

**FACTORS INFLUENCING EFFECTIVE IMPLEMENTATION OF HEALTH
PROJECTS: A CASE OF AMREF HEALTH AFRICA IN KENYA**

BY

ELIZABETH WANJIRU MAINA

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DECLARATION

I declare that this is my original work and has not been submitted to any other college, institution or university other than the University of Nairobi.

Signature: _____ **Date:** _____

Elizabeth .W. Maina

L50/70364/2013

This research project report has been presented for examination with my approval as the appointed supervisor.

Signature: _____ **Date:** _____

Mrs. Joyce Githae

Department of Extra Mural Studies

University of Nairobi

DEDICATION

I wish to dedicate this work to my Dad Mr. Peter Chege and my brother Bernard for their immense support and encouragement during the entire program. May God bless them abundantly.

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LIST OF ABBREVIATIONS AND ACRONYMS

- AIDs:Acquired Immunodeficiency Syndrome
- AMREF:African Medical Research Foundation
- C.D.F:Community Development Fund
- HIV:Human Immunodeficiency Syndrome
- MDGs:Millennium Development Goals
- P.I.P:Project Implementation Profile
- SPSS:Statistical Package for Social Sciences
- TB:Tuberculosis

ABSTRACT

The purpose of this study was to determine the factors that influence effective implementation of health projects with a key focus on AMREF Health Africa in Kenya. The study was guided by the following research questions -how does stakeholder's engagement influence implementation of health projects at AMREF Health Africa in Kenya? , how does donor funding influence the implementation of health projects at AMREF Health Africa in Kenya? , how does organizational structure influence implementation of health projects at AMREF Health Africa in Kenya?, how does utilization of strategy influence implementation of health projects at AMREF Health Africa in Kenya? A descriptive survey research design was adopted, with AMREF Health Africa in Kenya being the focus organization. The population for the study comprise of employees working at AMREF Health Africa in Kenya (those implementing projects) since this is the organization under study. The study target population comprised a total of 300 employees who were at the frontline in the implementation of various projects. Stratified random sampling technique was be used to draw a sample size of 70 respondents. The data collection instrument was a tailor-made structured questionnaire developed by the researcher, specifically for this study. A set of descriptive statistics of frequency and mean tables were used to present the results of the study. Computation and data processing was done using Statistical Package for Social Scientists (SPSS) version 20. The study found that donor funding was critical in ensuring effectiveness in implementing health projects. The study noted that the most influential factor in creating donor confidence in funding was the financial accountability, as good financial propriety demonstrated commitment to standards and work ethics. The study also established that project use of strategy was vital in ensuring seamless project execution. The main determinant was formulation and it was noted that, best practise in developing use of strategy was to undertake it at the project planning phase. The study established that organisation structure was critical in project implementation as it informed the personnel distribution on different units of project implementation team. The study finally established that for effective project implementation it was vital to ensure stakeholders engagement throughout the course of the project.

CHAPTER ONE

INTRODUCTION

1.1 Background of the Study

Projects implementation is usually open to all sorts of external influence, unexpected events, ever growing requirements, changing constraints and fluctuating resource flows. This clearly shows that if projects are applied and steps are not taken in order to manage them effectively and efficiently, the chances of failure are high (Pinto, 2000). In 1994, the Standish group a renowned market research and advisory firm in the United States reported that only 9 per cent of projects in large companies were successful. The study attributed projects inefficiencies to lack of project management skills, scope creep, poorly defined objectives, high staff turnover, insufficient resources, poor follow up, insufficient authority given to the project managers and lack of adoption of a common project management method by the project team.

Mosley and Marion (2007) identified various factors that inhibit projects effectiveness; inadequate funding, wrong timing in funds disbursement, lack of or inadequate human resource capacity in terms of knowledge and skills, lack of accountability that is overstatement of prices and use of substandard materials ,insecurity, disagreements among beneficiaries, and social-cultural obstacles. The effectiveness of most health projects is determined by both technical and managerial capacity of the human resources of the implementing agencies. In addition, appropriate supportive infrastructure is a necessity. Traditionally, project success was measured using three basic objectives that is time, performance and cost (Dennis 2010).

The project life cycle is very detrimental for effective project implementation. Life cycle is for instance used to explain the rise or demise of an organization or a product. The same life cycle concept is applied by project managers in helping them conceptualize the work and budgetary requirements that are fundamental in ensuring project success (Bredillet, 2005). Initial project definition is the time in the projects life cycle when the foundation for success or failure of a project are laid-early task analysis and decisions made by the project team form part of the foundation. If the project is incorrect, inadequately defined or the strategy and risk assessment are wrong, failure is inevitable (Strasser 2009)

Despite economic gains, health challenges continue, including increasing demand for health services at the community level and in turn, decentralizing services to communities. There are marked differences in health and economic status between different regions of Kenya. According to Kenya Vision 2030, the greatest challenges facing the health sector in Kenya are; inadequate funding to support planned rehabilitations of health facilities, limited capacity in procurement building and supervision, inefficient supply chain management system, matching supply of skilled human resources with the high rising demand for public health services, compounded by high population growth rate and lack of data and information on community health. One of the social pillars seeks to incorporate rehabilitation of county health facilities as a social pillar which will aim at offering integrated and comprehensive healthcare to the society which the government has embarked on development of health facilities in some parts of the country (Kenya Vision 2030).

AMREF Health Africa was officially founded in 1957 to deliver mobile health services and to provide mission hospitals with surgical support. Training and education for rural health workers was a major part of the organizations efforts. This included the development of health learning materials. During the late 1970s, AMREF Health Africa continued providing mobile clinical and maternal child/health (MCH) services. It also started to focus on community-based health care (CBHC) and training community health workers to deliver primary health care in closer collaboration with the ministries of health in the regions and in cooperation with international aid agencies. Greater emphasis was given to strengthening health systems and staff development, with special attention to health needs identified by communities themselves. The organization later in the 1990s expanded its operation to cover HIV/AIDS and TB in an effort to curb the pandemic which had become a major burden in a majority of the developing nations (AMREF 2015).

Despite huge investments by donors in health products and delivery of health services, a large percentage of Africans still have limited access to sufficient and quality health care (AMREF 2015). AMREF implements health projects country wide within different service delivery areas-effective project implementation is therefore a key goal of the organization for every project initiated. This study will therefore focus on this organization to determine the factors that influence effective implementation of health projects.

1.2 Statement of the problem

Project implementation involving successful development and introduction of projects in the organization present a very big challenge to project managers .Project implementation process is complex as it requires simultaneous attention of a wide variety of human, budgetary and technical variables. Successful project outcome is depicted as the responsibility of project managers. This poses a challenge to project manager as projects are often initiated and implemented in the context of turbulent, unpredicted and dynamic environment. Managers need to be equipped with tools that can help them focus on the priority areas across different project elements.

Majority of the studies done previously on effective project implementation focused on general projects being implemented across different organizations like in the building and construction sector, development projects like the Kenya community development fund (CDF), banking sector, education and manufacturing organizations. Nonetheless, little research has been done on projects evolving around health. Organizations dealing mostly with promotion of health and providing lasting health solution to communities are often faced with challenges of creating effective project that create maximum benefits to the recipients and the organization as a whole given health is a major concern of every human being.

There has been a great challenge among managers at AMREF Health Africa especially in establishing sustainable projects that are effective in the long run , deliver the expected outcomes and meet the needs of the client. Premature end of projects have been reported as well as delayed project implementation due to lack of proper coordination. Project sustainability refers to the extent to which the established solutions continue to meet the community needs even after the project term, for instance a project aimed at improving maternal health care should ensure that maternal deaths cease to exist by addressing the root cause of the problem and establishing solutions that can be owned by the communities. However maternal deaths have been on the rise especially in the rural areas. Projects are mainly cubed with reduced funding, shortage of human resources, delayed funding, undefined strategies, poor planning, stakeholder's engagement crisis and bureaucracy in decision making. Reference has been made to successes of other projects in different intervention areas but this has been unyielding since what is applicable in other projects

like in the construction sector may not work in the implementation of health projects. Therefore this is the knowledge gap that is trying to be filled in this research.

1.3 Purpose of the study

The purpose of this study was to investigate factors that influence effective implementation of health projects at AMREF Health Africa in Kenya.

1.4 Objectives of the study

The objectives of this study were;

- 1) To determine how stakeholder's engagement influence implementation of health projects at AMREF Health Africa in Kenya
- 2) To assess to what extent does donor funding influence the implementation of health projects at AMREF Health Africa in Kenya
- 3) To examine how organizational structure influence implementation of health projects at AMREF Health Africa in Kenya
- 4) To evaluate how utilization of strategy influence implementation of health projects at AMREF Health Africa in Kenya

1.5 Research questions

The following research questions guided the study;

- 1) How does stakeholder's engagement influence implementation of health projects at AMREF Health Africa in Kenya?
- 2) How does donor funding influence the implementation of health projects at AMREF Health Africa in Kenya?
- 3) How does organizational structure influence implementation of health projects at AMREF Health Africa in Kenya?
- 4) How does utilization of strategy influence implementation of health projects at AMREF Health Africa in Kenya?

1.6 Significance of the study

The findings of this study would be important to various managers especially at AMREF Health Africa in Kenya and would aid them in effective implementation of various projects. The findings would also be useful to the organization management as they gain substantial knowledge on the support that they should offer to the implementing teams of any running project. Other researchers would also benefit from the study findings as it contributes to building the body of knowledge on matters surrounding effective project implementation with a key focus to health projects. Academic scholars could use the findings of this research for further research and also as a reference.

1.7 Delimitation of the study

Delimitation of the study refers to the boundaries of the study. The study will be carried out in Kenya. The organization where the research study was being carried out is AMREF Health Africa in Kenya. The population comprised of 300 employees dealing with project implementation at different capacities. The sample of the study comprised of a total of 70 respondents from six different programs namely ; Water, Sanitation and Hygiene (WASH), AIDS Population and Health Integrated Assistance Programme (APHIA) plus IMARISHA, HIV & AIDs, TB and Malaria Programme, Reproductive, Maternal, Newborn and Child Health (R.M.N.C.H), Clinical and Diagnostics and Research, Advocacy and Business Development (R.A.B.D).

1.8 Limitations of the study

Study limitations refer to those factors that are likely to inhibit the researcher from carrying out the study. Some of the projects teams are field based and accessing them as the respondents would take more time. To overcome this problem, the researcher developed an online questionnaire that was sent to the target populations. Resources also posed a challenge to the researcher-this was addressed by having a work plan and a budget aided in financial planning.

1.9 Assumptions of the study

The study assumed that that the respondents would be available and would answer the questions truthfully and to the best of their knowledge. Another assumption that was made was that the sample selected is a representation of the population.

1.10 Definition of significant terms used in the study

Health project- A project has a defined beginning and an end. Artto et al (2006) defined a project as a unique entity that aims at a previously defined goal, constitutes of complex interrelated tasks, and is limited by time, costs and its scope. A health project is defined as a set of interrelated tasks that are geared towards ensuring the wellbeing of people.

Effective project -A project is considered to be effective if it's implemented within the intended schedule, budget, achieves the set goals and is accepted by the clients for whom it is intended.

Implementation-Implementation is defined as a set of activities intended to bring a program to life.

Stakeholder's engagement- Stakeholder engagement is defined as an organization's efforts to understand and involve any group or individual who can affect or can be affected by an organization or its activities, including employees, community groups, environmental non-profit organizations, customers, and their concerns in its activities and decision-making processes.

Donor Funding- donor funding is the act of providing resources (monetary, time or expertise) towards a given course/project.

Strategy- Project strategy is defined as the direction of a project that contributes to project goals.

Organization structure- Organization structure refers to the institution leadership structure that highlights the roles and responsibilities assigned to the different individuals employed by the institution.

1.11 Organization of the study

This chapter provided a focus into the background of the problem, the problem statement, the purpose of the study, objective of the study, the research questions, the importance of the study,

the assumptions of the study, the delimitation of the study, limitation of the study and the definition of terms. In chapter two, the researcher reviewed the literature based on the factors that influence effective project implementation. Chapter three presented the research methodology- target population, sample size and sampling procedure, methods of data collection and analysis. Chapter four contained the analysis and presentation of the data. Chapter five presented the summary of the findings, discussions, conclusion, recommendations, and suggestions for future studies.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter sought to present a review of relevant literature on the factors influencing effective implementation of health projects in relation to the research questions being analyzed. The literature review was guided by the four objects of the study, that is to determine how stakeholder's engagement influence implementation of health projects at AMREF Health Africa in Kenya, to assess to what extent does donor funding influence the implementation of health projects at AMREF Health Africa in Kenya, to examine how organizational structure influence implementation of health projects at AMREF Health Africa in Kenya, to evaluate how use of strategy influence implementation of health projects at AMREF Health Africa in Kenya. More so the literature looked at relevant theories that form the basis of the subject under study and finally the section concluded with a conceptual framework.

2.2 Donor funding and implementation of projects

Every project requires financial resources if the project goals and set performance improvement is to be achieved. Research has produced a great deal of information about how dollars are distributed to projects. However, there is insufficient data in the research on how to put dollars to productive use (Picus and Fazal, 2005). From recent studies, it is known that at least 80 percent of project budgets are spent at and within project sites for a wide range of services such as instruction, leadership, consultancy services, supplies, and materials (Odden and Archibald, 2001). The remaining expenditures support the administration office, tax collection, insurance coverage and operating costs.

Donor funding has been playing a key role in the economies of developing countries especially in Africa. However, channelling of the resources has been going on for more than half a century but little development has been made in most of the recipients' countries in sub-Saharan Africa. Most of the 3rd world majority population live in abject poverty, suffer from diseases, experience rampant unemployment and are living heavily on debts. Non-governmental organizations and government development agencies have failed to account for the results of the funds from

donors. Recent pressure for a more result oriented policy from aid opponents, civil society, donors and recipients alike has led to a formal process that resulted in the adoption of the Paris Declaration on Aid effectiveness. Implementation of the Paris agenda is forcing both donors and recipients to look better and more systematically at the concrete results of development efforts. Although a long way has to be gone, the Paris declaration is an important step in the right direction (World Bank report 2003).

The ministers of developed and developing countries responsible for promoting development and heads of multilateral and bilateral development institutions, meeting in Paris on 2nd March 2005, resolved to take far-reaching and actions that can be monitored to reform the ways aid is delivered and managed in view of the UN five-year review of the Millennium Declaration and the Millennium Development Goals (MDGs). While the volumes of aid and other development resources were set to increase to achieve these goals, aid effectiveness had to increase significantly as well to support partner country efforts to strengthen governance and improve development performance , (World Bank report 2003). The meeting reaffirmed the commitments made at Rome to harmonize and align aid delivery.

The extent of success for donor funded projects is determined by both technical and managerial capacity of the human resources of the implementing agencies. In addition, appropriate supportive infrastructure is a necessity. According to Arndt (2000), implementing partners in the donor funded projects may lack the formal training in foreign aid management, budgeting and accounting. These weak skills may lead to poor understanding of the donor expenditure protocols resulting in ineligible expenditures, which lead to rejection for further funding by the donor. This may be affected by the quality and timeliness of the liquidation document which complicate the donor fund release. Projects implementation is affected by these occurrences and they may inhibit project performance. Accountability is a key pillar of effectiveness in implementation of projects. Accountability refers to full transparency regarding the purpose, content, and responsibility and performance e of the development agency O'Connell and Soludo (2001)

Ali (2011) examined the factors that affect financial sustainability of NGOs in Kenya with specific reference to Sisters Maternity Home (SIMAHO) in Garissa. The study found that

donor relationship management contribute most to financial sustainability of non-governmental followed by strategic financial management then income diversification while own income generation contributed the least to financial sustainability of non-governmental organizations. The study recommends that in order to ensure that the NGOs remain sustainable; they should procure employees that are competent in strategic planning, plan implementation and financial analysis. Further recommendations are that NGOs management should increase their income sources from their usual ones. The management should ensure that they maintain a good relationship with the donors mainly by information management, ensuring there is accountability and meaningful communication.

Health financing remains an issue in Kenya, both because the level of funding is insufficient in spite of government's fiscal effort as well as inadequate resource allocation. Under Vision 2030, a number of flagship projects have been identified in each sector which was being implemented over the five years of the vision to facilitate the desired growth on a sustainable basis. Health projects have been identified as key in driving health growth in the health sector. The millennium development goals (MDGs) can only be achieved if only the health systems are improved at all levels or regions in the country (Kenya Vision 2030 report).

Chenery and Strout (2006) developed a two-gap model that set foreign aid as an engine of growth. Critics of this model have argued that foreign aid substitutes domestic resources through declined savings, reduced government tax revenue and increased government consumption. With the renewal of the debate, the question remains as to whether external assistance complements or substitutes available domestic resources. In Kenya, the answer to this question is complicated by the fact that aid flow has not been consistent. Given Kenya's high dependence on foreign aid, coupled with major aid freeze episodes, there is need to analyse the extent the flow of donor aid influences health project implementation.

A key challenge facing both the local and international community is how to ensure the effective delivery of foreign aid in poverty-reduction efforts around the world. Easterly (2003) argued "despite large amounts of foreign aid-and several countries that were able to utilize foreign assistance in their development and poverty-alleviation strategies, the effectiveness of foreign aid remains in doubt". Several surveys of the evidence conclude that aid has not led to increased

growth and may have even worsened the economic performance of the countries receiving aid (A dedeji, 2001; Alesina and Weder, 2002; Round and Odedokun, 2003).

2.3 Utilization strategy and implementation of projects

Project strategy is the direction of a project that contributes to project goals. Poor project strategy is one of the major causes of project failure. However, many projects do not adequately develop strategy leading to a poor basis in subsequent phases. Thus, implementation of project strategy is critical to the success of any project.

Project strategy is a direction in a project that contributes to success of the project in its environment (Artto et al., 2007, Milosevic, 2005 and Samset, 2003). Many studies have shown that project strategy may contribute to project performance in terms of cost, schedule, and operational characteristics (Anderson and Merna, 2003 and Srivannaboon and Milosevic, 2006). Thus, project strategy is critical to the success of all types of projects. The development of project strategy is one of the major tasks during project planning. Success during the subsequent phases of a project is highly dependent on the level of effort expended during this stage (Cho and Gibson, 2001).

A project strategy should concern not only operative and tactical levels, but also the institutional level, and thereby enable a project's significant interaction with its context (Artto et al., 2007 and Morris, 2002). However, the literature has largely ignored the impact of project strategy on project success. Most of the project management literature concentrates on the execution tools and techniques rather than the effective development and deployment of project strategy within a total process concept (Anderson and Merna, 2003). Artto et al. (2007) reviewed literature from multiple viewpoints to develop a definition and interpretation about the project strategy concept. The study suggested empirical research and further conceptual research on detailed contents of different project strategies.

While the aforementioned authors promoted the adoption of project strategy, other researchers have also been active in exploring the impacts of strategy formulation on project success. For example, information systems implementation strategies have a significant impact on software quality and project performance (Subramanian et al., 2007).

2.4 Organization structure and implementation of projects

Projects are implemented within an organization and by a designated team that is mandated with role of ensuring the projects are implemented successfully.

Organization management through application of different project leadership techniques and tools contributes to timely completion of the project conforming to specific requirements and with the intended budget Kerzner (2009). According to Chan and Suhaiza (2007) strong leadership style by the project manager is necessary for the successful planning and implementation of projects. Effective leadership capability aid the organization in: planning of project activities; controlling of budgets and resources; provision of a consistent method of reporting across all projects thus allowing staff to move between projects without having to relearn the leadership approach.

Belout and Gauvreau (2004) examined the impact of human resources in project success. The results found that for three distinct structures; functional, project based and matrix, the management support and trouble-shooting variables were significantly correlated with success. The study confirms that there is a moderating effect between the independent variables and project success, depending on the sector studied. The study adds another step in conceptualizing human resources management in project context which is still very scarce. Strong leadership style by the project manager is necessary for the successful planning and implementation of projects. Normally the project manager has a great deal of responsibility but does not have the commensurate authority as a line manager whereas the line manager has a great deal of authority but only limited project responsibility Chan and Suhaiza (2007). Considering this fact, it is therefore important for a project manager to maintain a leadership style that adapts to each employee assigned to the project. The researchers further argue that project management is unlikely to succeed unless there is any visible support and commitment by executive management.

Hubbard (2000), managing people effectively has a significant impact on the results of a project since most major project failures are related to social issues. For instance, a study by Todryk (2000) revealed that a well-trained project manager is a key factor in ensuring project success because as a team builder, he/she can create an effective team. This view is

supported by other studies on project-team training. According to Fermanich (2003), prior research on the effects of leaders and employee capability on project achievement includes three main types of studies: production function studies, effective strategies and leader effects/employee-effects studies. Production function studies such as those reviewed by Hanushek (1989) and reviewed by Hedges et al. (1994) found at best a questionable link between resources and success of a project.

Majority of these studies discussed above focus on leadership capabilities and human resources as essential factors in project performance but provides less literature on how human resources skills, qualifications and experience contribute to project implementation. In addition, projects are implemented within an organization : the organization structure(type of organization and management styles) negatively or positively contribute to projects implementation but not much studies have been done inclined to this aspects.

2.5 Stakeholders' engagement and implementation of projects

Stakeholder engagement can be described as an organization's efforts to understand and involve stakeholders and their concerns in its activities and decision-making processes (Bourne 2006). Stakeholders are defined here as any group or individual who can affect, or can be affected by, an organization or its activities, including employees, community groups, environmental non-profit organizations, customers, and others. According to Stakeholder engagement standard, the overall purpose of stakeholder engagement is to drive strategic direction and operational excellence for an organization. Done correctly, engaging stakeholders can result in learning, innovation, and enhanced performance that will not only benefit the organization, but also its stakeholders and society as a whole. In addition to serving as a key tool to support a facility's sustainability reporting efforts, stakeholder engagement can be seen as a foundation that supports facility's broader sustainability efforts to set strategic goals, implement action plans, and assess its performance (Beierle 2012).

Engagement can be sourced internally or externally. Facilities are sometimes reluctant to engage external stakeholders unless they have had a grievance or violation and are forced to do so. While it is not possible to control or predict facilities' or stakeholders' abilities to engage with one another, experience has shown that external stakeholder engagement in a comprehensive

sustainability reporting process is best realized when stakeholders are involved from the beginning. Capitalizing on existing relationships (regardless of their nature) may better position your facility to work with external groups and/or provide additional opportunities for feedback and participation over time.

According to Reed (2008), Stakeholder's engagement is a process that requires planning, implementation and monitoring. The planning phase entails identifying stakeholders that are aligned to the project's objectives. This is done through mapping of stakeholder's interest, concerns and relationships. Stakeholders' engagement strategy is also put in place highlighting the scope and methods of engagement. The second step is the actual engagement which is mainly done through meetings organized by the project /organization. Input from stakeholders is reviewed and feedback used in decision making to improve project performance and in reporting. The project is finally tasked with the role of evaluating stakeholder's effectiveness.

Stakeholder engagement has in the recent past emerged as an important component of many states in America especially the federal voluntary environmental leadership programs, including National Environmental Performance Track Program and approximately 20 similar state performance-based programs. These programs typically require applicants to have procedures in place to identify environmental issues of concern to local communities and to respond to community inquiries on environmental issues. In addition, some programs require that members engage community representatives specifically about trends in environmental performance. For example, facilities in the upper tiers of Missouri's Environmental Management Partnership are required to seek feedback from the local community and other stakeholders on their environmental performance assessments and the status of their environmental management systems. And in North Carolina, members of the program's highest tiers must communicate progress on meeting program environmental goals to community members (Papadopoulos & Merali, 2008).

Stakeholder's engagement must be sustained for effective project implementation. The project should strive to implement agreed upon decisions and conduct through ongoing monitoring and critical evaluation of the engagement process. Further to this, differences between stakeholders and your organization should be acknowledged and operations conducted in a transparent and accountable manner (Reed, 2008).

Stakeholder engagement is therefore an important investment that can pay dividends over time as it helps the organization build good will with stakeholders and helps achieve operational efficiencies as a result of performance improvements linked to engagement activities. A lot of the studies done focus on how to engage stakeholders and but little has been done on its outcome and how the stakeholders engagement affect project implementation especially in the health sector which involves different players.

2.6 Theoretical framework

A theoretical framework provides the researcher the lens to view the world. The theoretical framework relates to the philosophical basis on which the research takes place and forms the link between the theoretical aspects and practical components of the problem under investigation. In this study the theoretical framework consists of theories and models related to the present study. It is in this framework where the research problem under study evolved. The theoretical framework discusses the resource dependency theory, management by objective theory and project management competency theory.

2.6.1 Resource dependency Theory (RDT)

Resource Dependence Theory studies how external resources of organizations affect the behaviour of an organization.. It is based on the notion that environments are the source of scarce resources and organizations are dependent on these finite resources for survival. Organizations must develop ways to exploit these resources, which are also being sought by competing organizations in the same environment (Boyd, 1990). It also postulates that resources are a basis of power for the organizations – organization A's power over organization B is equal to organization B's dependence on organization A's resources (Scott, 2003).

The basic assumption of RDT is ensuring organizational survival by minimizing any situation of uncertainty and dependency and characterizes an organization as an open system, dependent on contingencies in the external environment (Pfeffer & Salancik, 1978). However, managers are able to reduce the environmental uncertainty and dependency by several actions, where the concept of power is the central stage.

The RDT is built on several earlier scholars, including the work of Emerson (1962), Blau (1964), and Jacobs (1974). The concept of analyzing organizational behaviour from an organizational context perspective being a part of the RDT has also been used by earlier scholars. However, Pfeffer and Salancik had the intention to provoke additional thoughts, research attention, and concerns for three different ideas, including the concept of resource interdependence, external social constraint, and organizational adaptation (Pfeffer & Salancik, 1978). The intentions of Pfeffer and Salancik led to the development of the RDT, providing an alternative perspective to economic theories of mergers and board interlocks in order to understand precisely the type of the inter-organizational relations (Davis & Cobb, 2010).

In order to understand the RDT it is necessary to make clear how the basic concepts of a contextual perspective on organizational behaviour work, which serves as the core model of the RDT. Pfeffer and Salancik (1978) started their work with the introduction of the concept of a contextual perspective, including three concepts: organizational effectiveness, organizational environment, and constraints. This section addresses the core variables used in the RDT, discussing the impact of the concepts of dependency and uncertainty.

The first concept of the contextual perspective is the organizational effectiveness, being defined as the effectiveness of an organization with the ability to create acceptable outcomes and actions. In addition, organizational effectiveness can be described as an external standard, judging to what extent an organization is able to meet the demands of their stakeholders, including various groups and organizations concerned with the activities of the organization. The most important factor of the effectiveness of an organization is the external judgement of the organizational activities. Using an external perspective is necessary in order to describe an organizational effectiveness, whereas an internal perspective would describe the efficiency of an organization (Hillman et al., 2009.)

The second concept of the contextual perspective is the organizational environment. The environment includes every event influencing the activities and the outcome of an organizational action. Pfeffer and Salancik (1978) include several issues, among others the question why some organizations are less influenced by different events in the environment. The reason is that some organizations are due to isolated or buffered from specific events in the environment reducing the impact the event could have. As a result, some organizations do not respond to events in the

environment. A second issue why some organizations are not responding to changes or events in the environment lies in the fact that some organizations are unaware of events, leading to changes. They however make clear that organizational environment is not a given reality, since organizational environments are created through a process of attention and interpretation of each individual company. Another influence is the strength connection of an organization to its environment. As a result, the aspects of how an organization learns about its environment how it attends to the environment, and how its selects and processes information are all important factors of how the context of an organization affects its actions

The last concept used in the contextual perspective in order to understand organizational-environment relationships is the concept of constraints. The concept of constraints describes how probable it is that an action will be used to respond to a given situation. If one response is more probable than another response to a situation, this action is constrained. In other words, a constraint is present whenever a response to a situation is not a random, but a well-argued choice. Some examples on how behaviour is constraint include: physical realities, social influence, information, cognitive capacity, and personal preferences. The concept of constraints assumes that the individual effect on organizational behaviour is frequently constrained by situational contingencies. The three concepts of the contextual perspective serve as a core model to the RDT (Pfeffer & Salancik 1978).

2.7.2 Management by Objective Theory

Management by objectives (MBO) was first popularized by Drucer (1954). MBO is based on the thinking that various hierarchies within companies need to be integrated. Drucer argued that all organizations exist for a purpose, and, to achieve that purpose, top management sets goals and objectives that are common to the whole organization. The MBO approach injects an element of dialogue into the process of passing plans and objectives from one organizational level to another. The superior brings specific goals and measures for the subordinate to a meeting with this subordinate, who also brings specific objectives and measures that he or she sees as appropriate or contributing to better accomplishment of the job. Together they develop a group of specific goals, measures of achievement, and time frames in which the subordinate commits himself or herself to the accomplishment of those goals. The subordinate is then held responsible for the accomplishment of the goals. In other words MBO is participative goal setting, choosing

course of actions and decision making. An important part of the MBO is the measurement and the comparison of the employee's actual performance with the standards set.

Ideally, when employees themselves have been involved with the goal setting and choosing the course of action to be followed by them, they are more likely to fulfil their responsibilities. Some of the important features and advantages of MBO are Motivation – Involving employees in the whole process of goal setting and increasing employee empowerment. This increases employee job satisfaction and commitment, Better communication and coordination – Frequent reviews and interactions between superiors and subordinates help to maintain harmonious relationships within the organization and also to solve many problems, Clarity of goals, Subordinates tend to have a higher commitment to objectives they set for themselves than those imposed on them by another person, Managers can ensure that objectives of the subordinates are linked to the organization's objectives, and everybody will be having a common goal for whole organization (Drucker 2008).

2.8.3 Project management competency theory

The work of McClelland & McBer in the 1980s established the competence theory. The authors defined competency as the underlying characteristic of an individual that is causally related to criterion-referenced effective and/or superior performance in a job or situation. Since then a number of competency frameworks have been developed by different project management institutes.

Crawford (as cited in Boyatzis, 1982 & Spencer, 1993), puts a model of competence that integrates knowledge, skills, demonstrable performance, and core personality characteristics, noting the last, personality characteristics, as challenging to develop and assess through training. She argues that two of the most influential project management standards, the PMBOK, address only the knowledge aspect of competence while a third, Australia's National Competency Standards, draws from knowledge but focuses only on demonstrable performance. Crawford, (2010) study found out that project managers “do not necessarily have the required competence or perform the full activities required to promote and implement the changes that they are leading as part of their projects.

Interest in project management competence stems from the very reasonable and widely held assumption that if people who manage and work on projects are competent, they will perform effectively and that this will lead to successful projects and successful organizations (Beer, 1990; Smith, 1976). Competence is generally accepted, however, as encompassing knowledge, skills, attitudes and behaviours that are causally related to superior job performance. Crawford (as cited in Boyatzis, 1982 & Spencer, 1993), stated that professional competence in project management is attained by combination of knowledge acquired from training and its subsequent application and other skills developed in the course of work.

Previous management studies have investigated the impact of competency on performance. Dainty,(2004) have argued for a competency based performance model for construction project managers where managerial behaviour input is appraised and nine performance indicators for PM competency are developed to comprise team building, leadership, decision-making, mutuality and approachability, honesty and integrity, communication, learning, understanding and application, self-efficacy, and maintenance of external relations. In the context of construction project management; it is assumed that if the project manager and the project team have all the required competence for the work then the project implementation will be successful.

2.7 Conceptual Framework

The dependent variable in this research is effective project implementation which is the goal of any organizational entity with the mandate of bringing a project to life. Effective project implementation is influenced by the following factors among others; stakeholder's engagement, donor funding, organization structure and utilization of strategy which are the independent variables as presented in the figure 1 below;

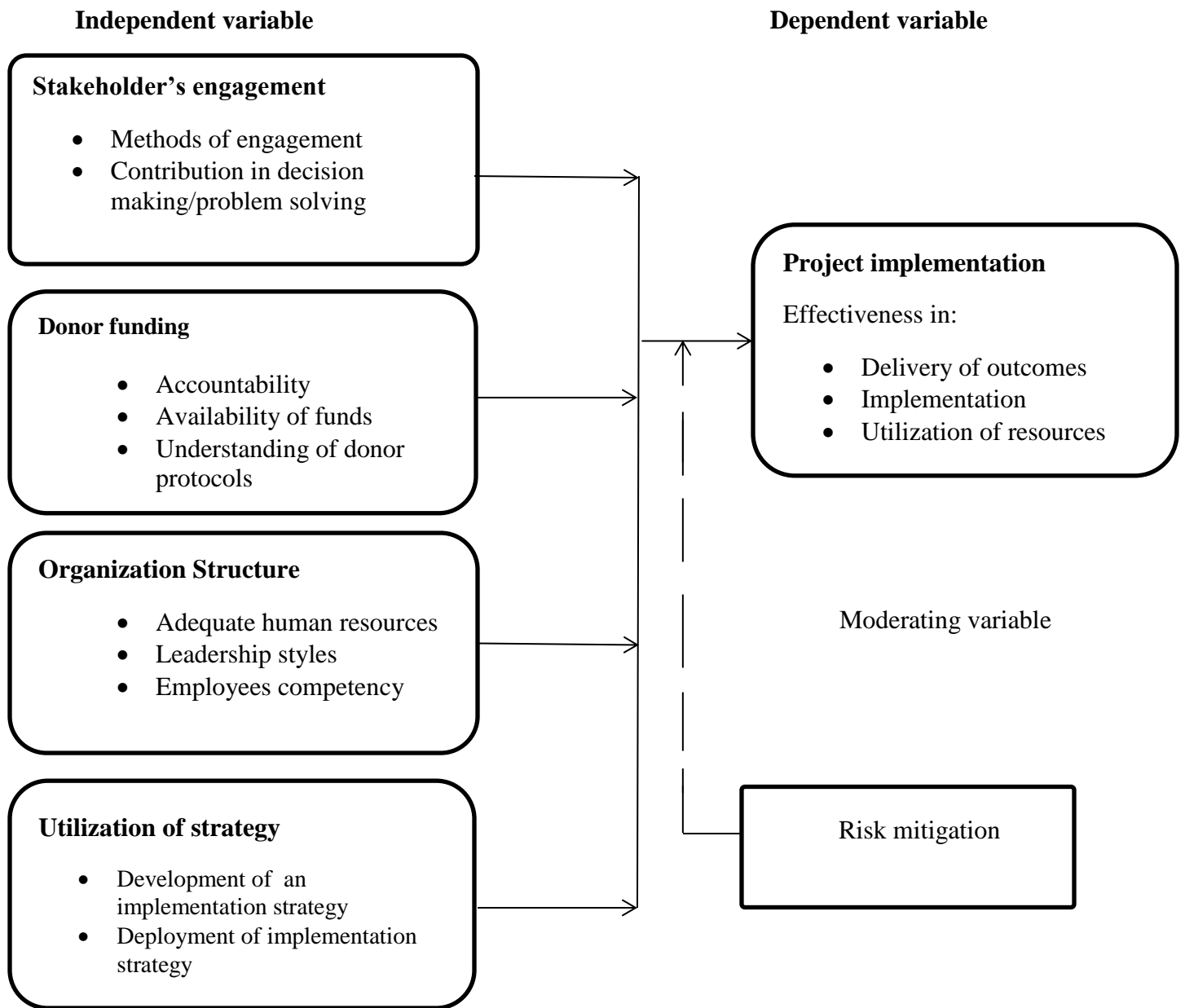


Figure 1: Conceptual Framework

2.8 Summary of the reviewed literature and knowledge gaps

Majority of these studies discussed above focus on leadership capabilities and human resources as essential factors in project performance but provides less literature on how human resources skills, qualifications and experience contribute to project implementation. Belout and Gauvreau (2004) examined the impact of human resources in project success. Fermanich (2003)

researched on the effects of leaders and employee capability on project achievement. In addition, projects are implemented within an organization: the organization structure(type of organization and management styles) negatively or positively contribute to projects implementation but not much studies have been done inclined to this aspects. A lot of previous literature focuses on how to engage stakeholders-Reed (2008), conducted studies on sustainability of stakeholders' engagement in improving project performance. Little has been done on its outcome and how stakeholders' engagement affects project implementation especially in the health sector which involves different players.

Most of the project management literature concentrates on the execution tools and techniques rather than the effective development and deployment of project strategy within a total process concept (Anderson and Merna, 2003). Artto et al. (2007) reviewed literature from multiple viewpoints to develop a definition and interpretation about the project strategy concept. The study suggested empirical research and further conceptual research on detailed contents of different project strategies. The utilization of strategy in project implementation is an area that has not been studied by many scholars. Subramanian et al., 2007, reviewed the impacts of strategy formulation on project success. This study thus sought to fill in the gap by analyzing use of strategy (development and deployment) as one of the factors that influence project implementation in the health sector.

The literature was reviewed with respect to the four objectives of the study that is donor funding, organization structure, utilization of strategy and stakeholders engagement. More so the literature reviewed the theories that guided the study; resource dependency theory (RDT), management by objective and project management competency theory. The conceptual framework was highlighted in figure 1 and finally the chapter winded up with the review of the knowledge gaps that were noted in the literature review.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

This chapter presents the research methodology that was used to conduct this study thus, it focused on the following: research design, population and sampling techniques, data collection methods, research procedures, and data analysis methods.

3.2 Research design

A design is used to structure the research, to show how all of the major parts of the project, which include the samples or groups, measures, treatments or programs, and methods of assignment that work together try to address the central research questions. Cooper and Schindler (2008) define research design as a blueprint for fulfilling objectives and answering questions. The researcher used descriptive survey research design in this study. Descriptive survey research design describes data and characteristics about a population of a phenomenon and makes it possible to yield generalizations that are factual. This type of design allows confidentiality to be maintained and in addition the design seeks to obtain information on individuals' perceptions, beliefs and attitude, Mugenda and Mugenda (2003).

3.3 Target Population

The study population comprised a total of 300 employees of AMREF Health Africa in Kenya working in various departments/projects which represents 21.4% of the total AMREF employees (AMREF 2015). The target population refers to the individual participant or object on which the measurement is taken. It is the unit of study (Cooper and Schindler, 2011). The target populations consisted of staff (managers and non-managers) implementing projects in different programs in AMREF Health Africa in Kenya which comprised of 178 males and 122 females. Each project is considered as an independent department headed by a project manager who oversees the implementation of the project's activities and is supervised by the program heads.

3.4 Sampling procedures

Sampling refers to the process by which part of the population is selected and conclusions are drawn about the entire population (Cooper and Schindler, 2001). The respondents were selected randomly from 42 health projects being implemented across AMREF Health Africa in Kenya all under six different programs. Stratified random sampling approach was used as it facilitated equal chances of selection and also ensured a representative sample selection.

Table 3.1: Population distribution

No.	PROGRAM	TOTAL POPULATION
1.	Water , sanitation and Hygiene (WASH)	31
2.	AIDS Population and Health Integrated Assistance Programme (APHIA) plus IMARISHA	82
3.	HIV & AIDs, TB and Malaria Programme	71
4.	Reproductive, Maternal, Newborn and Child Health(R.M.N.C.H)	100
5.	Clinical and Diagnostics	11
6.	Research, Advocacy and Business Development (R.A.B.D)	5
	Total	300

3.5 Sample Size

This refers to the number of elements selected from a given population. “How large a sample should be is a function of the variation in the population parameters under study and the estimating precision needed by the researcher. Some of the principles which influence sample size comprise: the greater the dispersion or variance within the population, the larger the sample must be to provide estimation precision, the greater the desired precision of the estimate, the larger the sample must be, the narrower the interval range, the larger the sample must be, the higher the confidence level in the estimate, the larger the sample must be, the greater the number of subgroups of interest within a sample, the greater the sample size must be, as each sub group

must meet minimum sample size requirements, and if the calculated sample size exceeds 5 percent of the population, sample size may be reduced without sacrificing precision” (Cooper and Schindler, 2001).

The required sample size was calculated based on Fishers et al. (2003) recommendation as follows:

$$n=Z^2 pq/d^2$$

Where n=the desired sample size

Z=standard normal deviation at required confidence level 95% or 1.96

P=Estimated number of the participants, 0.214 of the population.

q=1-p (the proportion without characteristics)

d=level of statistical significance (degree of freedom=0.05)

$$n = 1.96^2(0.214)(0.214)/ (0.05)^2$$

n=70 respondents

Table 3.2: Sample Size distribution

No.	PROGRAM	TOTAL POPULATION (N)	SAMPLE
1.	Water , sanitation and Hygiene (WASH)	31	7
2.	AIDS Population and Health Integrated Assistance Programme (APHIA) plus IMARISHA	82	19
3.	HIV & AIDs, TB and Malaria Programme	71	15
4.	Reproductive, Maternal, Newborn and Child Health(R.M.N.C.H)	100	24
5.	Clinical and Diagnostics	11	3
6.	Research, Advocacy and Business Development (R.A.B.D)	5	2
	Total	300	70

3.6 Methods of data collection

Cooper and Schindler (2011) state that data collection methods refer to the process of gathering data after the researcher has identified the types of information needed which is; the investigative questions the researcher must answer, and has also identified the desired data type (nominal, ordinal, interval, or ratio) for each of these questions and also ascertained the characteristics of the sample unit that is, whether a participant can articulate his or her ideas, thoughts, and experiences. This study used of primary data which will was collected from the target sample. A structured questionnaire was used to collect the data and specifically a Likert scale questionnaire. Likert scale is an interval scale that specifically used five anchors of strongly disagree, disagree, neutral, agree and strongly agree. As stated by (Sekaran, 2003) “questionnaire is a popular method of collecting data because researchers can gather information fairly easily and the questionnaire responses are easily coded”

The questionnaire was divided into five sections: The first part was designed to analyze demographic data, which focused on collecting the respondents personality characteristics deemed to impact the factors that influence effective implementation of health projects at AMREF Health Africa in Kenya. This includes age, work experience, gender and qualifications. This will help determine the respondent’s capacity in answering the questions in regard to factors that influence their respective projects implementation. The subsequent four sections sought to establish respondents’ opinions in respect to the four objectives of the study: stakeholder’s engagement, donor funding, organization structure and use of strategy in implementation of projects.

3.7 Validity and reliability of the research instrument

Zikmund (2003) defined validity as the ability of a measuring instrument to measure what was intended to be measured. Reliability is the degree to which measures are free from error and therefore yield consistent results (Zikmund, 2003). According to Sekaran (2003), “reliability analysis is conducted to ensure that the measures of variables have internal consistency across time and across the various items that measure the same concept or variable”.

3.7.1 Validity

To establish the validity of the data collection instruments, the research instruments were given to 10 AMREF staffs who have taken part in project implementation initiatives. The AMREF officials were expected to tick if the item in the questionnaires addresses the factors that influenced effective implementation of health projects. The content of the responses given by the selected staff members was checked against the study objectives and rated using a scale of 5(very relevant) to 1 (not very relevant). The Content Validity Index was used to determine the validity by adding up all the items rated using a scale of 3 and 4 by the AMREF officials and dividing the total sum by the total number of items in the questionnaires. The coefficient of the data gathered from the pilot study was computed with assistance of Statistical Package for Social Sciences (SPSS). A context of validity coefficient index of above 0.70 was obtained and this implied that the questionnaires were valid research instrument for the study (Zikmund, 2003). The researcher sought guidance and expertise of the supervisor and other experts in the field.

3.7.2 Reliability

To measure the reliability of the data collection instruments an internal consistency technique Cronbach's alpha was computed using SPSS. The pilot study involved questionnaires from 10 officials from AMREF who are tasked with implementation of health projects. The data obtained from these respondents was analyzed using SPSS Cronbach's alpha. According to Zinbarg, (2005) Cronbach's alpha is a coefficient of reliability that gives an unbiased estimate of data generalizability. Table 3.1 below gives the reliability data obtained from SPSS data analysis on Cronbach alpha.

Table 3.3 Reliability test result

Constructs	Cronbach's Alpha Values	Comments
Donor funding	0.983	Accepted
Use of strategy	0.971	Accepted
Organization structure	0.960	Accepted
Stakeholders engagement	0.956	Accepted

Table 3.3 indicates that the obtained data was reliable since data obtained from all independent variables had a Cronbach's Alpha values of between 0.923 to 0.960 and this was above 0.70 satisfying Zikmund (2003) that an alpha coefficient higher than 0.70 indicates that the gathered data had relatively high internal consistency and could be generalized to reflect opinions of all respondents in the target population on the factors that influenced effectiveness in the implementation of health projects.

3.8 Data analysis

Marshall and Rossman (2009), define data analysis as the process of bringing order, structure and interpretation to the mass of collected data. The purpose of data analysis is to reduce accumulated data to a manageable size, developing summaries, looking for patterns, and applying statistical techniques (Cooper and Schindler 2011). Descriptive analysis was used to determine the proportions and frequency of the variables. Statistical Package for Social Scientists (SPSS) version 20 was used to facilitate the data analysis. SPSS was preferred by the researcher because it is very systematic and covers a wide range of the most common statistical and graphical data analysis. The results were presented in form of frequency and mean tables.

3.9 Ethical issues

Ethical issues refer to conduct that guides the researchers' behaviour while undertaking research (Mugenda and Mugenda, 2009). The researcher treated the information provided by the respondents as confidential and subsequently was only be used for the purpose of this study. The participants were not required to indicate their names in the questionnaire thus they remained anonymous. The researcher also sought permission from AMREF human resource department.

Table 3.4: Operational definition of variables

Objective	Independent variable	Indicators	Measuring scales	Type of analysis	Tools of analysis
To determine how stakeholders engagement influence implementation of health projects in AMREF Health Africa in Kenya	Stakeholders engagement	<ul style="list-style-type: none"> • Methods of engagement • Stakeholders contribution in decision making/problem solving 	Ordinal	Descriptive statistics Inferential statistics	Frequency tables
To assess the extent to which donor funds influence implementation of health projects in AMREF Health Africa in Kenya	Donor funds	<ul style="list-style-type: none"> • Availability of funds • Accountability • Understanding of donor protocols 	Ordinal	Descriptive statistics Inferential statistics	Frequency tables
To examine how organizational structure influence implementation of health projects in AMREF Health Africa in Kenya	Organizational structure	<ul style="list-style-type: none"> • Adequate human resource • Employees competence • Organizational leadership styles/structure 	Ordinal	Descriptive statistics Inferential statistics	Frequency tables
To evaluate how utilization of strategy influences implementation of health projects in AMREF Health Africa in Kenya	Utilization of strategy	<ul style="list-style-type: none"> • Development of implementation strategies • Deployment of use of strategy 	Ordinal	Descriptive statistics Inferential statistics	Frequency tables
	Dependent variable Project implementation	Effectiveness in: <ul style="list-style-type: none"> • Delivering outcomes • Implementation and utilization of resources 	Nominal	Descriptive statistics Inferential statistics	Frequency tables

CHAPTER FOUR

DATA ANALYSIS, PRESENTATION AND INTERPRETATION

4.1 Introduction

This section of the project presents field data as was gathered throughout the field exercise. The data has been presented in tables and the highlighted text analyses major findings. They are also presented sequentially according to the research questions of the study. Mean scores and standard deviations analyses have been used to analyze the data collected. The raw data was coded, evaluated and tabulated to depict clearly the main factors that influence effective implementation of health projects.

4.2 Response rate

The researcher identified the respondents in good time and was all pre-notified on the intention to carry out the study. Close communication with the respondents ensured that all the questionnaires that were handed out were duly filled to the best ability of the respondents and consequently availed to the researcher to move ahead and carry out the analysis. A total of 70 questionnaires were handed out and they were all successfully returned. Thus a response rate of 100% was achieved, and as Mugenda (2003) put it, a response rate of above 50% was fit to carry out statistical reporting.

4.4 Demographic characteristics

The study sought to find out the respondent's demographics which include; the gender distribution, age, level of education and the work experience in order to establish the ground of the research study.

4.4.1 Age

The respondents were asked to indicate their age brackets. The results are presented in table 4.1 below;

Table 4.1 Age distribution among the respondents

Age Group	Frequency	Percentage (%)
Below 26 years	7	10.0
26 – 35 years	34	48.6
36 – 45 years	18	25.7

46 – 55 years	8	11.4
Above 56 years	3	4.3
Total	70	100.0

Majority of the respondents, 48.6% were aged between 26 – 35 years. This represents that majority of the respondents were young professional who have at least basic experience in work execution this making them the most crucial unit in project execution operations. The second highest representation was that of the respondents who were aged between 36 – 45 years of age with a percentage representation of 25.7%. The respondents who were aged 46 – 55 years were about 11.4%, while respondents below the age of 24 were about 10% of the respondents. Finally the respondents aged above 56% were only 4.3 %. The age distribution will be very useful as the contributions will be fully representative of all the cadres of the society in terms of age. However though majority of the respondents are youthful, which means that most contributions are literally youth centric.

4.4.2 Gender

The respondents were asked to indicate their gender. The results are presented in table 4.2 below;

Table 4.2 Gender distribution

Gender	Frequency	Percentage (%)
Male	40	57.1
Female	30	42.9
Total	70	100.0

Male respondents formed 57.1% of the total participants whereas female participants were only 42.9%. This demographic show that the gap towards gender balance is almost being closed as more women empowerment take centre stage. Furthermore, the researcher was convinced that this gender demographic will be ample in offering perspectives on the topic of study and the findings will be extremely useful towards ensuring gender diversity is observed on execution of critical projects like health initiatives.

4.4.3 The Level of Education

The respondents were asked to indicate their level of education. The results are presented in table 4.3 below;

Table 4.3 Distribution on the level of education

Level of Education	Frequency	Percentage (%)
Diploma	3	4.3
Undergraduate	34	48.6
Post-graduate	33	47.1
Total	70	100

Majority of the respondents were undergraduates who formed about 48.6% of the sample population. Next were post-graduates who formed about 47.1% of the respondents. Finally, a marginal of 4.3% of the respondents had lower education level which was a diploma. The researcher recognizes that majority of the respondents were frontline officials who dealt with implementation of health projects. As such, to have the acumen and pedigree of service delivery and realization of organizational objectives, academic qualification was very crucial. That is why majority of the respondents were well educated. The researcher holds that, educated people are more creative, focused and conscious on successes, which are the basic ingredients for ensuring an effective project implementation.

4.4.4 Work experience

The respondents were asked to indicate the number of years they have worked in the organization. The results are presented in table 4.4 below;

Table 4.4 Work experience

Years of service	Frequency	Percentage (%)
Below 3 years	29	41.4
3 – 5 years	23	32.9
6 – 8 years	12	17.1
9 – 11 years	3	4.3
12 – 14 years	1	1.4
Above 14 years	2	2.9
Total	70	100

Majority of the respondents, 41.4% indicated to have worked in the organisation for duration of less than 3 years. Those who worked in the organization between 3 – 5 years were about 32.9 % of the respondents. 17.1% indicated to have worked in the organisation for about 6 – 8 years, while those who worked for a period of 9 – 11 years were about 4.3% of the respondents. Those who worked in the organisation for duration of 12 – 14 years were about 1.4% of the respondents. Finally the respondents who worked in the organisation for a period above 14 years formed about 2.9% of the respondents. These demographics indicate that majority of the respondents were pretty young professionals thus having worked at the organisation for a short, something which can be reflected on the age distribution among the respondents.

4.5 Donor funding and project implementation

The study identified donor funding as critical pillar for project execution. Similarly the study found it valuable to assess the extent to which donor funding influence the implementation of projects. The results were presented in table 4.5.

Table 4.5 Donor funding on the effectiveness in project implementation

Factors on donor funding	Mean	Std. Deviation
Lack of expenditure accountability lead to donors withdrawing or cutting short funds.	4.51	.880
A delay in disbursement of funds by the donor agency has an impact on effective implementation of the project.	4.49	.897
Inadequate funding has negative effect on effective project implementation.	4.44	.927
Late submission and substandard quality of liquidation documents to the donor contribute to donor agencies withdrawal and reduced funding.	4.37	.995
Understanding of donor protocols on expenditure affect flow of funds from the donors.	4.36	.979
The organization has the relevant technical and managerial capacity to manage donor funds.	4.19	.921
Organization bureaucracy and management styles influence donor funding opportunities.	4.13	.815

The first evaluation sought to assess the influence of donor funding on the effectiveness of project implementation. A scale of 1 – 5 was used to measure the level through which the respondents agreed with the statements on the factors of donor funding where 1 = strongly disagree, 2 = disagree, 3 = neutral, 4 = agree, 5 = strongly agree. Lack of expenditure accountability lead to donors withdrawing or cutting project funding was identified as the most critical factor that influenced donor funding with a mean of 4.51. The second most critical factor on donor funding was the delay in disbursement of funds by the donor agency it was cited by respondents to have a direct impact on effectiveness in implementation of project and had a mean of 4.49. The respondents were overwhelmingly in agreement that, inadequate funding has negative effect on effective project implementation with a mean of 4.44. Another key factor that was noted to be critical in donor funding was the late submission and substandard quality of liquidation documents to the donor contributed to donor agencies withdrawal and reduced funding and this had a mean of 4.37. Respondents were also in agreement that understanding of donor protocols on expenditure affect flow of funds from the donors with a mean of 4.36. The respondents were also keen on organization capacity where they overwhelmingly agreed that organization that has the relevant technical and managerial capacity to manage donor funds was a key factor that influenced donor funding with a mean of 4.19. Finally the respondents were strongly convinced that organization bureaucracy and management styles influence donor funding opportunities with a mean of 4.13.

The study establishes that all the factors critical to donor funding have huge influence on the effectiveness in project implementation of health projects. The study establishes that expenditure accountability was the most critical factor in securing funding and consequently realization of effective project implementation. Other factors that influenced donor funding included, disbursement timelines, organization submission timelines and standards of liquidation, donor protocols, organization capacity and bureaucracy were all cited as critical to project implementation.

4.6 Utilization of strategy and project Implementation

Use of strategy for a project lays down the foundation of the policy framework which guides the implementation of a project so as to ensure the main objectives are realized. The study sought to evaluate the extent through which the use of strategy on project implantation influences the effectiveness of the process. The results were presented in table 4.6.

Table 4.6 Impact of use of strategy on effectiveness in project implementation

Critical factors on use of strategy	Mean	Std. Deviation
Project strategy should be developed at the planning stage of a project	4.43	.941
The project embraces integration of the community as one of the stakeholders in its use of strategy.	4.24	.924
The project has a comprehensive use of strategy that is being utilized by the implementing team	3.94	.976
Project strategy should focus on the needs of the beneficiaries and not those of the organization.	3.93	1.300
The project strategy is being deployed during project implementation.	3.91	.959
The project implementing team understands the project strategy.	3.80	1.111

The study sought to assess to what extent use of strategy on project implementation influenced the effectiveness in the project execution. A scale of 1 – 5 was used where 1= strongly disagree, 2 = disagree, 3 = neutral, 4 = agree, 5 = strongly agree. Project strategy development at the planning stage of a project was the highest influencing factor on effectiveness of project implementation with a mean of 4.43. Project embracing integration of the community as one of the stakeholders in its use of strategy was noted to be the second most critical factor towards influencing effectiveness in project implementation with a mean of 4.24. Thirdly was the comprehensiveness in the use of strategy and how it was utilized by the implementing team with a mean of 3.94. The respondents were in agreement that the project strategy should focus on the needs of the beneficiaries and not those of the organization and this had a mean of 3.93. Further the respondents were also in agreement that project strategy ought to be implemented during the project implementation time with a mean of 3.91. Finally the respondents cited that the teams tasked with project implementation must understand the project strategy with a mean of 3.80.

The study establishes that project strategy was critical to realization of project implementation and influenced the effectiveness of the execution. The study found that it was prudent for the project strategy to be developed at the planning stage as this would help in

giving implementing team enough time to grasp on the specifics and engage their efforts within the caveat of the project strategy.

4.7 Organization structure and Project implementation

For health projects to be effectively implemented, clear definition of tasks that each of the organization components has to accomplish as the caveat for the realization of the project objectives. The study found it critical to evaluate the extent through which organization structure factors influence the effectiveness of project implementation. The results were presented in table 4.7.

Table 4.7 Organization structure on effective project implementation

Factors on organizational structure	Mean	Std. Deviation
Organization management/leadership contributes/supports project implementation.	4.16	.927
The project has adequate, experienced and qualified personnel (on budgeting, donor protocols, organization procedures, implementation, monitoring and evaluation).	4.10	.950
Project managers have specialized skills and knowledge on project management.	4.14	.889
Organizational structures/bureaucracies influence project implementation.	4.23	.966
The project implementing teams have the relevant skills and knowledge that is required in achieving the goals of the project.	4.07	.857
The organization has invested in capacity building of staff in respect to their areas of implementation.	3.41	1.198

The study sought the respondent's opinions with regard to the influence of organizational structure and how it influenced effectiveness in project implementation of health projects. A scale of 1 -5 was used to measure the response rates where 1= strongly disagree, 2 = disagree, 3 = neutral, 4 = agree, 5 = strongly agree. The study identified that of critical importance in organization structure was the organization management/leadership contribution in supporting the project implementation with a mean of 4.16. The respondents also indicated

that the project should have adequate, experienced and qualified personnel (on budgeting, donor protocols, organization procedures, implementation, monitoring and evaluation) to establish effective implementation of health projects with a mean of 4.10. Respondents also indicated that project managers should have specialized skills and knowledge on project management and had a mean of 4.14. The respondents were also in agreement that organizational structures/bureaucracies influence project implementation and recorded a mean of 4.23. Furthermore the respondents were overwhelmingly in agreement that, the project implementing teams should have the relevant skills and knowledge that is required in achieving the goals of the project and this registered a mean of 4.07. Finally the respondents were in agreement that, the organization has to invest in capacity building of staff in respect to their areas of implementation with a mean of 3.41.

The study establishes that organization structure is another crucial component in ensuring that that the execution of any critical project is handled with all the components within the organization have relevant understanding on the operational requirements in their contribution towards the project implementation. This was noted to be critical in realization of seamless execution throughout the project execution phase as the entire organization departments are aware of their roles in the execution process.

4.8 Stakeholders engagement in project implementation

The stakeholders form another critical pillar in the execution of any project. The study sought to evaluate the extent through which engagement and deliberations among the stakeholders influence the effectiveness in implantation of health projects. The results were presented in table 4.8.

Table 4.8 Stakeholders engagement in project implementation

Factors on stakeholders engagement in project implementation	Mean	Std. Deviation
Mechanism of engaging stakeholders should be well devised at the planning stage to avoid disputes.	4.46	.879
Stakeholders influence decision making and problem solving processes during project implementation.	4.31	.790
Stakeholders help to improve on reporting and project performance.	4.19	.786

Stakeholder's engagement depends on organization resources, culture and time.	4.14	.839
The project team should undertake capacity building of stakeholders.	4.01	1.136
Stakeholder's engagement helps in cost cutting.	3.74	1.125

The final objective in this study was to assess the extent to which stakeholders in the project implementation cycle influenced the effectiveness in project implementation. The study used a scale of 1 – 5 where, where 1= strongly disagree, 2 = disagree, 3 = neutral, 4 = agree, 5 = strongly agree.

The respondents were overwhelmingly in agreement that, the mechanism of engaging stakeholders should be well devised at the planning stage to avoid disputes and had a mean of 4.46. Secondly the respondents were in agreement that, Stakeholders influenced decision making and problem solving processes during project implementation and this had a mean of 4.31. Further the respondents were also in agreement that stakeholders helped to improve on reporting and project performance recording a mean of 4.19. Also the respondents indicated that, stakeholder's engagement depended on the organization resources, culture and time with a mean of 4.14. The respondents were also in agreement that, the project team should undertake capacity building of stakeholders with a mean of 4.01. Finally the respondents were in agreement that, Stakeholder's engagement helps in cost cutting with a mean of 3.74.

The study establishes that the stake holders in every project that is undertaken by an organization ought to conceptualize the critical roles that the stakeholders played. Of major importance being the establishment of mechanisms through which the organization engaged the stakeholders is elaborated way at the early stages of development during panning phase.

CHAPTER FIVE

SUMMARY OF FINDINGS, DISCUSSIONS, CONCLUSION AND RECOMMENDATIONS

5.1 Introduction

This section of the project, presents the summary of the findings, discussion on the results, conclusion and recommendations. The study main objective was to assess the factors that influenced the effective implementation of health projects with the case study of the African Medical Foundation. The findings cover the data gathered from responses of participants in the study which featured the staff at the African Medical Foundation.

5.2 Summary of findings

The summaries were organized into separate sub-headings as was formulated in order of the study objectives.

5.2.1 Donor funding and project implementation

The study establishes that donor funding played a critical role in project implementation since it formed the main pillar for building the foundations for the project. The study establishes that all the factors critical to donor funding have huge influence on the effectiveness in project implementation of health projects. The study sums up that expenditure accountability was the most critical factor in securing funding and consequently the realization of effective project implementation. The donor's preparedness in offering funding for any project was based on the premise of accountability and its authenticity thereof. Other factors that influenced donor funding included, disbursement timelines, organization submission timelines and standards of liquidation, donor protocols, organization capacity and bureaucracy were all cited as critical to project implementation.

5.2.2 Utilization of strategy and project implementation

The study establishes that having a clear use of strategy was critical in laying down the framework through which the project would be executed. The study establishes that project strategy should be developed at the planning stage of a project, secondly this study establishes that the project should embrace integration of the community as one of the stakeholders in its use of strategy, thirdly the study establishes that the project should have a

comprehensive use of strategy that is utilized by the implementing team. The study also found that, project strategy should focus on the needs of the beneficiaries and not those of the organization those were important as it gave the project operational purpose. The study also established that the project strategy can be deployed during project implementation. Finally the study established that it was fundamental for the project implementing team to understand the strategy and all its specifics in project execution.

5.2.3 Organization structure on the project implementation

The study found that organizational structure also played a critical role in ensuring that the project implementation does not face any institutional barriers that can be attributed to the organizational administration. The study established that organization management/leadership was critical in offering administrative support towards project implementation. The study also established that the project should have adequate, experienced and qualified personnel in relation to budgeting, donor protocols, organization procedures, implementation, monitoring and evaluation. The study also established that organizational capacity was substantial in ensuring that the organization has adequate personnel with skills and knowledge that should ensure that the projects implementation is seamless.

5.2.4 Stakeholders engagement in project implementation

The study found that for a health project to be successfully implemented all the stakeholders in the particular project should be factored in throughout the project implementation phases. The study established that the mechanism for engaging stakeholders should be well devised at the planning stage to avoid disputes in the course of project implementation. The study also established that the stakeholders had considerable influence on the decision making and problem solving processes in the course of project implementation. The study also established that the stakeholders help in improving on reporting and project performance. The study further found that the level through which stakeholder's can be engaged it was dependent on the organization resources, culture and time. The study found that it was beneficial for the implementing team to help in building capacity for the stakeholders as it was economically beneficial as it also contributed to cost cutting.

5.3 Discussions of the study

The study agrees with the literature that for the effective implementation of projects, it requires financial resources if the project goals and set performance improvement is to be achieved. Furthermore the study agrees that accountability is an affirmation on how to effectively utilize financial resources as extended by the donors (Picus and Fazal, 2005). The study has supported the literature that has shown that at least 80 percent of project budgets are spent at and within project sites for a wide range of services such as instruction, leadership, consultancy services, supplies, and materials (Odden and Archibald, 2001).

The study also agrees with the literature that project strategy is a direction in a project that contributes to success of the project in its environment (Artto et al., 2007, Milosevic, 2005 and Samset, 2003). Furthermore the findings are in agreement with scholars that have shown that project strategy may contribute to project performance in terms of cost, schedule, and operational characteristics (Anderson and Merna, 2003 and Srivannaboon and Milosevic, 2006). Thus researcher agrees with the literature that project strategy is critical to the success of all types of projects. The study established that project formulation is the most crucial part of the project and can offer indication of the potential for the outcome. The study agrees with the literature that the success during the subsequent phases of a project execution is highly dependent on the level of effort expended during this stage (Cho and Gibson, 2001).

The study agrees with the literature as was presented by Chan and Suhaiza (2007) that strong leadership style by the project manager is necessary for the successful planning and implementation of projects. furthermore the findings indicate that effective leadership capability aid the organization in: planning of project activities; controlling of budgets and resources; provision of a consistent method of reporting across all projects thus allowing staff to move between projects without having to relearn the leadership approach.

The researcher agrees with the literature that stakeholders are critical in ensuring success of project execution. Other than serving as a key tool to support a facility's sustainability reporting efforts, stakeholder engagement can be seen as a foundation that supports facility's broader sustainability efforts to set strategic goals, implement action plans, and assess its performance (Beierle 2012).

The study leveraged on two main theories that were relevant with the research topic, which are namely; the resource dependency theory and the management by objective theory. The

resource dependency theory explains how resources outside the organisation can influence the behaviour an organisation. These resources can be crucial for the survival of the organisation. The findings of this study support the resource dependency theory. The study found that, for effective implementation of health projects, donor funding was extremely critical. Funding is an external resource that health projects depend on for them to be successfully implemented. Secondly, the findings of this study support management by objective theory, where the importance of organisation structure was found to be extremely fundamental in the realisation of successful project implementation.

5.4 Conclusions of the study

The study concludes that all the factors critical to donor funding have huge influence on the effectiveness in project implementation of health projects. These included expenditure accountability as the most critical factor in securing funding and consequently the realization of effective project implementation. The study also concludes that the donor's preparedness to offer funding for any health project the premise of accountability and its authenticity were the main items of consideration. The study concludes that other factors that influenced donor funding also included; disbursement timelines, organization submission timelines and standards of liquidation, donor protocols, organization capacity and bureaucracy were all cited as critical to project implementation.

The study concludes that project strategy should be developed at the planning stage of a project; secondly the study concludes that its critical for project to embrace integration of the community as one of the stakeholders in its use of strategy, thirdly the study concludes that successful projects have comprehensive use of strategy that utilizes effectiveness of the implementing team. The study concludes that, project strategy focus on the needs of the beneficiaries and not those of the implementing organization since it gives the project operational purpose. The study concludes that the project strategy can be deployed in the course of project implementation. Finally the study makes a conclusion that it's fundamental for the project implementing team to understand the project strategy all the specifics in project execution.

The study concludes that organizational structure plays a very critical role in ensuring that the project implementation runs smoothly devoid of any institutional barriers that can be attributed to the organizational administration. The study concludes that organization

management formed the heart of administrative support towards project implementation. Of key importance the study makes a conclusion that the project should have adequate, experienced and qualified personnel in relation to budgeting, donor protocols, organization procedures, implementation, monitoring and evaluation.

The study concludes that the mechanism for engaging stakeholders should be well devised at the planning stage to prevent disputes in the course of project implementation. The study further makes a conclusion that the stakeholders have considerable influence on the decision making and problem solving processes in the course of project implementation. The study also concludes that the stakeholders help in improving on reporting and project performance. The study makes a conclusion that the level through which stakeholder's are engaged was mainly dependent on the organization resources, culture and time. The study concludes that implementing team should help in building capacity for the stakeholders as it was economically beneficial as it also contributed to cost cutting.

5.5 Recommendations of the study

The study leveraged on four study objects and upon assessment of the findings the study makes the following recommendations;

1. The study recommends that organizations that offer health services and conduct health projects that are funded by donors should strengthen up their monitoring and audit systems on financial management. This was critical as it helped in keeping up high standards for financial accountability which was the perquisite in raising donor confidence in offering more funds.
2. The study recommends the formulation of operational strategy for implementing health projects should be the foundational framework through which guides the project implementation. The study recommends that all the teams and stakeholders involved in implementing a given project, should be privy on all the specifics of the project.
3. The study recommends that capacity building be the central factor before the commencing of a particular project. This organization leadership should take charge in ensuring that every phase of the whole project have adequate personnel, whom have the operational pedigree to deliver on their duties as assigned in different phases of the project.

4. The study recommends that during implementation of health projects, the responsible organizations should ensure partnerships with all the stakeholders in the execution of the project. The partnership should be all through from the initial stages of planning through the final implementation phases.

5.6 Suggestion for future studies

The study was mainly centralized on the effectiveness in implementing health projects. This study mainly covered on the scope of implementation and what were the main issues that influenced effectiveness in delivery and subsequent realization of implementation objectives. The study suggests future scholars to try and expand the scope on effectiveness in implementation and assess the indicators for success of project implementation. This can expand scope from factors to the outcomes and how to effectively measure the outcomes of successful of health projects.

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APPENDICES

Appendix 1: Transmittal Letter

Elizabeth Maina
P. O Box 70364-00400
Nairobi, Kenya

March 20th 2016

Dear respondents,

I'm a post-graduate student pursuing a Master's Degree in Project Planning and Management at the University of Nairobi. As part of my course work, I'm conducting a research study on factors that influence effective implementation of health projects-a case of AMREF Health Africa in Kenya. The purpose of this structured questionnaire is therefore to collect data on factors that influence effective implementation of health projects-a case of AMREF Health Africa in Kenya. I'm therefore requesting that you kindly provide information as per the guidelines in the questionnaire.

Your honesty in answering the questions is of great importance as it will go far in determining the factors that influence effective implementation of health projects. The data collected will be treated with outmost integrity and will be used only for the purpose of this research study. Your identity remains anonymous as you won't be requested to fill/indicate your name. Your cooperation will be highly appreciated.

Thank you.

Yours faithfully,

Elizabeth Wanjiru Maina

Appendix 2: Questionnaire

Questionnaire Number:

Self-administered survey

Dear respondent,

The purpose of this structured questionnaire is to collect data on factors that influence effective implementation of health projects-a case of AMREF Health Africa in Kenya. Kindly provide the requested data as required in the different sections of this questionnaire.

The information that you provide will be treated with outmost confidentiality and is sought exclusively for the completion of Master's Degree in Project Planning and Management research project. The process will take you about 10 minutes.

BACKGROUND INFORMATION

This section is intended to provide demographic information of the respondent. Please indicate your response in the box provided (Tick appropriately)

Age group								
<24	24-30	31-35yrs	36-40yrs	41-45yrs	46-50yrs	51-55yrs	56-60yrs	>60yrs

Indicate the number of years you have worked for the organization in project implementation

Years of service										
< 3 years		3-5 yrs		6-8yrs		9-11yrs		12-14yrs	14yrs >	

Gender			
Male		Female	

Education level			
Diploma		Post graduate	
Undergraduate		College Certificate	

In the subsequent sections, kindly indicate how much you agree/disagree with the following statements on a scale of 1 to 5 as per the table below:

Level of Agreement Scale						
(1)	(2)	(3)	(4)	(5)		
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree		
SECTION A: DONOR FUNDING AND PROJECT IMPLEMENTATION						
Please indicate the extent to which you agree/disagree with the following statement in respect to donor funding as one of the factors that influence effective implementation of health projects.						
NO	STATEMENT	RATING				
		(1)	(2)	(3)	(4)	(5)
1.	A delay in disbursement of funds by the donor agency has an impact on effective implementation of the project.					
2.	Lack of expenditure accountability lead to donors withdrawing or cutting short funds.					
3.	Understanding of donor protocols on expenditure affect flow of funds from the donors.					
4.	Inadequate funding has negative effect on effective project implementation.					
5.	Late submission and substandard quality of liquidation documents to the donor contribute to donor agencies withdrawal and reduced funding					
6.	Organization bureaucracy and management styles influence donor funding opportunities.					
7.	The organization has the relevant technical and managerial capacity to manage donor funds					

SECTION B: UTILIZATION OF STRATEGY AND PROJECT IMPLEMENTATION

Please indicate the extent to which you agree/disagree with the following statement in respect to strategy as one of the factors that influence effective implementation of health projects.

No.	STATEMENT	RATING				
		(1)	(2)	(3)	(4)	(5)
1.	Project strategy should be developed at the planning stage of a project					
2.	The project embraces integration of the community as one of the stakeholders in its use of strategy.					
3.	Project strategy should focus on the needs of the beneficiaries and not those of the organization.					
4.	The project strategy is being deployed during project implementation					
5.	The project has a comprehensive use of strategy that is being utilized by the implementing team					
6.	The extent to which the implementers understand the project use of strategy influence project effectiveness					

SECTION C: ORGANIZATION STRUCTURE AND PROJECT IMPLEMENTATION

Please indicate the extent to which you agree/disagree with the following statement in respect to organization structure as one of the factors that influence effective implementation of health projects.

NO.	STATEMENT	RATING				
		(1)	(2)	(3)	(4)	(5)
1.	Organization management/leadership contributes/supports project implementation.					
2.	The project has adequate, experienced and qualified personnel (on budgeting, donor protocols, and organization procedures).					
3.	Project managers have specialized skills and knowledge on project management					
4.	The organization has invested in capacity building of staff in respect to their areas of implementation.					
5.	Organizational structures/bureaucracies influence project implementation					
6.	The project implementing teams have the relevant skills and knowledge that is required in achieving the goals of the project.					

SECTION D:STAKEHOLDERS ENGAGEMENT IN PROJECT IMPLEMENTATION

Please indicate the extent to which you agree/disagree with the following statement in respect to stakeholder’s engagement as one of the factors that influence effective implementation of health projects.

No.	Statement	Rating				
		(1)	(2)	(3)	(4)	(5)
1.	Stakeholders influence decision making and problem solving processes during project implementation.					
2.	Mechanism of engaging stakeholders should be well devised at the planning stage to avoid disputes.					
3.	Stakeholders help to improve on reporting and project performance.					
4.	The project team should undertake capacity building of stakeholders.					
5.	Stakeholder’s engagement helps in cost cutting.					
6	Stakeholder’s engagement depends on organization resources, culture and time.					

Which other factors apart from the once mentioned above do you think influence implementation of health projects?

- 1).....
- 2).....
- 3).....

Thank you for taking the time to complete this survey