STRATEGY EVALUATION AT THE WORLD HEALTH ORGANIZATION
SOMALIA COUNTRY OFFICE

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DECLARATION

This management research project is my original work and has not been submitted for a degree in any other university.

Signed  Date

Evelyn Hinga

This management research project has been submitted for examination with my approval as the university supervisor.

Signed  Date

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DEDICATION

Whatever is noble, whatever is right, whatever is pure, whatever is lovely, whatever is admirable if anything is excellent or praiseworthy think about such things.

Phillipians 4.4
ACKNOWLEDGEMENT

First I would like to thank my supervisor Prof. Evans Aosa for his patience and guidance throughout this project. I am also grateful to all respondents who participated in this research, your input was invaluable. And finally I express my profound gratitude to my parents for their inspiration and sacrifice to give me the best in life.
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Strategy is the direction and scope of the organization over the long term. Strategy evaluation is the appraisal of plans or the results of plans that centrally concern or affect the basic mission of an enterprise. When strategy is not reassessed and reformed then strategy decay and strategy drift occurs. Strategy evaluation therefore is a crucial activity in the strategic management process. Strategy evaluation takes place in three main steps. Internal/external environment analysis, performance measurement and corrective action.

Somalia is a country that has been without a centralized national government since 1991. The collapse of national institutions increased the responsibilities of the humanitarian organizations working in the country. However the continued political instability which results in high insecurity has made the implementation of strategies and objectives within the country very difficult. There is therefore a need for these organizations to continually analyze the environment and readjust their strategies and priorities. The objective of this study was to establish how the strategy evaluation process is carried out at the World Health Organization (WHO) Somalia office.

The findings of the study revealed that WHO Somalia carries out strategy evaluation annually in a session called the program review management process. During this process the achievement, failures and obstacles experienced by each program is presented. The findings of this review process are shared among all stakeholders. Because of the dynamic political environment within Somalia and the humanitarian activities of the organization, the larger programs cannot rely on the annual review process only to guide their strategic direction. They take a continuous ongoing evaluation approach which helps them identify deviations and take corrective actions in time.
CHAPTER ONE: INTRODUCTION

1.1 BACKGROUND

1.1.1 STRATEGY EVALUATION

Strategy evaluation is the appraisal of plans or the results of plans that centrally concern or affect the basic mission of an enterprise. Its result is the rejection, modification or ratification of existing strategies and plans (Mintzberg, 1979).

For many executives strategy evaluation is a simple appraisal of how well a business performs. Has it grown? Is the profit rate bigger or better? If the answers to this questions are affirmative then it is argued that a firm’s strategy must be sound.

Despite its unassailable simplicity this line of reasoning misses the whole point of strategy, that the critical factors determining the quality of long term results are often not directly observable or may well be too late for an effective response. Thus strategy evaluation is an attempt to look beyond the obvious facts short term facts of a business and appraise instead those more fundamental factors that govern success in the chosen filed of endeavor. Its special focus is the separation between obvious current operating results and the factors that underlie success or failure in the chosen domain of activity (Hill & Jones, 1999).

Change is all around us, management must be able to cope with the demands imposed by the changes they face. Bryson (1995) cautioned that no individuals, groups and organizations have automatic rights to survive and succeed. Unless organizations come up with ways to adjust to change they are unlikely to survive. Change is a condition
describing what is happening in the internal and external environment and it is part of
the reality that an organization must accept.

Strategy can neither be formulated nor adjusted to changing circumstances without the
process of strategy evaluation. Whether performed by an individual or part of an
organization review process, strategy evaluation forms an essential step in the process
of guiding an organization (Rumelt, 1984).

Walker and Taylor (1997) claim that strategy evaluation takes place in three main
activities. The first step is to analyze the organizations external and internal
environments for strengths, weaknesses, opportunities and threats. Then performance
evaluation should be performed to find out if the organization is meeting its strategies
and objectives and whether the organizations strategies and objectives in line with the
environment. From the results of the performance measurement, corrective action must
be taken where deviations are detected to ensure that the organization gets back on
track.

Strategy evaluation can take place as an abstract analytic task, perhaps performed by
consultants, but more often it is an integral part of an organization’s process of
planning, review and control. In some organization evaluation is informal, only
occasional brief and cursory while others have elaborate systems containing formal
periodic strategy review sessions. In either case the quality of strategy evaluation and
ultimately the quality of corporate performance, will be determined by the
organization’s capacity for self appraisal and learning than by the particular analytic
technique employed (Johnson & Scholes, 2001).
1.1.2 THE WORLD HEALTH ORGANIZATION

The World Health Organization is the United Nations specialized agency for health. It was established in 1948 with the objective of attaining the highest possible level of health by all people. Health is defined by WHO as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

WHO is governed by 193 Member States through the World Health Assembly. The Health Assembly is composed of representatives from WHO's Member States. The main tasks of the World Health Assembly are to identify, analyze and approve the WHO organizational strategies, budget and to decide major policy issues.

Health is increasingly finding its way into the international development agenda due in part to the commitment to many partners across the globe. WHO fulfills its priorities through its six core functions set out in the general programme of work. This include providing leadership on matters critical to health and engaging in partnerships where joint action is needed, shaping the research agenda and stimulating the generation, translation and dissemination of valuable knowledge, setting norms and standards, promoting and monitoring their implementation, articulating ethical and evidence-based policy options, providing technical support, catalyzing change and building sustainable institutional capacity and lastly monitoring the health situation and assessing health trends.

WHO has a six-year medium-term strategic plan encompassing three biennial budget periods that form the framework of its results-based management, within which the global health agenda is addressed and then gets adopted by the World Health Assembly. Flowing from and linked to the strategic plan is WHO's biennial programme budget. The organization's programme budget breaks down its strategic objectives into
expected results for the secretariat. The organization’s expected results are built up from country, regional and the headquarter inputs through joint planning. These expected results to which the secretariat commits itself, are tied to clear and measurable indicators baselines and targets.

1.1.3 WHO Somalia Office

Somalia is a country that has been struggling with internal conflict, insecurity and lack of an effective national government for the past sixteen years. The country is divided into the self-declared republic of Somaliland, the self-autonomous region of Puntland and the central and south zones which are dangerous and unstable. Insecurity continues to affect the transitional federal institutions which remain extremely fragile with only limited capacity to provide basic services and aid agencies in providing emergency interventions. The poor social, economic conditions and prolonged drought periods have contributed to the poor health and nutrition conditions. Somalia was the last country in the world to eradicate small pox and is one of the few countries in the world still struggling with the Polio disease.

WHO is committed to continue its work to help relieve the pain of the struggling population. WHO operates in Somalia through a liaison office in Nairobi and 5 sub-offices in Somalia. The organization has a human resource of 320 employees 80% of whom are located in Somalia. WHO has one of the largest international presences in Somalia.

Insecurity and lack of infrastructure are some of the main obstacles that WHO like many other organizations in Somalia have to deal with. These issues make deployment of staff and supplies very difficult and expensive especially during emergency
situations like disease epidemics, droughts and floods. 50% of WHO budget in Somalia is security related. Due to the volatile political situation WHO has to try to adapt its programs and policies with the changing priorities of the three main political areas. In the absence of a national health policy to guide WHO in executing its mandate, implementation of strategies in Somalia is a very difficult process. This can lead to the organization being too busy concentrating on the problems of today like epidemics and turn a blind eye to tomorrow which is a long term health plan for the country. To create this balance WHO requires strategies and objectives to be constantly evaluated and adjusted in reference to the changing environment in Somalia.

1.2 STATEMENT OF THE PROBLEM.

Strategy evaluation is a key activity of the strategic management process. When accurately performed evaluation is able to reflect the performance of an organization and form the basis for identifying areas of improvement and development needs. Despite the importance of assessment and evaluation in organizations, many non profit organizations are unable to use more advanced methods to examine the factors driving their overall performance and effectiveness. This is likely because such assessments, when done thoroughly, are often costly and require considerable expertise in methodology and statistics. Moreover, these organizations have many pressures to keep administrative costs low, which reduce their ability to conduct scientific assessments. Ironically, however, this prevents them from getting critical feedback about organizational issues, which in turn restricts their ability to learn and adapt.

One of the bases for performing strategy evaluation is because internal and external environments are constantly changing. The magnitude of the changes sometimes calls for alterations in organizational strategies. To maintain a competitive advantage
organization must constantly analyze their environments and align their strategies to meet the environmental demands. Non-profit organizations face vast changes in their environments. This is because they are open systems which depend on the environment for their inputs and outputs (Pearse and Robinson, 1997). Unless these organizations are able to cope with the demands imposed by the changes they face, then they are unlikely to survive.

Somalia is a country whose political environment is always changing. Lack of an effective national government in the country is the primary reason for the dangerous and unstable conditions. Political instability greatly affects the operations of organizations and institutions operating in the country. Since strategy can neither be adjusted to changing circumstances nor formulated without the process of strategy evaluation, strategy evaluation then becomes a core process that must be accurately performed. What approach does the WHO Somalia country office use to evaluate strategies and objectives in order to adapt existing strategies to effectively operate in Somalia?

1.3 OBJECTIVE OF THE STUDY

This objective of this study is to establish how strategy evaluation is carried out at WHO Somalia.
1.4 IMPORTANCE OF THE STUDY

The findings of this study will assist the organization in effective assessment of their strategies in order to achieve their mission, vision and values. The report will also be useful in educating the organization’s beneficiaries and donors on their efforts to improve service delivery. They will see how the organization’s strategies are aimed at ensuring better service delivery. It will increase their confidence in the organization’s management and activities.

The results from this project will provide insight into key factors impacting organizational performance and effectiveness in Non Profit Organizations. The paper plans on sharing the tools, methods, and analytic techniques with these organizations so that they can implement such tools in their own organization. This should allow them to better learn how to improve their abilities to serve people.

From a strategic helping theory perspective, this study may provide WHO and other NPOs with new concepts and educational resources to improve their "strategic insight" about performance and effectiveness in their organization. Results also have important implications for improving the interface between leaders in strategic helping organization, their local communities, governments, and the philanthropic community, such as foundations and professional associations. This in turn should help improve these organization’ ability to provide efficient and effective services.
2.2 STRATEGIC MANAGEMENT PROCESS

Strategic management is the process of specifying an organization's strategies and objectives, developing policies and plans to achieve these objectives, and allocating resources to implement the policies and plans to achieve the organization's objectives.

Strategy can be defined as the direction and scope of an organization over the long term, which achieves advantage for the organization through its configuration of its resources within a challenging environment and geared towards meeting the needs of the markets as it fulfils stakeholder expectations according to Johnson and Scholes (2002).

According to Mintzberg (1988), strategic management can therefore be divided into three main activities. Strategy formulation which is the process of developing long range plans to deal effectively with the environmental opportunities and threats in light of corporate strengths and weaknesses. Strategy implementation the process of putting strategies and policies into action through the development of programs, budget and procedures and strategy evaluation which is the process of monitoring corporate activities and performance results so that actual performance can be compared with planned performance.
Figure 1: The stages and activities in the strategic management process

<table>
<thead>
<tr>
<th>Stages</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strategy formulation</td>
<td>Conduct research → Integrate intuition with analysis → Make decisions</td>
</tr>
<tr>
<td>Strategy implementation</td>
<td>Establish annual objectives → Devise policies → Allocate resources</td>
</tr>
<tr>
<td>Strategy evaluation</td>
<td>Review internal and external factors → Measure performance → Take corrective action</td>
</tr>
</tbody>
</table>


Markides (1999) reexamined the nature of strategic management. He described strategy formation and implementation as an on-going, never-ending, integrated process requiring continuous reassessment and reformation. Strategic management is planned and emergent, dynamic, and interactive. Strategy is partially deliberate and partially unplanned. The unplanned element comes from two sources: emergent strategies (result from the emergence of opportunities and threats in the environment) and strategies in action (ad hoc actions by many people from all parts of the organization).

When strategy is not reassessed and reformed then strategy decay and strategy drift may occur. Strategic decay was discussed by Hamel (2000), the notion that the value of all strategies, no matter how brilliant strategies decays over time, while Abell (1978) described strategic windows and stressed the importance of the timing (both entrance
and exit) of any given strategy. Handy (1989), identified two types of change. Strategic drift being a gradual change that occur so subtlety that it is not noticed until it is too late. By contrast, there is transformational change which is sudden and radical. It is typically caused by discontinuities in the business environment. The point where a new trend is initiated is called a strategic inflection point. To avoid a strategic decay, strategic management therefore must be an ongoing process that reassesses all strategies to determine how they are being implemented and whether they need replacements or readjustments to meet the demands of the changing environment. Lamb (1984).

2.3 STRATEGY EVALUATION

Strategy evaluation is the appraisal of plans or the results of plans that centrally concern or affect the basic mission of an enterprise. Leaders need to understand that performance appraisal itself is not enough. The value of measurement is that it identifies where action should be taken. So, effective evaluation systems according to Johnson (1987) must be able to accurately reflect a business situation, guide employees to take the right actions in situations where action is required and gauge the effectiveness of those actions. A strategic evaluation system, then, is a closed loop system that embodies situational analysis of information, corrective actions, and result evaluation.

Performance measurement is a critical component of organizational management. In fact it is often said. "If you can't measure it you can't manage it" and "what gets measured gets done". Therefore, if we cannot measure the performance of an organization, we cannot manage it effectively. As Armstrong and Baron (1998) pointed
out, measurement is an important concept in organizational management. It is the basis for providing and generating feedback. It identities where things are going well to provide the foundations for building further success, and it indicates where things are not going so well, so that corrective action can be taken. In general, it provides the basis for answering two fundamental questions: “is what is being done worth doing” and “has it been done well”. Through strategic evaluation we can understand the level of current performance in terms of both results and capabilities or incapability. It is the basis for identifying improvement and the development needs if there is a short fall. Solomon (1979) noted that the review process also forms the basis for organizational learning. Part and parcel of the review process is learning what is working and what is not working and taking the necessary actions to correct the deficiencies. In reality, organizational learning should be part of every single step of the strategy process. As we create, communicate, validate and review the strategy, there should be a process in place that captures the learning and feeds the required actions back to update and revitalize the strategy.

One of the fundamental tenets of science is that a theory can never be proven to absolutely true. A theory can however be proven to be absolutely false if it fails to stand up to testing. Similarly it is impossible to demonstrate that a particular business strategy is optimal or guarantee that it will even work, one can however test it for critical flaws. According to Porter (1996) ideally when evaluating an organizational performance system one should test for several major factors which include.

The strategy must encourage long run views rather than short term expedient. The long-term success of the organization is the primary objective and the evaluation systems and measures should encourage decision-making, which contributes to this
objective. An over emphasis on short run considerations may cause adverse long-term
effects. Short-term improvements in results are relatively easily made by, for example,
foregoing proper maintenance, hiring poorer quality but cheaper staff, reducing product
quality and other similar expedients however maintaining improved results over a
period is quite a different matter.

The strategy should encourage initiative and motivation. The strategy evaluation
system should not be narrowly conceived or so rigidly applied that it stifles initiative.
For example, if local management sees an opportunity, which would increase overall
company profits but which would reduce the profits of their own division, then the
system should be flexible enough for this to take place without local management
feeling that they will be penalized. Local management must be encouraged to feel that,
within the prescribed limits, they have genuine autonomy.

The strategy should promote goal congruence. The criteria employed should help the
management to direct operations and to make decisions in ways that fulfill overall
company objectives. Ideally the goals of local management should coincide with
overall company goals, perfect goal congruence of course is a difficult state to achieve
in its entirety.

Strategy should provide relevant and regular feedback to central management. Central
management needs regular feedback of appropriate information in order to judge the
capability of local management, and also to assess the economic worth of the division
as an operating unit. These two aspects may be related but involve distinctively
different consideration and information requirements.
The strategy evaluation process is neither easy nor straightforward as it is because each business strategy is unique. No strategy is right or wrong in any absolute sense. Strategy must rest on a type of situational logic that does not focus on one best way but which can be tailored to each problem as it is faced.

Another challenge is that strategy is centrally concerned with selection of goals and objectives. Many executives find it easier to set or try to achieve goals rather than to evaluate them. This is a problem that is caused because many of these executives are trained in problem solving rather than in problem structuring.

Formal systems of strategy review while appealing in principle can create explosive situations. Arising in questions as to who is qualified to give an objective evaluation.

The whole idea of strategy evaluation implies management by much more than results which run counter to current management philosophy.

2.4 STRATEGY EVALUATION APPROACHES

2.4.1 THE BALANCED SCORECARD

The balanced scorecard is an approach to describing, communicating and evaluating strategies. It is also a way of selecting performance measures that will drive a unique organizational strategy.

The concept of the balanced scorecard was originally developed by Kaplan and Norton (1992). They take the view that what you measure is what you get and they emphasize that no single measure can provide a clear performance target or focus attention on the
critical areas of the business. Managers want a balanced presentation of both financial and operational measures. Norton describes the balanced scorecard as a system of linked objectives, measures, targets and initiatives which collectively describe the strategy of an organization and how the strategy can be achieved. Kiragu also emphasizes that the balanced scorecard can help to align employees’ individual performance with the overall strategy. ‘Scorecard uses setting goals, and linking rewards to performance measures’ (Kiragu, 1995:59).

The balanced scorecard translates the organization’s strategy into understandable goals and objectives, which are then communicated to everybody in the organization in a way that they can understand. It also allows an organization to define strategy in terms of key business objectives with agreed targets for reaching such objectives in a set period. Objectives are then communicated to all persons involved. Since the balanced scorecard is cascaded from the company to divisional/unit/functional objectives, this generally involves all employees contributing to reaching the objectives.

Strategy is a complicated issue, management in organization use the balanced scorecard methodology to map the key drivers of the business and set cause and effect relationships between those drivers. Once the cause and effect relationship is established, one can identify correct means to measure those business drivers. Providing management with a comprehensive picture of business operations, and their most current performance.

Every key business driver and sub-measure, used to measure drivers, must have a person assigned who has responsibility for the performance of such driver. The balanced scorecard allows organization to recognize key areas in their business and
assign key responsible persons to maintaining the best performance and processes for those areas.

The balanced scorecard also assists organization to implement management processes that support the strategy and aligns business processes with the strategy. Management processes such as business planning, forecasting, budgeting, and performance management is linked and supported by the balanced scorecard in the sense that those processes are linked to the priorities in your business. The balanced scorecard provides the link between priority and activity.

However, despite its well-publicized successes, the majority of organization that adopt the balanced scorecard fail to reap the rewards they expect. A common problem is that an organization will adopt some new non-financial measures, but fail to align the measures adequately with strategy. According to Norton (1992) the biggest mistake that organization make is thinking that the scorecard is just about measures. Quite often they will develop a list of financial and non-financial measures and believe they have a scorecard, this he says is dangerous.

A scorecard is only effective if it is clearly understood throughout an organization. Frequently, scorecards will be developed at the executive level, but not communicated or cascaded down through an organization. Without effective communication throughout the organization, a balanced scorecard will not spur lasting change and performance improvement.

Measures are tied to compensation too soon. It is generally a good idea to tie compensation to the balanced scorecard. However, several factors suggest it can be a mistake to do that too early in the lifecycle of the scorecard. Rarely is an initial
scorecard left unrevised. So, if an organization ties compensation to measures that are not in fact driving desired behavior, a powerful motivator has been instituted that will drive an unwise action. Data may be incomplete or inaccurate, so measures may not be correct. If employees’ paychecks are adversely impacted, serious morale problems and invalidation of the scorecard inevitably result.

Organizations have too many initiatives. Large, decentralized organizations usually find that crossover and duplication among initiatives can be identified. Cross-matching scorecard objectives with current and planned initiatives can be an important way to focus and align a company. This method will identify cases where objectives are supported inappropriately.

2.4.2 BENCHMARKING

Benchmarking is a strategy evaluation tool that uses standard measurements in a service or industry for comparison to other organization in order to gain perspective on organizational performance. One of the biggest mistakes organization make when beginning their benchmarking endeavor is that they only look to benchmark organization within their own industry. Although this doesn't hurt, they probably already know enough about their industry to know what works and what doesn't. Worse yet, some organization think they must benchmark their competitor. What if the competition is worse than your organization? Instead organizations should benchmark an organization that is well known for being a good model, sometimes referred to as Best practices, Exemplary practices, and Business excellence.
Benchmarking has several advantages. It enables the organization to know, who performs the business process very well and has process practices that are adaptable to your own organization, who is the most compatible for you to benchmark with.

Benchmarking is a powerful management tool because it overcomes "paradigm blindness." Paradigm Blindness can be summed up as the mode of thinking, "The way we do it is the best because this is the way we've always done it." Benchmarking opens organization to new methods, ideas and tools to improve their effectiveness. It helps crack through resistance to change by demonstrating other methods of solving problems than the one currently employed, and demonstrating that they work, because they are being used by others.

Benchmarking provides a better understanding of the expectations of the customer because it is based on the reality of the market estimated in an objectivist way. Better economic planning of the purposes and the objectives to achieve in the organization because they are centered on what takes place outside controlled and mastered. It also provides an increase of the productivity resolution of the real problems understanding of the processes and what they produce. And finally better competitiveness because of solid knowledge of the competition.

Benchmarking is a moderately expensive process. The three main types of costs are, visit costs which includes hotel rooms, travel costs, meals, a token gift, and lost labor time. Time Costs as members of the benchmarking team will be investing time in researching problems, finding exceptional companies to study, visits, and implementation. This will take them away from their regular tasks for part of each day so additional staff might be required. Benchmarking database costs, organizations that
institutionalize benchmarking into their daily procedures find it is useful to create and maintain a database of best practices and the companies associated with each best practice now.

2.4.3 BUSINESS PROCESS REDESIGN (BPR)

Business Process Redesign is the analysis and design of workflows and processes within and between organizations (Davenport & Short 1990). Teng et al. (1994) defines BPR as the critical analysis and radical redesign of existing business processes to achieve breakthrough improvements in performance measures.

Davenport and Short (1990) prescribe a five-step approach to BPR. First develop the business vision and process objectives. BPR is driven by a business vision which implies specific business objectives such as cost reduction, time reduction, output quality improvement, quality of work life/learning/empowerment. Secondly identify the processes to be redesigned. Most firms use the high-impact approach which focuses on the most important processes or those that conflict most with the business vision. Lesser number of firms use the exhaustive approach that attempts to identify all the processes within an organization and then prioritize them in order of redesign urgency.

Thirdly understand and measure the existing processes to avoid the repeating of old mistakes and for providing a baseline for future improvements. The fourth stage is to identify IT Levers, awareness of IT capabilities can and should influence process design. And lastly the designing and building of a sample of the new process. The actual design should not be viewed as the end of the BPR process. Rather, it should be viewed as a sample, with successive iterations. The metaphor of sample aligns the BPR
approach with quick delivery of results, and the involvement and satisfaction of customers.

King (1994) views the primary reason of BPR failure as overemphasis on the tactical aspects and the strategic dimensions being compromised. 70% of the BPR projects fail because of obstacles caused by lack of sustained management commitment and leadership. A lack of management support for the initiative causes poor acceptance in the organization. Another obstacle is unrealistic scope and expectations, exaggerated expectations regarding the potential benefits from a BPR initiative and consequently failure to achieve the expected results. Failure is also caused by implementation of generic so-called best-practice processes that do not fit specific company needs. Organizations also make the mistake of performing BPR as a one-off project with limited strategy alignment and long-term perspective. Another obstacle is underestimation of the resistance to change within the organization since BPR introduces a lot of changes in the process of an organization.

The most frequent and harsh critique against BPR concerns the strict focus on efficiency and technology and the disregard of people in the organization that is subjected to a reengineering initiative. Very often, the label BPR was used for major workforce reductions. (Davenport, 1995)

2.4.4 MANAGEMENT BY OBJECTIVES (MBO)

Management by objectives is a process of agreeing upon objectives within an organization so that management and employees agree to the objectives and understand what they are. This term was first popularized by Peter Drucker in 1954 in his book
The Practice of Management'. MBO (management by objectives) methods of performance appraisal are results-oriented seeking to measure organizational performance by examining the extent to which predetermined work objectives have been met. Usually the objectives and time lines for completion are established jointly by the supervisor and subordinate. MBO includes ongoing tracking and feedback in the process to reach objectives.

According to Drucker (1954), MBO is about setting objectives and then breaking these down into more specific goals or key results. This principle ensures that everybody within the organization has a clear understanding of the aims, or objectives, of that organization, as well as awareness of their own roles and responsibilities in achieving those goals. The complete MBO system gets managers and empowered employees acting to implement and achieve their plans, which automatically achieve those of the organization.

MBO ensured that all employees actively participate in setting objectives and therefore giving them accountability and responsibility for achieving them. This also encourages employees to perform a self audit, which helps to identify the skills needed to achieve objectives and also to identify their strengths and weaknesses.

MBO creates a link between top management’s strategic thinking and the strategy's implementation lower down. Responsibility for objectives is passed from the organization to its individual members. It is especially important for knowledge-based organization where all members have to be able to control their own work by feeding back from their results to their objectives. Management by objectives is achieved
through self-control, the tool of effectiveness. Today the worker is a self-manager, whose decisions are of decisive importance for results.

Some problems with the use of MBO are that employees tend to specify objectives that are more fluid and yielding. But the penalty for fluidity is loss of clarity. Variable objectives may cause employee confusion. It is also possible that fluid objectives may be distorted to disguise or justify failures in performance. Another issue is that the development of objectives can be time consuming, leaving both managers and employees less time in which to do their actual work. The elaborate written goals, careful communication of goals, and detailed performance evaluation required in an MBO program increase the volume of paperwork in an organization.

(Drucker, 1954)

2.4.5 CONTINUOUS IMPROVEMENT (CI)

Continuous improvement, in regard to organizational quality and performance, focuses on improving customer satisfaction through continuous and incremental improvements to processes, including by removing unnecessary activities and variations (Imai, 1986).

Often known as Kaizen originating in the work of American experts such as Frederick Winslow Taylor, Frank Bunker Gilbreth, Walter Shewhart and Edwards Deming. Kaizen is essentially a small step-by-step incremental improvement strategy. It is based upon a belief that continual improvement can be brought about by a never-ending series of small changes. Even in the face of enormous innovative improvement strategies, there will always be the need and opportunity to supplement such strategies
and initiatives with continual small step changes. It is used throughout the world to enable companies and organizations to continually improve their processes through small gradual changes rather than large scale change that can, and often does, paralyze the workplace.

Kaizen methodology includes making changes and monitoring results, then adjusting. Large-scale pre-planning and extensive project scheduling are replaced by smaller experiments, which can be rapidly adapted as new improvements are suggested.

Advantages of continuous improvement are twofold. First, the recognition that processes must be improved before performance can be enhanced fosters process-oriented thinking. The focus on ways to constantly improve the process becomes part of a workplace movement in which those closest to the problem, usually front line employees, become involved and responsible in getting things right. A "Can do" attitude becomes a way of workplace life. Second, a continuous improvement culture can and does complement innovative leaps and breakthroughs. In order to have a long lasting effect, leaps and breakthroughs need to be followed up with continuous improvement activities. Another compelling benefit of continuous improvement is that it can eliminate the need for large scale quantum shifts. It’s evolutionary, rather than revolutionary, simple and constructive, rather than complex and potentially destructive (Imai, 1986).

2.4.6 PROGRAMME EVALUATION

Program evaluation is essentially a set of philosophies and techniques to determine if a program 'works'. It is a practice field that has emerged, particularly in the USA, as a
disciplined way of assessing the merit, value, and worth of projects and programs. Evaluation became particularly relevant in the 1960s during the period of the Great society social programs associated with the Kennedy and Johnson administrations. Extraordinary sums were invested in social programs, but the means of knowing what happened, and why were not available.

Behind the seemingly simple question of whether the program works are a host of other more complex questions. For example, the first question is, what is a program supposed to do? It is often difficult to define what a program is supposed to do, so indirect indicators may be used instead. If the exact goal cannot be defined well, it is difficult to indicate whether the program 'works'. Another question about programs is what else do they do? There may be unintended or unforeseen consequences of a program. Some consequences may be positive and some may be negative. These unintended consequences may be as important as the intended consequences. So evaluations should measure not just whether the program does what it should be doing, but what else it may be doing.

Program evaluation is often divided into types of evaluations. There is the formative evaluation occurs early in the program. The results are used to decide how the program is delivered, or what form the program will take. There is also process evaluation which is concerned with how the program is delivered. It deals with things such as when the program activities occur, where they occur, and who delivers them. In other words, it asks the question: Is the program being delivered as intended? An effective program may not yield desired results if it is not delivered properly. Outcome evaluation addresses the question of what are the results. It is common to speak of short-term outcomes and long-term outcomes.
CHAPTER THREE: RESEARCH METHODOLOGY

3.1 RESEARCH DESIGN

The research design was a case study. The case study was used to establish how strategy evaluation is carried out at the World Health Organization Somalia country office. Young (1960) observed that a case study is a very powerful form of qualitative analysis that involves a careful and complete observation of social units. He defined a case study as an examination of a specific phenomenon.

According to Cooper and Schindler (2003) the case study places more emphasis on full contextual analysis of fewer conditions or events thus enabling intensive study of the social units. The case study was appropriate for this research as it allowed a detailed investigation of a single subject.

3.2 DATA COLLECTION

Primary data was used for this study. Data was collected through personal interviews. Seven program managers responsible for the strategy evaluation of their programs were interviewed. This were program managers from the Emergency unit, Polio unit, Communicable diseases unit, Non-communicable disease unit and the HIV/Aids unit, Malaria unit and Child & Maternal health unit respectively. Each program manager addressed how strategy evaluation process was carried out in his/her program and the obstacles experienced in the process.
The personal interview technique was ideal for the research because it allowed the researcher and respondents to clarify on any question or response they did not understand, they also gave the researcher the opportunity to probe for more information and gave the respondents the opportunity to ask the researcher any questions regarding the research.

3.3 DATA ANALYSIS

This being a qualitative study, content analysis was used. This method constitutes identifying and extracting key themes, concepts and arguments. Content analysis is a research tool used to determine the presence of certain words or concepts from the responses. The data was analyzed and evaluated to determine the adequacy, usefulness and consistency. The researcher then quantified and analyzed the meanings and relationships of words and concepts. Inferences from the important concepts were made and a research report compiled. This technique was best suited as it did not limit the respondents on answers. Content analysis has been successfully been used to conduct qualitative studies in the past, these include (Thiga, 1999, Njau, 2000).
4.1 STRATEGIC PLANNING

According to the respondents, the strategic planning process at the WHO Somalia office is a structured elaborate process that is carried out every two years. During this process the various programs come up with the strategies, objectives, activities, budget and performance indicators to be used for a period of two years.

The various program managers in collaboration with the various national authorities, and partners (NGO and UN agencies) come up with the draft work plans for the next biannium. Consultation when coming up with the strategic plan is important because ideally WHO is supposed to work under the umbrella of the Ministry of Health of the resident country. However, because of the unique situation in Somalia where there is no national government, WHO must try to share its health strategies with the health experts from the main political zones in Somalia. WHO must also share its plans and strategies with the other UN agencies. The consultative approach when creating the organizations strategies ensures that the strategies are in line with the country's health priorities. After this process is done, the country team then discusses its strategies with the regional office representatives and allocates a budget for each of the activities. This process ensures that the country office strategies are also in line with the organizations strategies and resources.

Although the strategic planning process in WHO Somalia office looks like a balanced process, the process has a lot of political interference from the political groups in Somalia. Each region trying to ensure it gets the biggest allocation of resources. The strategies of the organization are also affected by donor funding. Certain program may
receive huge funding from donors depending on donor priorities. Funding to programs like HIV, Polio or Malaria attract larger funding than other programs. Some priority programs for the organization may have difficulties attracting funding. The strategic plans therefore agreed upon by all the parties may not necessarily reflect the priorities of the organization.

4.2 OBSTACLES TO STRATEGY IMPLEMENTATION

Strategy implementation process in WHO Somalia faces many obstacles. The main and common obstacle in all programs is the issue of insecurity. Since the political situation in Somalia is always changing it is difficult for the organization to accurately predict the security situation as it varies day to day. Insecurity affects access, WHO is a humanitarian organization, the health workers require direct contact to the sick to be able to provide health services, when this access in not possible the organizations activities are paralyzed. Most of the organizations health experts are not Somalia nationals. International staffs are main targets for kidnappings or even killings. Since the organization has a responsibility to protect its staff, it can only dispatch staff to areas that have been cleared by the UN security team as safe. This restricts the coverage of health services. Every UN office, vehicle and staff working in Somalia must be most compliant to the UN security standards. The standards translate to use of high tech security and communication systems and presence of armed escorts during any travel. Maintaining these standards increases the organizations operational standards.

Another obstacle to strategy implementation is the lack of adequate numbers of qualified human resource. As a result of the civil war, the quality of the education provided has been compromised, also because of the civil war many of the educated citizens have
migrated to other countries this has resulted in a brain drain. Since the organization is unable to find the human resource expertise locally, many of the experts hired by the organizations are expatriates, this greatly increase the labor costs. There is also the obstacle of high staff turnover. Most of the international staffs are not able to adjust to the working conditions, many parts of the country are very remote with poor living conditions and very harsh weather. These difficult working conditions make it very difficult to attract experts to work with the organization or retain them. The organization is forced to offer higher remuneration packages to the staff as a compensation of the working conditions. The high staff turnover affects the implementation of strategies.

Another main obstacle to strategy implementation is the issue of donor funding. The demand for donor funds is very high. Organizations eligible for the funds vigorously compete to be allocated a portion of the funds. The resources a project or program get maybe sufficient or less than what they require. That means that the fate of a project or program could solely rely on the availability of funds to start or continue the project. Again it is not possible to accurately forecast the amount of funding any program will get, this greatly affect the planning and implementation of the strategies of the office.

4.3 STRATEGY EVALUATION PROCESS

The organization holds an annual joint programme review process, which serves as the primary strategy monitoring and evaluation process. The review process is attended by all program managers, the finance and administration managers, the country representative who is the head of the office and the regional advisors for each program from the regional office. Also present are health representatives from the various political zones in Somalia.
The review process runs for a period of five days. During this period each program manager presents his/her programs progress report. The report includes the implementation progress of strategies and objectives agreed upon. The report shows the achievements, failures and obstacles experienced by the program. Performance is measured against the performance indicators agreed upon in the strategic plan. The report also details any obstacles experienced by the program. The program manager also indicates any strategies, objectives or activities undertaken that were not part of the strategic plan and a justification for the program doing this. The progress report also includes any collaborations or partnership projects that the program has undertaken or intends to indicate in the next year. The finance and administration managers also present a report on the amount of funds the organization has received and how the money has spent.

The health representatives from all the political zones in Somalia also give a report on the activities of WHO various programs and a report on their current health priorities. Their role is to serve as independent evaluators of the organizations activities and assist the organization in establishing the changing health priorities of the country. They also ensure that the organizations activities and resources are equally distributed in all parts of Somalia.

The regional advisors for each program also give an independent report on the performance of each program, and give an input on the direction for the programs activities for the next year. Their role is to ensure that the country office is implementing its strategies well, and to ensure that the strategies are inline with the overall regional strategies and goals. They also try sort out challenges and obstacles being experienced by
the country office.

The team then comes up with an analysis report that details each program's performance, budget and priorities for the next year. During this process they collectively agree on corrective actions to be taken where deviations are detected. Depending on the analysis done, the priorities and budget for the programs may be altered. From the analysis the national health statistics is derived and included in the report. The final report is then circulated to the regional and headquarters offices, donors, partners and other stakeholders.

The review process for Somalia and other countries in serious health crises is done yearly e.g. South Sudan, Iraq and Afghanistan. However the organizations policy is that the review and planning process should be done once in two years. This decision for a yearly analysis report is because in countries affected by civil war, the ministry of health for the country is non-existent or lacks the ability to come up with the national health priorities and plan for the country. In such situations WHO takes the responsibility as the leading health agency to provide a comprehensive health strategy plan for the country and also has the responsibility of dispatching national health statistics e.g. life expectancy rate, disease prevalence rates. For this figures to be accurate and authoritative the health analysis must be performed more frequently and as accurately as possible.

In countries like Somalia where there is no effective national government. WHO is the primary organization responsible for health. It also coordinates all other NGO and UN agencies efforts in matters related to health. Because of this huge responsibility and the changing political environment in Somalia which affect the health priorities for the country. The organizations crucial programs which are the immunization programs and
the emergency program cannot rely on the annual review process only to guide their strategic direction. Being a humanitarian organization they require accurate information to guide their activities. These programs take a continuous evaluation and review approach. They evaluate and monitor their strategies every time they deploy a major project like a national immunization campaign or an emergency response program to disease outbreaks or fighting.

The programs involved in immunizations evaluate their strategies and implementation of activities after every national immunization campaign. Some programs carry out three or more of this campaigns in a year, each campaign is unique depending on the prevailing political situation. The political situation affect access to the target population, the location or migration of the target population, the availability of labor for the campaign, (large campaign deploy more than 20,000 workers per campaign), the logistics support and immunization kits etc. If the security is poor in an area, the organization incurs more funds than budgeted, this may require the program to carry out resource mobilization from donors and partners or to undertake collaboration with local NGOs to assist in accessing the insecure areas. Sometimes the fighting’s could start in between the immunization campaigns paralyzing all activities. Since the immunizations are very expensive and highly perishable the program has to review its strategies to try and salvage the campaigns.

The monitoring and evaluation for these immunization programs is very well structured. After every campaign they carry out an evaluation report with a sample size of at least 15% of the target immunized population. This process involves a door to door interview of the respondents. They perform a health assessment with a template which helps to identify the impact of the campaign by capturing the numbers of immunized children,
how well the immunization was administered and the effectiveness of the awareness campaign. The template used for the health assessment is a standard template from the global health policy documents and customized by local health partners for Somalia. This ensures that the information gathered from the tools is all inclusive, understandable and comparative with other health agencies.

The findings from these assessments are invaluable in preparing the programs activities and budget for the next campaign. If the target population was not well immunized the campaigns must be repeated. The repercussions of an ineffective campaign are very dangerous. This is because of the natural nomadic activities of the Somalia people or migrating populations fleeing from fighting’s which could cause diseases to spread or a disease outbreak. Refugees from Somalia fleeing into Kenya recently reintroduced the polio virus to Kenya which has been polio free for almost a decade. In most cases low immunization or incomplete immunization is as good as no immunization. The immunization programs therefore must carry out an accurate evaluation of the immunization campaigns and deploy corrective actions as quickly as possible to prevent disease outbreaks and loss of lives. Such corrective actions can be in the form of emergency immunization campaigns.

The emergency program which handles any outbreaks and fighting’s also has an ongoing evaluation approach. The monitoring and evaluation for this program is well structured as a sub unit in the program with staff assigned to this task. This is because the best way to fight outbreaks is to stop them from happening, and the only way to do this is to carry out extensive health analysis. Also emergencies are sometimes unpredictable and each emergency is unique this means that every response strategy is different depending on the nature and magnitude of the emergency. The environmental analysis is carried out
using three main teams. The health surveillance team, whose role is to assess the health status in various parts of the country and advice the programs on health priorities. The funds specialists team, who are responsible for ensuring the programs have sufficient resources to run their activities, their primary role is to look for opportunities for funding and collaborations. The security team, whose role is to advise the programs on the security status in the every part of the country to assist the programs in planning and scheduling their activities, This is because the organizations strategies are mainly based on the current health priorities, the security situation and the availability of funds to implement the strategies.

The health surveillance team is mainly comprised of epidemiologists and medical laboratory experts. The surveillance is done through the early warning alert and response surveillance system (EWARNS) which tries to analyze data from clinics, hospitals, labs or any health facility to try and detect trends and predict disease outbreaks. The team also uses health information systems as a means of sharing data with all health agencies. They also work closely with other UN agencies like UNICEF and WFP. With data from all these agencies the surveillance unit is able to advice on disease outbreak preparedness and response.

The security office major responsibility is to liaise with the UN Security office in Somalia and gather as much information from the ground to access the security situation. This information is very useful in assisting programs to plan when and how to deploy the activities, to ensure that the staffs are safe and to prepare for fighting’s, which assist in emergency evacuation responses and identification of where to place mobile clinics and health workers to treat fleeing populations.
The funds specialists' role is to raise funds for the unit to help it deploy its activities. Since emergencies are unpredictable and therefore their budget estimates are never accurate, the unit is always sourcing for funds. Corrective action such as additional immunization campaigns also need a lot of funds that are not budgeted for, the fund specialist assists to raise funds to cater for unforeseen circumstances to help programs respond to any health crisis. The fund specialist is also always scanning for opportunities for collaborations with other agencies to reduce costs such collaborations could be in the form of sharing transport, human resource and warehouses during emergency situation.

The reports from these three teams are shared with all members in the emergency unit and other health sector agencies. Guided by these reports the team headed by the emergency coordinator with extensive collaboration from other agencies creates and adjusts the strategies and priorities for the emergency response team. The team must decide which emergencies to respond to depending on the health priorities, the security situation on the ground and the financial resources available and the response strategies and priorities of other agencies. Sometimes the team may opt to collaborate or support a response strategy of another organization if that is the best solution. After every emergency response a performance evaluation report is compiled. The measures/metrics used in the performance evaluation are not standardized and are unique to the unit. The measures used mainly try to capture the effectiveness of deployment of supplies and human resource to the emergency site and the effectiveness of all the analysis teams in predicting the emergency.
4.4 OBSTACLES TO STRATEGY EVALUATION

The largest obstacle to strategy evaluation is the insecurity problem. Insecurity causes lack of access to people, hospitals and institutions within the country. This makes it very difficult to collect information on the progress of the organizations activities. As a result, the organization looks for alternative ways of collecting information, they rely on other organizations in the affected areas to assess the implementation and impact of their activities and strategies, and as a result the organization may make decisions based on evaluation data that is incomplete or inaccurate.

Another obstacle to strategy evaluation is the lack of staff trained on performance evaluation. The quality of evaluation data depends on the ability of the evaluator to know what to measure and how to measure it. Many of the national staffs working in Somalia for the organization lack the knowledge and skill to collect and analyze health data. This type of evaluation requires use of health experts. The organization lacks a human resource that is able to carry out an accurate performance evaluation and analysis. The organization has a shortage of health experts, those available are mainly concerned with strategy implementation which leaves little time and efforts put towards strategy evaluation. Sometimes the organization may result to using non qualified staff to perform the evaluation which compromises the quality of the information gathered.

Another obstacle to the evaluation process is the lack of funds. The organization is primarily donor funded. The money received is not always enough to implement strategies. Under this circumstances the programs are under pressure to reduce costs and do not have resources to train staff on evaluation. Deployment of staff to the ground to do any assessment is a very expensive process this minimizes the number and frequency...
An obstacle to the accuracy of the strategy evaluation report is the use of internal staff to perform the analysis or use of staff involved in developing and implementing strategies to perform evaluation of those strategies. This causes a conflict of interest as in a way the staff are actually evaluating their plans and activities. Therefore most of the performance evaluation process is biased and the accuracy of the information is questionable. Ideally WHO works as independent evaluators to the ministry of health. In the Somalia context WHO acting with no ministry of health present requires external evaluation. However due to the insecurity problem and the lack of sufficient funds the organization is unable to hire independent evaluators.

The strategy evaluation or performance measurement is not viewed as a process for organizational learning but as a process for victimizing individuals. Because at times the results from this process have been used to penalize some employees, the whole process is viewed negatively by most employees and receives very little support for them.
CHAPTER 5: SUMMARY, RECOMMENDATIONS AND CONCLUSIONS

5.1 SUMMARY AND CONCLUSION

The research findings indicate that strategy evaluation is carried out at the WHO Somalia office. The organization carries out a yearly evaluation process called the joint program review process where all program managers present their performance reports. The review process is attended by all program managers, the country representative and the regional office advisors. It is during this process that the performance and strategies of the programs are analyzed and corrective measures discussed. The results of this exercise are shared with the regional and headquarter offices and all other stakeholder who also make an input on the corrective actions to be taken if deviation is noted.

Due to the lack of a national ministry of health in Somalia and the dynamic political environment in Somalia, and the effect these has on existing strategies and their implementation. Apart from the annual program review process, the crucial programs in the organization take a form of continuous approach to evaluation and constantly evaluate strategies after deployment of large projects. However the other programs solely rely on the review process to evaluate their strategies.

The main obstacles common to all the programs in strategy evaluation are the insecurity in Somalia, the lack of a trained human resource in monitoring and evaluation and the lack of sufficient funds allocated for the evaluation process.
5.2 RECOMMENDATIONS

The organization needs to allocate more resources for the strategy evaluation process as this is one of the main obstacles to many programs when carrying out the process. Each program should factor in strategy evaluation and monitoring in its budget, this will ensure that there are sufficient funds for the process. Sufficient funds for the evaluation process will also enable the organization to hire independent evaluators to evaluate the organizations activities. An independent evaluation will help reduce the bias of using internal staff to perform the evaluation.

The organization must also be committed to capacity building. They should allocate resources and carry out training on evaluation and monitoring. This will improve the quality of the data collected in the evaluation process. As the organization has a shortage of staff, the staff trained on evaluation can be used to across the different programs.

The strategy evaluation process should not be used to victimize the staff as this creates a negative attitude towards the process, it should however be viewed as an opportunity for organizational learning. The importance, role and steps of strategy evaluation should be communicated to all levels of staff in the organization. This will ensure that the employees will make an objective contribution to the process. The strategy planning process should also take an all inclusive approach. All employee input should be considered when making the organizational strategic plan. The final plan should be communicated to all staff so that they can collectively work towards a common goal. This will assist in strategy evaluation as the employees will be able to identify gaps in strategy implementation.
5.3 LIMITATIONS OF THE STUDY

Because of the time duration of the research, the researcher was not able to interview more staff on the strategy evaluation process. The researcher had only the opportunity to interview the program managers in Nairobi. More valuable information would have gathered if there was an opportunity to interview the staff in Somalia.

The research was a case study of the WHO Somalia office which gathered information on this organization only. The study would have been more helpful especially for the recommendations if the research has been extended to other UN agencies working in Somalia to see how they carry out their evaluation process for comparative purposes.

5.4 SUGGESTIONS FOR FURTHER RESEARCH

The study focused on the WHO Somalia office. Further study on WHO offices operating in countries affected by civil war like South Sudan, Iraq, Congo and Afghanistan would be helpful to see how those countries undertake the strategy evaluation process.

Also further comparative research on strategy evaluation on other humanitarian organizations operating in Somalia would also give more information and the organizations could use the findings to compare their strategy evaluation process and see how they can improve their process.
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APPENDIX I: INTERVIEW GUIDE

PART A: DEMOGRAPHIC INFORMATION

1. Name of the interviewee?
2. What is your position in the organization?
3. In what program do you work in the organization?
4. How many years have you served in the organization?

PART B STRATEGY EVALUATION

1. Briefly describe how you perform strategic planning for your program?
2. What are the main obstacles you experience in the strategy implementation process?
3. Do you perform strategy evaluation in your program?
4. Who is responsible for carrying out the evaluation?
5. Briefly describe the strategy evaluation process (Methodology and Metrics used)
6. How were the metrics above (if any) formulated?
7. How often is the evaluation done?
8. What do you do with the findings of the evaluation process? (Who are the results communicated to?)
9. Are those involved in the strategy evaluation process, trained on it?
10. How do the performance evaluation results affect the program or staff?
11. How do you deal with corrective action when deviations are detected?
12. Is the above process you have just described unique to your program or is it applied to the whole organization?
13. Challenges experienced in carrying out evaluation?
14. Any suggestion on how to improve the evaluation process?