.jhpiego.org/countries-we-support/kenya
- Kalibala S, Nutley T. Engaging Stakeholders, from Inception and Throughout the Study, is Good Research Practice to Promote use of Findings. AIDS Behav. 2019 Sep; 23 (Suppl 2):214-219. Doi: 10.1007/s10461-019-02574-w. PMID: 31270641; PMCID: PMC6773669.

- Kenya National Bureau of Statistics, Ministry of Health/Kenya, National AIDS Control Council/Kenya, Kenya Medical Research Institute, Population NCf, Development/Kenya (2015) Kenya Demographic and Health Survey 2014. Rockville, MD, USA
- Magassouba, Tambi, Malek A., Alkhlaifat, Baker and Abdullah, Aziz A. (2019).Influence of Stakeholders Involvement on Development Project Performance in Guinea (January 22, 2019). International Journal of Academic Research in Business and Social Sciences, 9(1), 1111–1120, 2019, Available at SSRN: https://ssrn.com/abstract=3514461
- Ministry of Health/Kenya (2018) National Family Planning Guidelines for Service Providers, 6th edn. Reproductive and Maternal Health Services Unit (RMHSU), Division of Family Health, Ministry of Health Kenya, Nairobi, Kenya.
- Ministry of Health/Kenya (2021) National Council for Population and Development; Draft Action Plan for Addressing Adolescent Health and Teenage Pregnancy in Kenya
- Namukunda, P. S., & Ogolla, K. (2016). Factors affecting implementation of family planning projects by Non–Governmental organizations in Kenya. International Journal of Scientific and Research Publications, 6(5).
- Njogu, E. M. (2016). Influence of stakeholder's involvement on project performance: a case of NEMA automobile emission control project in Nairobi County [Unpublished MBA project] University of Nairobi, Kenya.
- Olwande C.J. (2017). Stakeholder engagement and performance of the antiretroviral therapy supply chain project by national aids and sexually transmitted infections control program in health facilities, Kenya [Unpublished MBA project] Kenyatta University
- Pharmacy & Poisons Act Kenya (2012) http://kenyalaw.org:8181/ exist/kenyalex/ actview.xql? actid=CAP.%20244
- Zahedi S (2019) Sustainable Development Theory: A Critical Perspective and an Integrative Model Journal of Economics and Sustainable Development www.iiste.org ISSN 2222-1700 (Paper) ISSN 2222-2855 (Online) Vol.10, No.21, 2019

APPENDICES

Appendix 1: Letter of Introduction to Respondents



UNIVERSITY OF NAIROBI

FACULTY OF BUSINESS AND MANAGEMENT SCIENCES

OFFICE OF THE DEAN

Telegrams: "Varsity", P.O. Box 30197-00100, G.P.O.

Telephone: 020 491 0000 Nairobi, Kenya

VOIP: 9007/9008 Email: fob-graduatestudents@uonbi.ac.ke

Mobile: 254-724-200311 Website: business.uonbi.ac.ke

Our Ref. L50/39234/2021 October 04, 2023

National Commission for Science, Technology and Innovation NACOSTI Headquarters Upper Kabete, Off Waiyaki Way P. O. Box 30623- 00100

NAIROBI

RE: INTRODUCTION LETTER: ANNASTASIAH NGUNJIRI

The above named is a registered Masters of Arts in Project Planning and Management candidate at the University of Nairobi, Faculty of Business and Management Sciences. She is conducting research on "STAKEHOLDER PARTICIPATION AND PERFORMANCE OF FAMILY PLANNING PROJECTS IN KENYA: A CASE OF THE ADVANCED FAMILY PLANNING PROJECT IN COMMUNITY PHARMACIES IN NAIROBI COUNTY, KENYA."

The purpose of this letter is to kindly request you to assist and facilitate the student with necessary data which forms an integral part of the Project.

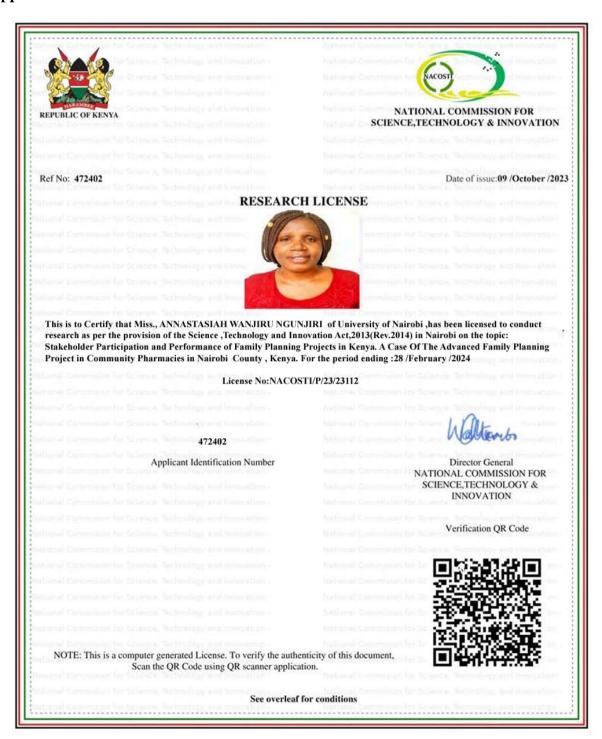
The information and data required is needed for academic purposes only and will be treated in **Strict-Confidence**.

Your co-operation will be highly appreciated.

Dean's Office
University of Nairobi
Faculty of Business
and Management Science
D A Rox 30197-00100, Nairobi

PROF. JAMES NJIHIA
DEAN, FACULTY OF BUSINESS AND MANAGEMENT SCIENCES

Appendix 2: License for Research



Appendix 3: Questionnaire

This document is meant to gather relevant information for scholastic reasons. Information given would be used for this research only and would be made available to the respondent upon request for a copy of the findings. The research is about Stakeholder Participation and Performance of Family Planning Projects in Nairobi.

Instructions

- 1) Please do not write any personal information in this questionnaire
- 2) Kindly respond to all parts as required
- 3) Kindly place a tick on the black space ($\sqrt{}$) inside the box as required by the different questions.
- 4) The information gathered is confidential

SECTION 1: GENERAL INFORMATION

1.	Gender
2.	Level of education
3.	Number of years of practice

SECTION 2: EFFECT OF STAKEHOLDERS PARTICIPATION ON PERFORMANCE OF FAMILY PLANNING PROJECTS

4. Kindly rate the influence of stakeholder participation and performance of family planning projects. Rate your response on a scale of one to five units, where 5 means Very great extent, 4 means Great extent, 3 means Neutral, 2means low, 1means very low extent

Stakeholders participation in identification of the project	5	4	3	2	1
Stakeholder communication for engagement is carried out					
Stakeholders participate in need assessment					
Scope of work is identified with the contribution of stakeholders					
Timeline for deliverables is agreed on by stakeholders					
Stakeholders participate in roles identification					
Responsibilities are shared among the stakeholders					

Stakeholders participation in planning the project	5	4	3	2	1
Task specification is done with stakeholder contribution					
Stakeholders are involved in Work break down					
Stakeholders are involved in work scheduling					
Stakeholders participate in drawing the project budget					
Stakeholder contribute in resource allocation					
Stakeholders contribute in securing donor funding					

Stakeholders participation in implementation of the project	5	4	3	2	1
Stakeholders share work in project activities during implementation.					
Stakeholders carry out the work given to them during implementation					
Stakeholders make decisions on how to handle risks					
Stakeholders take care of cost overruns					
Progress reporting is done with the contribution of stakeholders					
Stakeholders act on the progress reports during implementation					

Stakeholders participation in monitoring and evaluation of the project	5	4	3	2	1
Coordination of project activities involves stakeholders					
Communication is done on project activities to the stakeholders					
Stakeholders participate in giving Feedback on project progress					
Stakeholders participate in posting the uptake of FP injectables on ODK app					
Stakeholders participate in controlling the outcome of the project					
Stakeholders participate in adjustments for improvements					

Performance of Family Planning Projects	5	4	3	2	1
Customers use the family planning commodities made available by the					
project					
There is cost saving in the process of acquiring family planning					
commodities					
The stakeholder are satisfied by the project					
There is time saving in the process of acquiring family planning					
commodities					
There is easier access of family planning commodities					
There is added choices of family planning commodities					

Appendix 4: Key Informant Interview Guide

This document is meant to gather relevant information for scholastic reasons. Information given would be used for this research only and would be made available to the respondent upon request for a copy of the findings. The research is about Stakeholder Participation and Performance of Family Planning Projects in Nairobi.

- 1. How did the Stake holder participate in the project identification?
- 2. How did the Stake holder participate in the project planning?
- 3. How did the Stake holder participate in the project implementation?
- 4. How did the Stake holder participate in the project monitoring and evaluation?

- 5. How did the Stakeholder participation enhance Customers responsiveness to the family planning commodities made available by the project?
- 6. How did the Stakeholder participation enhance cost saving in the process of acquiring family planning commodities?
- 7. How did the Stakeholder participation enhance easier access of family planning commodities?
- 8. How did the Stakeholder participation enhance added choices of family planning commodities at the pharmacies?