MONITORING & EVALUATION PRACTICES AND PERFORMANCE OF COUNTY FUNDED HEALTH PROJECTS IN MOMBASA COUNTY, KENYA

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A RESEARCH PROJECT SUBMITTED TO THE SCHOOL OF BUSINESS, ECONOMICS AND TOURISM IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE AWARD OF THE DEGREE OF MASTER OF BUSINESS ADMINISTRATION (PROJECT MANAGEMENT) DEGREE OF KENYATTA UNIVERSITY

FEBRUARY 2025

DECLARATION

Declaration by the Student

I declare that this research project is my original work and has not been presented for any degree or any other awards in any other university.

Signature……... Date: ……

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Declaration by the Supervisor

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

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DEDICATION

This research project is especially dedicated to my entire family members; my dad Philip, my mum Bennie, my sister Roselyn and my brother Mike, for their love, encouragement and support throughout my studies.

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OPERATIONAL DEFINITION OF TERMS

M&E System: Is the process of tracking, reviewing and regulating the progress to meet the performance objectives defined in the project management plan. It is operationalized by logical framework matrix, M&E reports and communication frequency.

Project Management Expertise: Is the skills or knowledge in the field of managing projects. It is operationalized by M&E skills, project staff competence, and project leaders experience.

Resource Allocation: Is the assigning and managing assets in a manner that supports project's goals. It is operationalized by funds approval procedure, funds disbursement, and material allocation.

Stakeholder Involvement: Is the interacting practices with the individuals, organizations which are directly or indirectly affected by the project to ensure overall benefit to all. It is operationalized by stakeholder identification, stakeholder communication, and stakeholder needs determination.

ACRONYMS AND ABBREVIATIONS

ADP	Annual Development Plan
CDB	County Development Board
CHSSIP	County Health Sector Strategic and Investment Plan
CIDP	County Integrated Development Plan
ERP	Enterprise Resource Planning
M&E	Monitoring and Evaluation
NDPC	National Development Planning Commission
PMBOK	Project Management Body of Knowledge
PMI	Project Management Institute
RBMES	Results Based Monitoring and Evaluation System
RBV	Resource Based View
SPSS	Statistical Package for Social Science
US	United States

ABSTRACT

In so far as they promote equitable economic growth and sustainable development, county-funded health programs have a positive impact on the county's economic and social development. The monitoring and evaluation of health projects, particularly in the County governments are not completed on time despite significant resources allocated to their implementation and despite the fact that these projects significantly improve the lives of community members, necessitating an intervention. According to the literature currently available on County Integrated Development Plans, Mombasa County has a high number of health initiatives that have been started since 2014 and an equivalent number of these projects that have stalled or failed completely. The main cause of this stalling or failure has been ~~posited~~ as the absence of a system for monitoring and providing feedback on the projects' implementation and development. A monitoring and evaluation system can offer an intervention. Therefore, the goal of this study is to determine how monitoring and evaluation procedures affect the effectiveness of county-funded health projects in Mombasa County. The study's specific objectives are to determine how the effectiveness of county-funded health projects in Mombasa County is affected by stakeholder participation, resource allocation, project management expertise, and monitoring and evaluation mechanisms. Cross-sectional research design was used for the study. The target population, and hence the unit of analysis of the study were 32 county-health projects in Mombasa County. Through stratified random sampling technique, a sample of 102 respondents was selected. The sample respondents comprised mainly key members of project implementation committee. The study was anchored on stakeholder theory, resource-based theory and program theory respectively. Primary data for the study were collected using semi-structured questionnaires and applied pick-and-drop procedure. Cronbach's alpha testing was applied to test for reliability of the data collection instrument. Further, both descriptive and inferential statistical data analysis were carried out. For descriptive statistical analysis, findings were presented using tables and graphs as appropriate. Ordinary Least Squares Diagnostic tests, were carried out before the multiple regression modelling. Cronbach alpha coefficient above the threshold of 0.7 was obtained for all the explanatory variables of the study. This implied reliability of the data collection instrument. Results from the multiple regression model showed that all the predictor variables were statistically significant at $\alpha = 0.05$ level of significance. More specifically, resource allocation was found to have the highest predictive power on County -health projects ($\beta = 0.519$, $t = 2.403$, $\alpha = 0.042$) followed by stakeholder involvement ($\beta = 0.438$, $t = 2.201$, $\alpha = 0.035$). Results for the other two predictor variables, M&E systems ($\beta = 0.407$, $t = 0.122$, $\alpha = 0.00$) and project management expertise ($\beta = 0.438$, $t = 2.916$, $\alpha = 0.00$) respectively. Drawing from the study findings, it is concluded that all the four posited predictor variables for county-health projects' performance are statistically significant and sufficient for such project management decision making. Further, and arising from the findings, the study recommends that emphasis and efforts be made on adequate resource allocation and robust stakeholder involvement for better performance of such projects. For further research it is recommended that other predictor variables drawn from the other project management knowledge areas be studied and their predictive powers on performance be compared with current results for better understanding and knowledge creation.

CHAPTER ONE

INTRODUCTION

1.1 Background of the Study

Due to their reliance on high-tech components and the level of precision they must maintain, projects in the healthcare industry are among the most challenging in contemporary practice (Iskandar, Hanna, & Lotfallah, 2019). The majority of the global health initiatives in 2018 encountered schedule and budget overruns and underperformance, while a small minority of them were successful (CityScape Intelligence, 2018). Ex-post assessments are required since ex-ante evaluations are no longer sufficient in light of the high likelihood of project failure in general (PMI, 2017). By prohibiting people from using services or subjecting them to harmful treatment, ineffective public health initiatives reduce health outcomes by limiting access to adequate care and resulting in the wrong care being provided.

To assess the effectiveness of development projects, organizational procedures should create reliable project evaluations and reporting systems. A strong M&E strategy must be in place for projects in the healthcare industry to guarantee accountability. Timely and trustworthy M&E planning enables accurate, evidence-based reporting that supports management decisions and project implementation. Project performance is improved as a result (Muhammad, 2016). Monitoring is viewed as a procedure that provides information and ensures that management makes use of that information to assess the influence and unintended as well as intended project repercussions (Gyorkos, 2018). It checks to verify if the planned objectives have been accomplished. Monitoring uses a collection of important indicators and targets to deliver fast and reliable information for decision-making, progress and performance evaluations, and procedures (Montao, Arce, & Louman, 2016). Monitoring is the systematic data

collection that uses preset indicators to evaluate the results of a project or health intervention. Monitoring data are used in evaluation, but analysis goes much beyond. In order to analyze the trends in the impacts and impact of the project, evaluation makes use of the data and information produced by the monitoring system (Ochieng 2020).

In the US, Mackay's (2017) study concentrated on government projects in the Washington, D.C., area and discovered that monitoring and evaluation planning was crucial for enhancing project success. A PASSIA (2018) evaluation found that in central China, the M&E techniques employed by contractors and government agencies had an impact on the success of sanitation projects.

In Africa, delays in the execution of government-funded projects are a common occurrence. Aibinu and Jagboro's 2019 study found that in Nigeria, construction project delays are becoming the norm. The National Development Planning Commission (NDPC) was founded in Ghana by the government as a regulatory tool to encompass the fundamental ideas behind M&E activities. NDPC used the Results-Based Monitoring and Evaluation System (RBMES) and Results-Based Budgeting (RBB) to enhance its M&E procedure. Cost effectiveness was ensured, institutional capacity was built, good governance, accountability, and trust in partners and the government were all promoted.

In their 2018 study in Libya, Ayarkwa, Ayirebi, and Amoah focused on studying the external factors that influence the success of M&E on projects in the context of educational institutions. It was shown that factors including stakeholder participation, support, and M&E perspectives had a big impact. To enhance project operations, the M&E team needs adequate training (Aaltonen, 2018).

Devolved governments were established in Kenya in 2010 following the ratification of

a new constitution. The county governments get funds from the national government for development initiatives, which is equivalent to at least 35% of the national budget. According to the Ministry of Devolution (2017), counties have begun important development initiatives. Hospitals, sports facilities, roads, and water supply projects are a few examples of them. Nevertheless, as of 2018, the majority of counties had project implementation failure rates that, in some cases, reached as high as 60%, as in the counties of Kisumu and Bomet, while in the counties of Kitui, Kwale, Mombasa, Kilifi, Garrisa, TaitaTaveta, Kisii, and Makueni, nearly 52% of development projects had failed (CIDP Report, 2018). As a whole, the counties' development projects only achieved 55% of their intended goals (Republic of Kenya, 2018).

The same is true for attempts to improve public health, which regularly run into challenges like ineffective institutional systems, a lack of leadership, and information opacity. The bulk of public health projects also lack skilled M&E professionals who are familiar with M&E systems and have the ability to develop appropriate tools, which contributes to the projects' dismal performance (Ombati, 2019).

1.1.1 Project Performance

Project performance is the state in which an intervention has accomplished its goals. Projects must create goods that adhere to established quality standards in order to satisfy the beneficiary's anticipated demands. Determining whether an endeavor is successful or unsuccessful is rarely very practical. Systems for monitoring and evaluating projects can be used to determine their effectiveness, but they must first have the support of management (Boakye & Liu, 2018). To serve as a guide for project operations and aid everyone involved in staying on track, the criteria for evaluating project performance are decided upon at the project's commencement. Successful initiatives stick to their spending limits, timelines, and quality requirements. Unsuccessful individuals (PMI,

2018).

Performance was categorized into four categories by Shenhar (2019). Cost, quality, production efficiency, and time efficiency are some of these criteria. When used as inputs to other M&E processes, performance gives specifics on the project's performance in terms of scope, time, cost, resources, quality, and risk (PMBOK, 2018). Pinto and Slevin (2018) conducted a study in which they spoke with more than 650 project managers and discovered that simply fulfilling quality, cost, schedule, and performance standards is not enough to define "project success." Client satisfaction is important, too.

According to defined specifications, within the allocated duration, budget, and scope, a project is successfully executed in a safe manner (Nibyiza, 2019). Indicators for client satisfaction, financial adherence, and schedule adherence are used in the current study to evaluate the success of county-funded health programs in Mombasa County.

1.1.2 Monitoring & Evaluation Practices

The act of gauging, reviewing, and regulating a project's advancement toward the accomplishment of performance objectives outlined in the project management plan is referred to as monitoring and evaluation (Kahilu, 2018). Monitoring involves status reporting, progress measurement, and forecasting in contrast to evaluation, which is methodical and impartial. Occasionally, monitoring data may reveal a significant departure from project expectations, necessitating the need for an evaluation to examine the underlying assumptions and premises that guided the project design (Crawford & Bryce, 2018).

Hobson, Mayne, and Hamilton (2014) assert that monitoring and evaluation procedures

include M&E planning, participation of all stakeholders, logical reporting, effective and efficient resource allocation, continual learning for better decision making, and reporting of results. In order to enable continuous improvement in project performance, PMBOK (2017) asserts that Monitoring & evaluation combines a number of coordinated components such stakeholder involvement, time management, good communication of findings, auditing, and proper allocation and usage resources. The M&E techniques used in the current study, however, are stakeholder involvement, resource allocation, project management expertise, and M&E systems.

Participation of stakeholders is essential to the success of health projects. Participating with the stakeholders makes it possible for them to support and own the initiative, which in turn calls for open financial management (Khan, 2018). Stakeholder participation in project implementation includes a range of interests and levels of involvement in project creation. A project's chances of success are increased by increasing stakeholder involvement and managing them successfully (Bryceson, 2016). The project's leadership must recognize the monitoring efforts of the numerous participants, including the funders, implementing organizations, project teams, and interested groups like churches and environmentalists. It should also be understood that monitoring must be routine and take into account the risks associated with the project and its execution in order to be a valuable management tool. In her research on the factors affecting the timely completion of projects funded by the constituency development fund in the Kinangop constituency, Muturi (2019) found that internal and external stakeholder participation in the project planning and execution has a positive impact on project completion time.

Resource allocation requires balancing competing requirements and objectives and selecting the best course of action in order to make the most effective use of limited

resources and obtain the best return on investment. Resource allocation becomes a challenge since a project's resources are never in sufficient supply and because a particular resource might be used in a number of different ways. Based on past experience and the distinctive features of each M&E system, it is possible to predict the quantity of resources needed for each M&E phase. The M&E systems that are designed and used for purposes that are compatible with the project's execution of the system are the most effective ones. A component of this capacity is represented by the resources that can be used for M&E (Cristina, 2019). For the project to be successful, the project team must be provided with appropriate resources to play to their strengths.

Technical expertise in technology is essential for project monitoring and controlling due to the growing obstacles in today's technology-enabled projects (Kwak, 2018). This is especially true for project management techniques that make use of technology tools. Musomba (2018) asserts that organizational technical ability in conducting evaluations, assessing the level of human capital participation in policymaking, and motivation to question management decisions can be important determinants of how the M & E practices on lessons learned, communicated, and perceived.

Depending on the application type, industry, and country, different M&E systems exist (Fitzgerald, 2018). Therefore, a good M&E system should be flexible and creative while being tailored to specific contexts. When constructing an M&E system, organizations take into account the lessons discovered by competing organizations (Briceno, 2018). Since managers, donors, field staff, partners, policy makers, and project participants are just a few of the audiences for M&E, it's important to comprehend both the function and application of M&E systems as well as the involvement of stakeholders.

1.1.3 County Funded Health Projects in Mombasa County

Since county governments in Kenya receive significant government funding to carry out various health projects, project monitoring and evaluation are essential. Four tiers of care make up Kenya's health delivery system, which is duplicated at the county level. Community care, primary care, primary referral, and secondary referral are some of these tiers. The aim of the medical speciality known as "community care" is the health of the residents of a specific geographic area. Community services are intended to increase service demand. Primary care refers to the regular medical attention that a healthcare provider provides. This healthcare professional typically acts as the patient's first point of contact, primary source of continuous care, and coordinator of any specialist care the patient may need. The main and secondary referral services include the process through which general practitioners who work in a university outpatient and inpatient primary care center recommend patients to specialists. Primary care and referral services are primarily concerned with meeting demand.

According to the second County Health Sector Strategic and Investment Plan (CHSIP II) 2018–2022, Mombasa County is home to four Level 4 public hospitals, including the Port Reitz, Tudor, Likoni, and Kenya Navy, as well as the Coast Level Five Hospital, a referral facility servicing the entire coast region. In the county, there are 26 public dispensaries and 11 health centers. Other renowned private hospitals, such as the Aga Khan Hospital, Mombasa Hospital, and Pandya Memorial Hospital, nursing homes, and private health clinics round out the list.

Since the beginning of devolution in 2013, the county administration of Mombasa has undertaken a number of initiatives with the aim of improving health infrastructure as a key pillar in health transformative agenda. To achieve this, a number of healthcare

facilities up to the caliber of sub-county hospitals have been renovated or constructed. These institutions include Likoni Sub-County Hospital, Tudor Sub-County Hospital, Marimani, and Chaani (Mombasa Annual Development Report 2021). The county as a whole has 206 functioning facilities. The required health facility per population ratios are 20 hospitals, 480 primary care, and 210 community units, as opposed to the current configuration of 16 hospitals, 343 primary care, and 44 community units.

610,257 men and 598,046 women make up Mombasa County's 1,208,333 inhabitants (KNBS, 2019). According to the County Annual Development Report for 2021, the two sub-counties with the highest populations, Kisauni and Nyali, account for 21 and 20 percent of the county's population, respectively, while Jomvu has the lowest population at 13 percent.

According to the MCIDP II (2018–2021), allocations to the health department represent an average of 23% of the county budget. The department of health's budget is frequently supported by the national shared income allocation, conditional grants from the federal government, foreign grants and loans, as well as local revenue, mostly user fees from county public hospitals. Around 69% of the total comes from national shared revenue, with the remaining 25%, 4.4%, 1.3%, and 1.3% coming from local revenue, conditional grants, and foreign grants and loans, respectively.

The yearly county funding for the department of health services is approximately Kshs3.4 billion, with development costs making up 88% of the overall budget and assisting in the execution of flagship projects that have an effect on service delivery in Mombasa County. The budget year is the intended timeframe for the projects' implementation. Only 10 of the 42 projects, or 24% of the total planned projects, were finished by the deadline of the end of June 2021. Due to the significant investment for

health initiatives in Mombasa County, it is important to track and assess the development and success of the health projects.

1.2 Statement of the Problem

Monitoring and evaluation (M&E) has become an increasingly important tool within the global efforts in achieving environmental, economic and social sustainability. The success of a project is crucial because it guarantees that it will continue to be lucrative both technically and strategically, which will lead to organizational growth. M&E stimulates innovation to provide better results and helps projects scale up by enhancing learning. Since the establishment of county governments, both the county and national governments have expressed interest in funding health initiatives in counties. The Mombasa County government has launched several health projects in each of the six sub-counties. For instance, four projects were started in the Kisauni sub-county during the fiscal year 2018/2019, including the construction and furnishing of the 30-bed Vikwatani level 4 hospital as well as the Marimani Hospital. The projects received a total of 54 million Kenyan Shillings (Mombasa ADP report, 2022). The Mvita sub-county and the other four sub-counties began similar measures in 2018, including the outfitting of 5 level-4 hospitals. A total budget of roughly 240 million Kenyan Shillings was allocated to the projects (CIDP 2022). Only 24% of the county government-sponsored health projects during this time were documented as finished, while (32) 76% of them are still in progress and others have reached various stages of inactivity.

Various local studies have been done on M&E practices and its impact on performance of projects. For instance, a study by Moraa (2019) demonstrated that projects with poor or nonexistent monitoring and evaluation processes typically perform poorly when scope, timing and resource usage are considered. The optimal practice, according to Mbiti and Kiruja (2015), mandates project monitoring. The reviewed studies present

methodological gaps as well as contextual gaps as very few were focused on health projects funded by county governments. In Mombasa County, little is known about the effects that stakeholder involvement, resource allocation, project management expertise and M&E systems may have on project performance. It is also not known whether these projects apply mentioned M&E practices hence the purpose of the study is to investigate the influence of Monitoring and evaluation practices on performance of county funded health projects in Mombasa County, Kenya.

1.3 Objective of the Study

To investigate the influence of monitoring & evaluation practices on performance of county funded health projects in Mombasa County, Kenya.

1.3.1 Specific Objectives

1. To establish the influence of stakeholder involvement on the performance of county funded health projects in Mombasa County, Kenya.
2. To examine the influence of resource allocation on the performance of county funded health projects in Mombasa County, Kenya.
3. To determine the influence of project management expertise on the performance of county funded health projects in County Government of Mombasa County, Kenya.
4. To investigate the influence of M&E systems on the performance of county funded health projects in Mombasa County, Kenya.

1.4 Research Questions

1. What is the influence of stakeholder involvement on the performance of county funded health projects in Mombasa County, Kenya?
2. What is the influence of resource allocation on the performance of county funded health projects in Mombasa County, Kenya?
3. What is the influence of project management expertise on the performance of county funded health projects in County Government of Mombasa County, Kenya?
4. What is the influence of M&E systems on the performance of county funded health projects in Mombasa County, Kenya?

1.5 Significance of the Study

The outcomes of the study are expected to have substantial ramifications for the county governments as well as the federal government, who would learn how M&E policies affect project success. The study's conclusions would give county government management critical information that they may use to identify the areas where development projects are experiencing obstacles. The conclusions might be useful to other county administrations.

The study's conclusions would benefit policy makers by enlightening them on monitoring and evaluation practices, which are essential to project success and will subsequently assist them in establishing guidelines for how health projects should be handled. Experts and academics predict that the study's findings would contribute to the body of monitoring and assessment research. The study's conclusions would act as a starting point for additional research into the phenomenon by aspiring academics, who would then compare their findings.

1.6 Scope of the Study

The investigation into monitoring and evaluation procedures as they relate to the effectiveness of county-funded health programs wase the exclusive focus of the study. This indicates that the study exclusively focused on health projects funded by the county government and not on projects financed by donors. The health initiatives launched by the county administration of Mombasa between 2018 and 2022 was the study's geographic emphasis. The project managers, local leaders, county revenue officials, the health technical team, and the monitoring and evaluation staff of these county-funded health projects were the study's target audiences. Health project reports from the five most recent years, from 2018 to 2022, was used in the study.

1.7 Limitations of the Study

The researcher took careful precautions to ensure the success of the study. The study is still likely to contain a number of flaws despite these efforts. Because stakeholders in health projects may not be easily accessible or eager to respond when contacted, information accessibility may not be very straightforward. Overcoming this challenge was made easier by presenting a letter of authorization from the university describing the objective of the research study.

1.8 Organization of the Study

This proposal is divided into three chapters. The first chapter, which also serves as an introduction, contains information about the background, problem statement, aims, research questions, importance, study limits, and organization of the study. A conceptual framework, a theoretical analysis, an empirical analysis of the methods used for monitoring and evaluating, including the involvement of stakeholders, resource allocation, project management expertise, M&E systems, knowledge gaps, and a summary are all included in the second chapter of the review. The methodology portion

of chapter three covers the following topics: research design, target population, sample size and sampling techniques, data collection instruments and procedures, data analysis approaches, and ethical considerations.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter explores the existing literature on monitoring and evaluation practices and it is structured systematically beginning with theoretical review, empirical review and a conceptual framework.

2.2 Theoretical Review

The theoretical foundation of the study includes stakeholder theory, resource-based view theory and program theory.

2.2.1 Stakeholder Theory

One supporter of the stakeholder concept is Edward Freeman. In depth discussions of corporate ethics and organizational management stakeholder theory were first presented by him in 1984. The literature included ethics and values in organizational management. In his work, Edward Freeman outlines and advises management on how to best take the interests of the stakeholders into account. The groups that make up the stakeholders of the corporation are named and modeled by him. In order to understand the nature of stakeholder relationships based on processes and outcomes, it is important to understand the underlying assumptions of stakeholder theory, which include the notion that there is legitimacy in stakeholders' interests that have intrinsic value and that there is no superior interest dominating others (Kirsi, 2010).

The theory contends that by balancing their interests with those of their member groups, organizations can use the diversity of their constituent groups to further their goals (Kirsi, 2010). An organization that adopts a stakeholder involvement strategy will perform better economically and experience fewer friction with stakeholders, claim

Hassan and Kamil (2010). According to Lynda (2016), the collaboration of legitimate stakeholders is necessary for a project to be completed successfully. This illustrates that in order to ensure the project's long-term profitability, project managers should effectively manage the project's procedures for the benefit of the project's stockholders. For every project to be successful, stakeholders must be included.

A web of vested interests that are protected by politicians sabotages numerous county government-funded initiatives by preventing meaningful stakeholder participation in project creation and execution. The notion is pertinent to the current study since stakeholders are crucial to the success of health projects. If stakeholders are not included, the project will not be implemented successfully. The theory supports stakeholder involvement variable.

2.2.2 Resource Based View Theory

The primary RBV theory writings from the 1980s and 1990s were written by Wernerfelt, Prahalad, Hamel, Barney, and others. The Resource Based View hypothesis stipulates that resources must be static and varied. In this context, it is assumed at the outset that each firm has distinct abilities, skills, and other resources (Barney, 1991). For instance, the firms would be unable to create unique strategies to compete with one another if they had an equal amount and mix of resources because what one firm can do, so can the other, limiting the chance of obtaining a competitive advantage.

The resource-based viewpoint hypothesis states that the only organizations that can gain a competitive edge are those that can make use of a variety of resources. Second, the RBV operates under the presumption that each firm's resources are fixed and immutable. Due to the immobility of resources, it is challenging for firms to copy the resources of competitors, which prevents them from creating strategies that are similar

(Müller & Jugdev, 2012).

RBV proponents assert that rather than purchasing new resources for each opportunity in the external environment, it is possible to identify and take advantage of opportunities in the external environment by utilizing the resources the company already has in a creative way that is compatible with its goals (Rothaermel, 2017). In order to find potential assets, talents, and capabilities that could give the business a competitive advantage, the RBV theory tries to direct management's attention on internal resources.

Only fast and proper resource deployment can ensure the success of county health-related projects. The idea states that the success of the county health initiatives is linearly related to the resources available and the unique talents of the project's team and leadership. This result validates the resource allocation variable.

2.2.3 Program Theory

Huey Chen, Peter Rossi, Michael Quinn Patton, and Carol Weiss created the program theory (1195). This theory focuses on who is in charge of the change and how it can be implemented. The general logic employed in an intervention is demonstrated by the logical models that are frequently used to represent the program theory. The theory belongs to the field of applied development evaluation and theory of change. Because it satisfies the need for conducting assessments to supplement the findings and offers a decisive process to resolve problems, program theory is a useful tool in monitoring and evaluation. It also provides ways to affect the regions that have a say in evaluation (Sethi and Philippines, 2017).

According to Lipsey (2016), it is a proposition on the transformation of input into output. comparing the expected and actual results to assess the transformation. It serves as an example of the processes in the programming process that are supposed to have

an impact on the results. A program theory, according to Rossi (2017), involves an organizational strategy for allocating resources and planning program activities in order to guarantee that the planned service system is established and kept current. The theory supports resource consumption plans that look at how the target population gets the required help. The interconnectedness of the service delivery systems enables this. The idea provides thorough justifications for how the targeted actions for a specific target demographic represent the anticipated societal benefits. Uitto (2018) gives an illustration of the benefits of using theory-based monitoring and evaluation frameworks, such as the ability to link specific projects or activities to specific project outcomes and the capacity to recognize intended and unintended program implications. The evaluator can understand how and why the program works thanks to theory-based evaluations (Rossi, 2017). The M&E systems variable is supported by the program theory.

2.3 Empirical Review

This section reviews literature from prior scholars regarding to monitoring and evaluation practices on performance of projects.

2.3.1 Stakeholder Involvement and Projects Performance

Several empirical literatures have been done on stakeholder involvement. Wachira and James (2018), for example, examined significant factors that affected the way community-based projects were implemented in Kiambu County. He found via his research that engagement of individuals or the community had a substantial impact on the implementation and effectiveness of community-based projects. The study also found that M&E contributes to the project team's capacity to successfully carry out projects.

Njogu (2016) carried the research on the Nema Automobile Emmission Control Project in Nairobi County, Kenya to determine the effects of stakeholder involvement on project success. A descriptive survey was employed as the research design for this investigation. The survey included 181 managers, project managers, operation managers, and quality control officers. Stratified sampling was employed. A questionnaire was used to collect the primary data. According to the study, stakeholder participation in project monitoring has a favorable and significant impact on project performance for car emission reduction programs.

Nyabera (2018) investigated the impact of stakeholder involvement on the execution of projects in Kenya using the example of initiatives supported by Compassion International in the Mwingi Sub-County. Both qualitative and quantitative research techniques were used in this study. The target audience for the four projects financed by compassion was 391 stakeholders. The study found that stakeholder involvement in project initiation had a substantial impact on project execution in projects with stakeholders included in the project governance structure. Unlike programs backed by the local government, the study focused on projects supported by donors with effective M&E procedures. As a result, it is impossible to apply the study's conclusions to the success of health initiatives.

Nyandika and Ngugi (2014) investigated the relationship between the implementation of infrastructure projects and the involvement of stakeholders. A descriptive research methodology was used to analyze the data. The study discovered a strong, direct connection between the success of road development and the involvement of stakeholders. Since the study focused on stakeholder involvement, it is pertinent. However, because it didn't focus on programs backed by the Mombasa County

administration, the study had a context gap.

2.3.2 Resource Allocation on Performance of Projects

According to a study by Woodhill (2015) on the effects of resource adequacy on project performance and the elements that contributed to the success of monitoring systems, a number of beneficial elements, including the availability of financial resources, a strong political commitment, organizational capacity, structural soundness, and strong M&E Systems design, lead to overall success. The majority of organizations never support monitoring, especially when it comes to money and theft, and only carry out M&E tasks when they are really necessary. According to the study's findings, having the resources required for M&E is crucial for completing any assignment. Additionally, it would be questioned whether the data obtained from an M&E system with insufficient funding was accurate. It is more possible that crucial information was left out since its usage would be useless.

In their inquiry on resource mobilization for the long-term sustainability of women's group projects in Vihiga County, Odenyo and James (2018). Results regarding the project team's being able to oversee project operations indicated a positive connection between human resource development and effective women's group projects. This means that the project team needs to undergo training and attend seminars to enhance their management skills in order for a project to be successful.

The impact of human resource capacity on NGOs' project outcomes in Kenya was studied by Nyakundi (2016). 34 NGOs in Kenya were the focus of the study, which used a cross-section survey approach. The study found that employees who oversee NGOs' donor-funded projects should have the required technical know-how. The research states that technical staff abilities are important for providing practical advice in the development of successful results-based performance monitoring systems and

have an impact on M&E implementation. According to the study, the utilization of M&E would become 0.122 percent more efficient for every unit improvement in technical proficiency. Initiatives can therefore achieve their goals if they have expert M&E expertise. In spite of the growing demand for M&E expertise, it was found that human capacity is related to the capacity of people who have been given M&E duties to complete. An M&E system requires a variety of knowledge and abilities to manage each phase. To manage M&E, organizations must invest in trained workers, whether by hiring individuals who have already undergone training, recruiting those who do not, or by engaging external consultants for more specialized inputs.

Research on improving M&E capabilities for approved state projects in Europe was conducted by Douglah (2017). On ongoing projects, the study used a survey methodology. The study discovered that capacity building strategies were used by development organizations all across the world to improve M&E efficiency. The study, however, focused on state programs rather than health projects.

2.3.3 Project Management Expertise on Performance of Projects

The planning, financing, implementation, regulation, and assessment of special activities for acceptable and sufficient outputs based on project objectives constitute the methodical process of project management (Patel, 2016). Vittal (2017) did a study on the effect of technology awareness on project monitoring and controlling due to the higher issues in technology enabled projects where technical instruments are used in project management practices. This study advanced knowledge of the fundamental connections between technical proficiency and project performance as well as the function of the project team in encouraging enhanced project performance. The study discovered a link between successful project outcomes and project teams with the

required technical proficiency. The study also demonstrated how challenging it is to disentangle technology use from project performance, how the lack of these connections resulted in subpar project performance, and how having a technical specialist in M&E is essential for assisting a project team in successfully and efficiently managing projects.

A study conducted in 2015 at the college of the built environment in Australia by Sunindijo (2015) concentrated on the multi-layered project management activities that had a major impact on the project's performance. The four essential characteristics for project managers were previously recognized by other studies as being technical, human, stakeholder, and mental skills. Finding out whether technical project abilities have an effect on project performance was the study's main objective. To collect data, 107 project team members filled out surveys. The results of the investigation show Project performance is affected by a variety of skill factors, including findings, visioning, sensitive intelligence, interactive skill, dynamic leadership, interpersonal influence, integrity, quality management, documentation and agreement administration, and dynamic leadership.

Retaining and disseminating information are essential, according to Harry's (2017) study on social practices and knowledge management in projects. The study set out to clarify how social factors might support knowledge management abilities in such a setting. Case study analysis research in the construction industry served as the study's foundation. The primary study finding demonstrated the relevance and value of include community-based techniques in information dissemination by showing how knowledge transfer and learning processes in project design considerably depend on social trends, practices, and processes. According to the study's findings, a stable M&E requires a

strong human resource basis in terms of quantity and quality. M&E human resource strategies are therefore necessary for both achieving and maintaining it.

2.3.4 Monitoring & Evaluation Systems and Performance of Projects

In order to investigate the monitoring and assessment processes for P3 project performance in Nairobi County, Mokua and Kimutai (2019) conducted a study. The research design was an online survey. Questionnaires and interview schedules were utilized to collect the data. 161 project staff members across 26 projects were the objective. Ten county government representatives took part in the study as well. A combination of stratified sampling, simple random selection, and purposive sampling techniques were employed to choose 125 participants for the study sample. Both quantitative and qualitative data were collected and subjected to numerical analysis. The statistical package for social sciences, version 20, was used to analyze the data. measurement and analysis of descriptive and inferential statistical data. The investigation found that while most PPP projects have functional M&E systems, most lack the necessary infrastructure to carry out their stated functions.

In order to ascertain how the use of monitoring and evaluation systems affected the execution of NGOs' agribusiness initiatives in Murang'a County, Njiri (2015) conducted a study. The investigation of the effects of decision indicator systems, human resource impacts, exploitation of M&E results, and information system impacts on the execution of M&E structures in NGOs agricultural projects in Murang'a county served as the study's guiding principles. The study found a negative association between the availability and application of indicators in projects and the effectiveness of NGO programs as well as a positive correlation between monitoring and evaluation performance and the usage of human resources, an inverse relationship between the use of monitoring and evaluation findings and the execution of NGO programs, and finally,

an inverse relationship between the usage of data frameworks in an undertaking and project success. According to the study's findings, human resources, including employee cooperation, involvement, and capacity, are important in M&E operations and have an effect on project success.

In a 2017 study, Lai, Hancock, and Muller-Praefcke investigated how ICT impacts project performance. The study claims that NGO projects in South East Asia demonstrated the viability and utility of ICT through the establishment of MIS with capabilities for web-based data capture and decision support systems across multiple project sites and levels, as well as enhanced functionality from integration with GIS and remote-sensing tools and applications. The many NGOs operating on tiny fixed budgets are unable to exploit the MIS systems' capacity to provide decision-making information like implementation status and progress due to the high costs involved in adopting advanced M&E technology and acquiring expertise. The paper claims that due to a lack of modern tele-decision support systems infrastructure and restricted access to expert technical advice and support services, the use of ICT in MIS setup may be restricted in particular project contexts. The study's conclusion was that M&E staff should understand the information obtained by the MIS and how it relates to the objectives and tasks of a particular project.

2.4 Summary of the Literature Review

This section provides the summary of the reviewed literature and provides the research gaps. The summary is as shown in Table 2.1

Table 2.1: Knowledge Gaps

Author	Variable	Focus	Findings	Knowledge Gaps
Mokua and Kimutai (2019)	M&E systems	M&E systems on performance of PPP projects in Nairobi County	Most of the PPP projects have functional M&E systems but the largest proportion is not well equipped to function appropriately.	Study present contextual gap as it was focused on PPP projects which are well funded and not health projects. Methodical gap as the study used mixed research design which are complex hence possibility of errors
Njogu (2016)	Stakeholder involvement	Stakeholder involvement on project performance in Nema Automobile Emission Control Project in Nairobi	Stakeholder involvement in project monitoring has a positive and significant influence in project performance.	Contextual gap as it was carried out in the different context, that is, Automobile emission control which is different from projects related to health. The study was narrow in scope as it focused on a single aspect of M&E
Woodhill (2015)	Resource allocation	Effect of resource adequacy on project performance	Financial capacity to do M&E is critical for any work to be undertaken	Conceptual gap as it didn't focus on M&E practices. The study was done in a developed economy context which has strong M&E frameworks. The study used literature review only which is more summary of other peoples work than empirical study
Sunindijo (2015)	Project management expertise	Project manager multi-layered tasks that expressively influenced the project performance	The study established that project team lead technical skills impact project performance.	Conceptual gaps as the study focused on multi-layered tasks of managers. The study was narrow in scope as it narrowed down to project management expertise and not M&E practices.

Njiri (2015)	M&E systems	Usage of monitoring and evaluation systems affected the execution of NGOs' agri-business projects	M&E systems have an impact on project performance	Contextual gaps as the study focused on M&E in the context of agri-business projects.
Nyakundi (2016)	Resource availability	Human resource capability effect on NGOs' project outcomes	Established a positive correlation between HR capabilities and project performance	Contextual gaps since the study focused on NGO's projects and not county funded health projects
Odenyo and James (2018)	Resource allocation	Resource mobilization for the long- term viability of women's group projects in Vihiga County	Revealed a beneficial relationship between successful women's group projects and human resource development	Conceptual gaps since the study focused on resource mobilization and viability of projects
Nyandika and Ngugi (2014)	Stakeholder participation	Stakeholders' participation and the execution of infrastructure projects	The study found a strong, direct relationship between stakeholders' involvement and the accomplishment of road construction	Contextual gaps as the study context was infrastructure projects which differ with health projects
Wachira and James (2018)	Stakeholder participation	Aspects that influenced how community- based projects were carried out in Kiambu County	Execution and success of community-based projects were significantly influenced by people's or the community's participation.	Conceptual and contextual gaps present as the study looked at community based projects and stakeholder participation.
Nyabera (2018)	Stakeholder participation	How stakeholder involvement affected the way projects were carried out in Kenya	Revealed a positive effect of stakeholder participation and projects performance	Methodology gaps as it combined qualitative and quantitative research methods.

2.5 Conceptual Framework

Independent Variables **Dependent Variable**

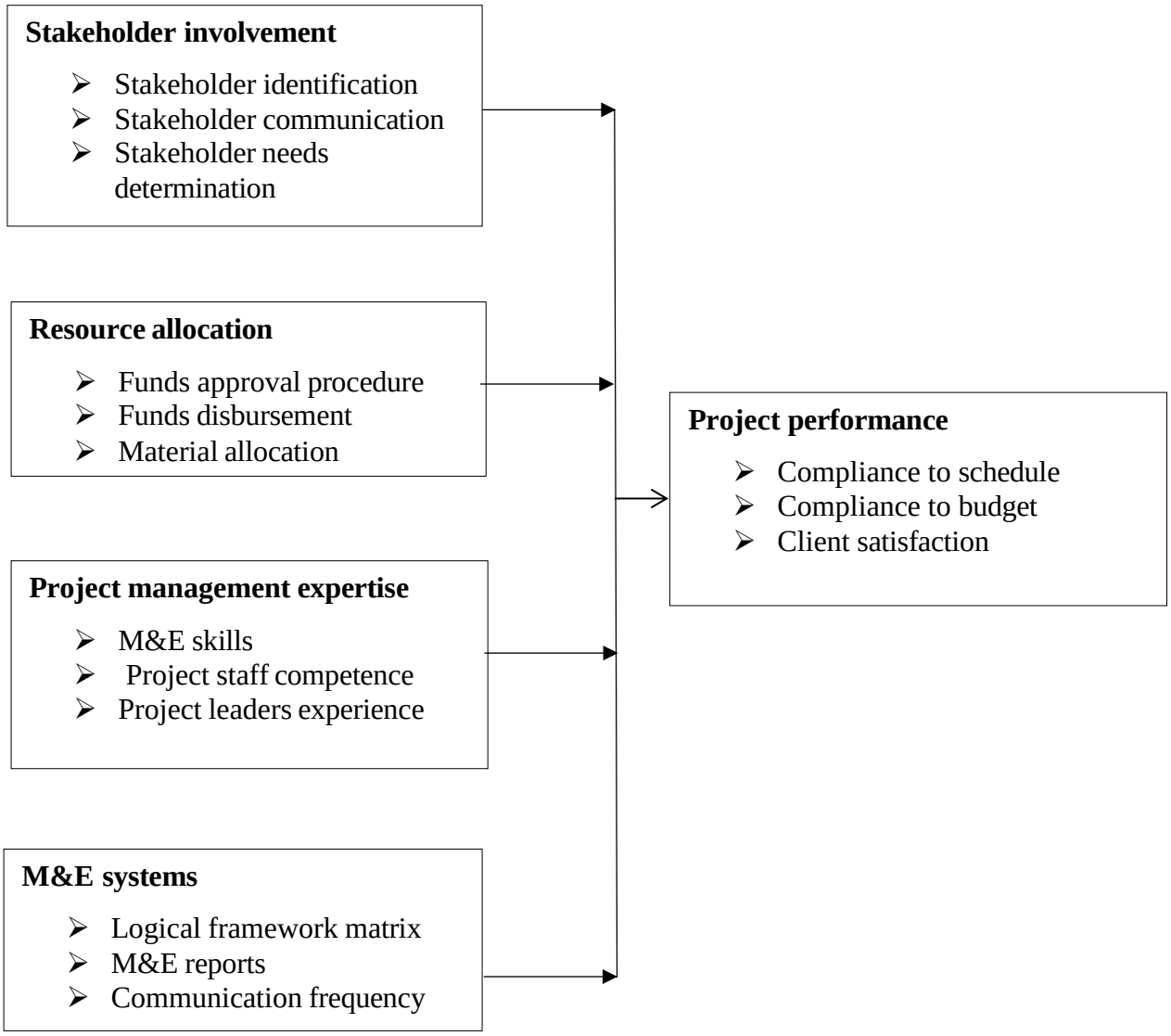

Figure 2.1: **Conceptual Framework**

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

This chapter examines the study's techniques for gathering and analyzing data as well as the final format in which the results were presented. The study's demographic, sampling techniques, sample size calculations, pilot test, data collection, data analysis, and a statement of ethical issues are all included in this chapter.

3.2 Research Design

The study adopted descriptive research design. In this case, cross-sectional design which is a sub-type of descriptive research design was appropriate for the study. The advantage of this design over other descriptive designs is that data can be gathered quickly and cheaply (Kothari, 2014). The project management literature has employed this research design with success (Laban & Deya, 2019)

3.3 Target Population

The complete group of individuals or objects with comparable, observable, and quantitative features is the target population (Kothari, 2014). According to the County Development Board report from 2021, 32 health projects have started but have not been finished.

The 32 county-funded health projects in Mombasa County served as the study's unit of analysis. As the unit of observation, project managers, community leaders, county revenue officials, the health technical team, and M&E officers were among the responders that are considered. The target population of the study is presented in Table 3.1.

Table 3.1: Target Population

Sub-County	County Funded Health Projects
Likoni	6
Kisauni	4
Mvita	10
Jomvu	4
Changamwe	5
Nyali	3
Total	**32**

3.4 Sampling Procedure

The sampling procedure is the approach used to pick a subset or sample from the population that is the subject of the study (Kothari, 2014). A stratified random sampling technique was utilized to choose study participants from the target population. This strategy worked well to ensure that all sub-county groupings are included in the study.

The stratified random sampling technique considers population small groupings of people to guarantee that the complete population is accurately represented (Creswell, 2014). This is achieved by classifying the target population into strata based on traits that are prevalent throughout the population. Table 3.2 provides the sampling process.

Table 3.2: Sampling Procedures

Respondents Sub County	Project Managers	Community Leaders	Health Technical Team	M&E Officers	Revenue Officers	
Likoni	2	6	9	2	1	
Kisauni	2	3	7	1	1	
Mvita	4	9	11	4	1	
Jomvu	1	3	7	2	1	
Changamwe	2	5	6	2	1	
Nyali	1	2	4	1	1	
Total	**12**	**28**	**44**	**12**	**6**	**102**

3.5 Data Collection Instruments

Data collecting instruments are measurement equipment that have been updated to collect data in a trustworthy manner to answer the research questions (Cooper & Schindler, 2014). In this inquiry, the fundamental data collection methods will be applied. Primary data is preferred because it is the most informative information source. The primary data was acquired via a self-administered structured questionnaire. Three components made up the questionnaire: a general information section, a section asking about the study's independent variables, and a section asking about the study's dependent variables. As a result, secondary data from the project performance reports was gathered.

3.6 Pilot Study

Pilot study is a small-scale replica undertaken before the large-scale study to check the reliability and validity of data collection tools (Creswell, 2014). Six respondents took part in the pilot study and these respondents were drawn from Kilifi County funded health projects.

3.6.1 Validity

Validity is the foundation for a conclusion's significance and accuracy, claim Mugenda & Mugenda (2012). In other words, if the data gathering instrument measures what it is supposed to measure, it is considered to be valid. In order to improve the

questionnaire's validity, the project management professionals and research supervisor debated its contents. By using pre-existing scales from the pertinent literature, the construct validity of the questionnaire was assessed.

3.6.2 Reliability

Reliability is the ability of data collection systems to deliver comparable results when applied to different locations, times, or populations (Bryman & Bell, 2015). An indicator called Cronbach's alpha is used to assess the internal consistency or dependability of a set of scale or test items (Kothari, 2014). Internal consistency testing was used in this study to assess the instrument's dependability. This study's internal consistency test was evaluated using a 0.70 Cronbach's alpha coefficient.

3.7 Data Collection Procedures

The data collection procedure is the act of gathering information with the intention of accepting or rejecting the research's conclusions (Cooper & Schindler, 2014). The researcher first sought approval to gather data from Kenyatta University, NACOSTI, and the Mombasa County Government. Likert scale-inspired questionnaires was utilized to collect main data. The surveys were structured and feature closed-ended questions to facilitate data processing. The questionnaires were distributed using the drop-and-pick approach. The questionnaire had three components. Section 1 contained general data from study participants, Section 2 contained the study's independent variables, and Section 3 contained the study's dependent variable.

3.8 Data Analysis

Data analysis requires the researcher to understand and simplify data in order to collect, organize, and produce insights (Kombo & Tromp, 2017). The data was coded and analyzed using the SPSS version 26 application, which stands for Statistical Package

for Social Sciences. The study generated both descriptive and inferential statistics. The mean and standard deviation, which was utilized as measures of central tendency and dispersion, respectively, was found through a descriptive analysis of the major data that has been acquired. In order to develop a model that defines the dependent variable as a function of the predictor variables based on the analytical model, correlation analysis and multiple regression analysis was used in the study. The examined data was presented in frequency distribution tables to make it easy to describe and evaluate the research findings. The gathered data was subjected to diagnostic tests. The following linear regression model was used to ascertain whether the study's predictor variables have any statistically significant impact on the dependent variable;

$$Y= \beta\theta +\beta 1X1+\beta 2X2+\beta 3X3+ \beta 4X4+\varepsilon$$

Where:

Y= Project performance

$\beta\theta$ = Intercept coefficient

$\beta 1$-$\beta 4$ are the Regression model parameters

X1= Composite variable for Stakeholder involvement

X2= Composite variable for Resource allocation

X3= Composite variable for Project management expertise

X4= Composite variable for M&E systems

ε= Error term

X1, X2, X3 and X4 are composite indices

3.9 Ethical Consideration

To make sure that everyone taking part in the study is doing so voluntarily, the researcher asked study participants for permission before collecting any data. The researcher also maintained the participants' privacy and confidentiality. This is made

possible by the requirement that participants maintain anonymity while the data is being collected, rendering it impossible to associate any response with a particular respondent. In order to explain the purpose of data collection to the respondents, the researcher requested from Kenyatta University a letter of authorization and a NACOSTI permit.

CHAPTER FOUR

DATA ANALYSIS, FINDINGS AND DISCUSSION

4.1 Introduction

The study was conducted to validate the conceptual model and research questions presented in this chapter. The descriptive analysis of the study variables and broad demographic information of the respondents are both included in this chapter. This chapter also includes evaluations of the implications of the findings and the outcomes of the statistical tests used in the study.

4.2 Response Rate

Table 4.1: Response Rate Results

Description	Number
Total questionnaires distributed	102
Questionnaires fully completed	98
Response Rate	**96.10%**

The questionnaires were distributed to the targeted respondents. 98 of the 102 questionnaires that the researcher distributed were fully completed when they were returned. This represented a 96.1% response rate. This calculation of the response rate excluded the participants in the pilot research. The return rate implies that respondents collaborated with the researcher in the data collection process due to the manner in which the field assistant administered the questionnaires and the enough time given to complete them.

4.3 Pilot Results

To determine the reliability and internal consistency of the data gathering methods, the research carried out a pilot study. The following subsections contain a presentation of the outcomes of the pilot test.

4.3.1 Reliability Results

Reliability analysis was done to evaluate survey constructs. Reliability analysis was evaluated using Cronbach's alpha. Sekaran and Bougie (2016) argued that coefficient

greater than or equal to 0.7 is acceptable for basic research. Bagozzi (2014) explains that reliability can be seen from two sides: reliability (the extent of accuracy) and unreliability (the extent of inaccuracy). The most common reliability coefficient is Cronbach's alpha which estimates internal consistency by determining how all items on a test relate to all other items and to the total test- internal coherence of data. The reliability is expressed as a coefficient between 0 and 1.00. The higher the coefficient, the more reliable is the test.

Table 4.2: Reliability Results

Variables	No. of Items	Cronbach's Alpha	Comments
Stakeholder Involvement	4	0.731	Accepted
Resource Allocation	4	0.780	Accepted
Project Management Expertise	4	0.814	Accepted
M&E Systems	4	0.863	Accepted
Project Performance	4	0.747	Accepted

The finding presented in Table 4.2 revealed that stakeholder involvement as measured by 4 items had a Cronbach's Alpha of 0.731. This means that the scale used was reliable and that all the items were correlated and measured the same thing. The results further showed that resource allocation which was measured using 4 items had a Cronbach's Alpha of 0.780 which was above the threshold of 0.7 adopted for this study. Similarly, other variables project management expertise, M&E systems and project performance had Cronbach's Alphas of 0.814, 0.863 and 0.747 respectively which were above the threshold of 0.7 adopted for this study. These results implied that the data collection instrument used in this study was reliable and it was adequate for data collection.

4.4 Demographic Characteristics of Respondents

The researcher sought general information concerning respondents being studied. The results are discussed in the following subsections.

4.4.1 Years of Experience

The respondents were asked to indicate the duration they have been engaged in the county funded health projects. The results are shown in the Table 4.2.

Table 4.3: Experience of Respondents

Description	Frequency	Percent
1-3 years	9	9.2
3-5 years	47	47.9
5-7 years	40	40.8
7 years and above	2	2.1
Total	**98**	**100.0**

Table 4.3 shows that the majority of respondents (47.9%) had been engaged in county funded health projects for between 3 to 5 years. 40.8% of respondents had been engaged for between 5-7 years, while 9.2% of respondents had been engaged with county funded health projects for less than 3 years. This suggests that the bulk of the respondents had sufficient experience working in county funded health projects hence familiar with the phenomenon under investigation, increasing the likelihood that the information they supplied was accurate.

4.5 Descriptive Results

Descriptive analysis was conducted on the study variables to check the mean and standard deviation. The results are presented in the following tables.

4.5.1 Stakeholder Involvement

Table 4.4: Stakeholder Involvement

	Mean	Std. deviation
The project stakeholders are identified prior to project implementation	4.17	.231
The needs of project stakeholders are determined through a survey	4.23	.536
Capacity building is done to stakeholders to enable them participate in project process	4.02	.444
There is a mechanism to solve stakeholder disputes towards the project	4.26	.703
Stakeholder engagement is key in project implementation		

The researcher asked respondents to rate their agreement or disagreement on the various aspects of stakeholder involvement. They were required to do this on a 5 point Likert scale where 1 represented strongly disagree while 5 represented strongly agree. The results are presented in Table 4.4 above.

The results in Table 4.4 have shown that respondents agreed that the project stakeholders are identified prior to project implementation and that the needs of project stakeholders are determined through a survey as indicated by a mean of 4.17 and mean of 4.23 respectively. Respondents also agreed that the capacity building is done to stakeholders to enable them participate in project process (mean=4.02) and that there is a mechanism to solve stakeholder disputes towards the project (mean=4.26). Stakeholder engagement is key in project implementation.

4.5.2 Resource Allocation

Table 4.5: Resource Allocation

	Mean	Std. Deviation
Health projects funds allocated are sufficient for project completion	4.41	.817
The project funds are disbursed in a timely manner	2.15	.634
The county funds allocated to health projects are often diverted to other emergent issues	4.26	.509
The project funds approval procedures are long	3.01	.822

The study respondents were asked to rate their agreement or disagreement on the various aspects of resource allocation. They were required to do this on a 5 point Likert scale where 1 represented strongly disagree while 5 represented strongly agree. The results are presented in Table 4.5.

The results in Table 4.5 have shown that respondents agreed that health projects fund allocated are sufficient for project completion and that the project funds are disbursed

in a timely manner as indicated by a mean of 4.41 and mean of 4.26 respectively. Respondents disagreed to the statement that the county funds allocated to health projects are often diverted to other emergent issues (mean=2.15). Respondents were indifferent to the statement that the project funds approval procedures are long (mean=3.01). The results concur with findings by Woodhill (2015) whose study on the effects of resource adequacy on project performance revealed that availability of financial resources lead to overall success.

4.5.3 Project Management Expertise

Table 4.6: Project Management Expertise

	Mean	Std. Deviation
I have basic project monitoring and evaluation skills	4.13	.882
The health project staff have sufficient experience	4.20	.887
The health project leaders have sufficient experience	4.82	.883
The staff of the health projects have project management knowledge	4.89	.881

The study respondents were asked to rate their agreement or disagreement on the various aspects of project management expertise. They were required to do this on a 5 point Likert scale where 1 represented strongly disagree while 5 represented strongly agree. The results are presented in Table 4.6.

The results in Table 4.6 have shown that respondents agreed that they have basic project monitoring and evaluation skills and that the health projects staff are competent as indicated by a mean of 4.13 and mean of 4.20 respectively. Respondents also agreed that the health project leaders have sufficient experience (mean=4.82) and that the staff of the health projects have project management knowledge (mean=4.89).

4.5.4 M&E Systems

Table 4.7: M&E Systems

	Mean	Std. Deviation
The current M&E systems in the county are effective	3.66	.753
The health projects have logical framework matrix for planning purposes	4.66	.748
Monitoring and evaluation reports are disseminated on time during project development	4.52	.741
The health projects communication reports are prepared on frequently	3.64	.756

The study respondents were asked to rate their agreement or disagreement on the various aspects of M&E systems. They were required to do this on a 5 point Likert scale where 1 represented strongly disagree while 5 represented strongly agree. The results are presented in Table 4.7 above.

The results in Table 4.7 have revealed that respondents agreed that the current M&E systems in the county are effective and that the health projects have logical framework matrix for planning purposes as indicated by a mean of 3.66 and mean of 4.66 respectively. Respondents also agreed that monitoring and evaluation reports are disseminated on time during project development (mean=4.52) and that the health projects communication reports are prepared on frequently (mean=3.64).

4.6 Multiple Regression Analysis

A regression model was adopted in the study to establish the statistical relationship between the independent and the dependent variables. The collected data was used to regress M&E practices on project performance. The results of regression analysis are presented as follows.

Table 4.8: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.726[a]	.527	.496s	1.9620

a. Predictors: (Constant), Stakeholder involvement, Resource allocation, Project management expertise, M&E systems

The regression results in Table 4.8.1, showed a moderate regression between the study variables. In the model summary, the R^2 is 0.527 indicating that predictors explain 52.7 per cent change in project performance.

Table 4.9: Analysis of Variance

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	2569.158	4	642.289	25.932	.000[b]
	Residual	2303.425	93	24.768		
	Total	**4872.583**	**97**			

a. Dependent Variable: Project performance

b. Predictors: (Constant), Stakeholder involvement, Resource allocation, Project management expertise, M&E systems

From the ANOVA results above, it was established that the significance value in testing the reliability of the model was obtained as 0.000 which is less than 0.05, the critical value at 95% significance level. Therefore, the model is statistically significant in predicting the relationship between the study variables.

Table 4.10: Regression Coefficients

		Unstandardized Coefficients		Standardized Coefficients		
Model		**B**	**Std. Error**	**Beta**	**t**	**Sig.**
1	(Constant)	11.519	4.061		2.836	.000
	Stakeholder involvement	.438	.199	.175	2.201	.035
	Resource allocation	.519	.216	.483	2.403	.042
	Project management expertise	.175	.059	.127	2.966	.020
	M&E systems	.407	.122	.175	3.336	.000

a. Dependent Variable: Project performance

The derived regression coefficients of the model are:

$Y = 11.519 + .438X_1 + .519X_2 + .175X_3 + .407X_4$

The regression results showed that independent variables had significant value less than 0.05 implying that they are all significant. From the results, it showed that holding all factors constant at zero, the change in project performance would be 11.519. Further, the regression results showed that a unit change in stakeholder involvement would lead to 0.438 unit change in project performance. A unit change in resource allocation would

lead to 0.519 unit change in project performance. Further, a unit change in project management expertise would lead to 0.175 unit change in project performance and finally, a unit change in M&E systems would lead to 0.407 unit change in project performance.

4.7 Discussion of Key Findings

The regression coefficients served as the foundation for achieving the study objectives. This was achieved by considering the p-values that are associated with the relevant regression coefficients and t-values, as shown in Table 4.9.

The first objective of the study was to investigate the stakeholder involvement and project performance. The regression results for stakeholder involvement was $\beta 1=0.438$, $t=2.201$, and $p<0.05$ showing that there was a positive and significant relationship between stakeholder involvement and project performance. It is therefore concluded that a unit change in stakeholder involvement would lead to 0.438 unit change in project performance.

The second objective was to establish the effect of resource allocation on project performance of health construction projects in Mombasa County. According to the regression analysis's results $\beta 2 = 0.519$, $t=2.403$, and $p<0.05$, resource allocation significantly affected project performance. According to the study, a unit change in resource allocation would lead to 0.519 unit change in project performance. The results agree with findings by Woodhill (2015) whose study on the effects of resource adequacy on project performance revealed that availability of financial resources lead to overall success.

Third objective of the study was to find out the effect of project management expertise on project performance. Regression results revealed that project management expertise

had a significant and positive effect on project performance as shown by β3 was = 0.175, t=2.966, p<0.05. According to the findings, a unit change in project management expertise would lead to 0.175 unit change in project performance.

Fourth objective of the study was to determine the effect of M&E systems on project performance. According to regression analysis results, M&E systems had significant and positive effect on project performance (β4 = 0.407, t=3.336, and p<0.05), which implied that a unit change in M&E systems would lead to 0.407 unit change in project performance.

CHAPTER FIVE

SUMMARY, CONCLUSSIONS AND RECOMMENDATIONS

5.1 Introduction

This chapter presents the summary of the findings and conclusion of the study as guided by the specific objectives. The chapter also presents the study recommendations and the areas for future research as per the findings of the study.

5.2 Summary of the Findings

The objective of the study was to investigate the influence of monitoring & evaluation practices on performance of county funded health projects in Mombasa County, Kenya. The results of the pilot study, the respondents' demographic data, the descriptive analysis of independent variables and the inferential statistics are the four sub-sections that make up the study. The questionnaire return rate was 96.1 percent.

From the descriptive findings, the respondents agreed that the project stakeholders were identified prior to project implementation and that the needs of project stakeholders were determined through a survey. Respondents also agreed that the capacity building was done to stakeholders to enable them participate in project process and that there is a mechanism to solve stakeholder disputes towards the project. Stakeholder engagement is key in project implementation.

From further descriptive analysis, respondents agreed that Health projects fund allocated are sufficient for project completion and that the project funds are disbursed in a timely manner. Respondents agreed that the county funds allocated to health projects are often diverted to other emergent issues. Respondents were indifferent to the statement that the project funds approval procedures are long.

Also from descriptive findings, respondents agreed that they have basic project monitoring and evaluation skills and that the health projects staff are competent.

Respondents also agreed that the health project leaders have sufficient experience and that the staff of the health projects have project management knowledge.

Finally, the descriptive analyis, respondents agreed that the current M&E systems in the county are effective and that the health projects have logical framework matrix for planning purposes. Respondents also agreed that monitoring and evaluation reports are disseminated on time during project development and that the health projects communication reports are prepared on frequently.

Results from the multiple regression model showed that all the predictor variables were statistically significant at $\alpha = 0.05$ level of significance. More specifically, resource allocation was found to have the highest predictive power on County -health projects ($\beta = 0.519$, $t = 2.403$, $\alpha = 0.042$) followed by stakeholder involvement ($\beta = 0.438$, $t = 2.201$, $\alpha = 0.035$). Results for the other two predictor variables, M&E systems ($\beta = 0.407$, $t = 0.122$, $\alpha = 0.00$) and project management expertise ($\beta = 0.438$, $t = 2.916$, $\alpha = 0.00$) respectively.

5.3 Conclusions of the Study

Drawing from the study findings, it is concluded that stakeholder involvement is statistically significant and sufficient in explaining performance of county funded health projects in Mombasa County, Kenya. Further, it is concluded that the health projects stakeholders are identified before the projects are implemented. This also involves determination of the needs of project stakeholders through a survey. The project initiators also carry out capacity building on the identified project stakeholders to enable them participate in project process. The study concludes that stakeholder disputes resolution mechanisms are put in place before the project commences.

The study concludes that resource allocation is statistically significant and sufficient in

explaining performance of county funded health projects in Mombasa County, Kenya. Because of this significance, the Health projects fund allocations are ensured to be sufficient for project completion. Also the study concludes that there is lack of timely disbursement of project funds. The reasons for untimely disbursements is attributed to emergent issues at the county which makes funds assigned for health projects to be diverted to addressing those issues.

The study concludes that project management expertise is statistically significant and sufficient in explaining performance of county funded health projects in Mombasa County, Kenya. Most of the surveyed respondents possess basic project monitoring and evaluation skills which is significant to the performance of health projects and this makes the staff of the health projects to be competent. Also health project leaders have sufficient experience.

The study concludes that M&E systems is statistically significant and sufficient in explaining performance of county funded health projects in Mombasa County, Kenya. The study comes to the conclusion that the county M&E systems are effective. Also the health projects have logical framework matrix for planning purposes. The reports on Monitoring and Evaluation are disseminated on time during project development and the communication of these reported is done often.

5.4 Recommendations of the Study

The study recommends that the county government health project teams should identify health projects stakeholders prior to project implementation. This would provide the team with clear project stakeholders which makes it possible to determine their needs through a survey and reconcile their varied interests. The health project team should seek to capacity build the identified health project stakeholders to bolster their participation in the health projects. Also the study recommends that the disputes resolution mechanisms should be

established prior to health project implementation.

The study recommends that the funds allocate to the health projects development should be ring fenced to avoid unnecessary diversion of the funds to other emergent issues. This is because it has been observed that health projects funds are frequently diverted to other functions. In addition, the health projects fund allocations should ensure sufficiency up to the project completion and these funds should be disbursed on time for timely project delivery.

The study recommends that the health project team should have basic knowledge and skills regarding project monitoring and evaluation. This is because M&E skills were found to have significant influence on performance of health projects. Besides, the project team should possess project leadership skills as well as communication skills as these would go far in ensuring health projects are successfully accomplished.

The study recommends that the Monitoring and Evaluation systems in the county should be effective. It is recommended that the health projects should have logical framework matrix. This would ensure effective planning for the health projects. Further, the Monitoring and Evaluation reports should be disseminated and communicated on time during project development.

5.5 Suggestions for Further Research

The scope of this study was limited to Monitoring and Evaluation practices in the context of county funded health projects performance. Nonetheless, the researcher advises that further research be done on other Monitoring and Evaluation practices that can affect project performance as only 52.7% change in project performance of health projects was attributed to the M&E practices constructs of stakeholder involvement, resources allocation, project management expertise and M&E systems.

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APPENDICES

Appendix I: Introduction Letter

June Mathei Makau,

Kenyatta University,

MOMBASA.

Dear Sir/ Madam,

RE: RESEARCH PROJECT DATA COLLECTION

I am a postgraduate student pursuing a Master of Business Administration (Project Management) degree at Kenyatta University. As per the course work assessment, I am supposed, as an academic requirement, to write and submit basic research project. My research is on the "Monitoring and Evaluation practices and performance of county funded health projects in Mombasa County, Kenya".

By this letter am kindly requesting you to authorize me to collect data. I would like to assure you that the data provided will be exclusively for the purposes of academic and extreme confidentiality will be treated to the obtained information.

Thank you in advance. Yours sincerely,

June Makau Researcher

RESEARCHER

Appendix II: Proposed Health Projects

Project Name	**Location**
Construction of a regional oncology center	CPGH
Construction of a 50 bed Private Wing with Doctors plaza	CPGH
Rehabilitation of Mwembe Tayari Dispensary into a Detox center and MAT dispensing center	Mvita Sub-County
Construction/Rehabilitation of Mrima H/C to create 50 bed capacity level 4 Hospital Theatre, labor ward, postnatal &Antenatal wards 50 bed capacity	Likoni sub-county
Placement of 6 Containers clinics in informal settlements	Mombasa County
Bangladesh,Owinoouru, Kadzandani,Timbwani,Muoroto,)	
Refurbishment of ward 9 to create a burns unit	CPGH
Construction & equipping Cardiac Catheterization laboratory	CPGH
Implementation of Universal Health Care project	Mombasa
Equip a total of 5 level 4 hospitals which are under construction.	Various (Mtongwe, Shikadabu, Chaani, Vikwatani, Marimani)
Construction of new maternity Wing	Port-Reitz Hospital
Construction of warehouse for microwave for waste disposal	Port-Reitz Hospital
Refurbish and equip public health laboratory	Ganjoni
Malaria elimination	Mvita Sub-County
Cholera eradication	Mombasa

Appendix III: Questionnaire

Instructions: Please respond to the following questions and where applicable, mark the relevant box with a tick (√).

SECTION A: General Information

1. How long have you been engaged in the county funded construction projects?

1-3 years ( )

3-5 years ( )

5-7 years ( )

Above 7 years ( )

2. What is your highest academic qualification?

Certificate ( )

Diploma ( )

Degree ( )

Masters ( )

Ph.D ( )

3. Which project stakeholder are you?

Contractor ( )

Technical staff ( )

Public works ( )

Community leader ( )

Public health official ( )

Religious leader ( )

Project team ( )

Project Manager ( )

SECTION B: Monitoring and Evaluation Practices

4. There is M&E department which is autonomous

Yes
No
Yes, but not autonomous

5. How is the M&E practiced in the county……

On a scale of 1 to 5 where;

1 – Strongly disagree, 2 – Disagree, 3 – Indifferent, 4 – Agree, 5 – Strongly agree. Indicate the extent to which you agree or disagree with the statements.

I)	**Stakeholder involvement**					
	Statement	**1**	**2**	**3**	**4**	**5**
1	The project stakeholders are identified prior to project implementation					
2	The needs of project stakeholders are determined through a survey					
3	Capacity building is done to stakeholders to enable them participate in project process					
4	There is a mechanism to solve stakeholder disputes towards the project					
5	Stakeholder engagement is key in project implementation					

II)	**Resource allocation**	**1**	**2**	**3**	**4**	**5**
1	Health projects fund allocated are sufficient for project completion					
2	The project funds are disbursed in a timely manner					
3	The county funds allocated to health projects are often diverted to other emergent issues					
4	The project funds approval procedures are long					
III)	**Project management expertise**	**1**	**2**	**3**	**4**	**5**
1	I have basic project monitoring and evaluation skills					
2	The health projects staff are competent					
3	The health project leaders have sufficient experience					
4	The staff of the health projects have project management knowledge					
IV)	**M&E systems**	**1**	**2**	**3**	**4**	**5**
1	The current M&E systems in the county are effective					
2	The health projects have logical framework matrix for planning purposes					
3	Monitoring and evaluation reports are disseminated on time during project development					
4	The health projects communication reports are prepared on frequently					

SECTION C: Performance of Health Projects

		1	**2**	**3**	**4**	**5**
1.	The health projects are completed on time planned					
2.	The health projects are completed within the planned budget					
3.	Health projects are done to the satisfaction of shareholders					
4.	The health projects adhere to the set quality standards					

Appendix IV: Research Authorization Letter

KENYATTA UNIVERSITY
GRADUATE SCHOOL

E-mail: dean-graduate@ku.ac.ke
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P.O. Box 43844, 00100
NAIROBI, KENYA
Tel. 8710901 Ext. 57530

Our Ref: D53/MSA/PT/28273/2018

DATE: **28th July, 2023**

Director General,
National Commission for Science, Technology
and Innovation
P.O. Box 30623-00100
NAIROBI

Dear Sir/Madam,

RE: RESEARCH AUTHORIZATION FOR JUNE MATHEI MAKAU – REG. NO. D53/MSA/PT/28273/2018.

I write to introduce June Mathei Makau who is a Postgraduate Student of this University. The student is registered for M.B.A degree programme in the Department of Management Science.

June intends to conduct research for a M.B.A Project Proposal entitled, **"Monitoring & Evaluation Practice Sand Performance of County Funded Health Projects in Mombasa County, Kenya".**

Any assistance given will be highly appreciated.

Yours faithfully,

PROF. ELISHIBA KIMANI
EXECUTIVE DEAN, GRADUATE SCHOOL

AM/lnn

Appendix V: NACOSTI Research Permit

REPUBLIC OF KENYA

NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

Ref No: **614363**

Date of Issue: **15/July/2024**

RESEARCH LICENSE

This is to Certify that Ms.: June Mathei Makau of Kenyatta University, has been licensed to conduct research as per the provision of the Science, Technology and Innovation Act, 2013 (Rev.2014) in Mombasa on the topic: MONITORING AND EVALUATION PRACTICES AND PERFORMANCE OF COUNTY FUNDED HEALTH PROJECTS IN MOMBASA COUNTY, KENYA for the period ending : 15/July/2025.

License No: **NACOSTI/P/24/37673**

614363

Applicant Identification Number

Director General
NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

Verification QR Code

NOTE: This is a computer generated License. To verify the authenticity of this document, Scan the QR Code using QR scanner application.

See overleaf for conditions