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DETERMINANTS OF SUCCESSFUL IMPLEMENTATION OF NON-GOVERNMENTAL ORGANIZATIONS HEALTH PROJECTS IN KIBERA INFORMAL SETTLEMENT, KENYA

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Abstract

Purpose: The current study sought to establish determinants of successful implementation of non-government organization health projects in Kibera informal settlement. The study sought to establish how community participation, resource mobilization, communication and project control determines successful implementation of health projects for NGOs operating in Kibera informal settlement.

Methodology: The study adopted a descriptive survey design and 116 questionnaires were issued but only 92 questionnaires were received which represented a 79% response rate.

Results: The results of the study revealed that resource mobilization, communication and project control positively and significantly determined successful implementation of health projects by Non-Governmental organizations in Kibera as shown by r=0.443, r=0.511 and r=0.798 respectively while community participation negatively determined the implementation success of the projects (r= -0.078).

Recommendations: The study recommends that NGOs implementing health projects in Kibera should focus on mobilizing resources since the practice contributes to successful implementation of the projects. NGOs can achieve this by actively engaging sponsors, conducting harambees, networking and presenting grant proposals to prospective financiers to solicit resources for implementing the health projects. Additionally, the study recommends that NGOs implementing health projects in Kibera should focus on project communication since the practice contributes to successful implementation of the projects. NGOs can achieve this by establishing a concise project communication plan, and through continuous communication with project teams and stakeholders on matters concerning the progress of the project. The study further recommends that NGOs implementing health projects in Kibera should focus on project control since the practice contributes to successful implementation of the projects.

NGOs can achieve this by using project management information systems in designing and controlling health projects, conducting a variance analysis on the progress of the project and by providing updates on the status of the project to the relevant stakeholders.

Key Words: *Community Participation, Resource Mobilization, Communication, Project Control and Successful Implementation of Health Projects*

INTRODUCTION

Health problems due to poor water systems in informal settlements across the globe are a worrying trend which require consented effort. Availability of safe water though critical is lacking in most informal settlements across the world (WHO and UNICEF, 2015). Nearly, 3.6 million people die annually due to water borne related diseases and still one billion population across the world still lack this important commodity. The greatest at risk are children constituting 84% of those highly endangered. According to United Nations Human Development Report water crisis is claiming more lives in the developing nations as opposed to the number of lives war through weapons (Water Facts, 2013). Providing safe drinking to informal settlement ought a top priority for both governments and non- governmental organizations operating across the globe since 62% of urban dwellers live in this region (Millennium Development Goals Report, 2008). In Africa, Health-water challenge relates to unavailability of potentially water sources, uneven distribution, poor maintenance of water supply systems due to poor involvement of key stakeholders during project implementation, ineffective communication systems between the local governments, users and poor infrastructure. Despite the importance that should be placed on water in Kibera only 10% population are connected to safe water leaving 90% using open defecation and flying toilets commonly used at night. This situation has fueled water borne diseases in the area like amoebic dysentery, cholera and many more. In an effort to help reduce the impact of health challenges in Kibera slum, Non- Governmental Organizations mobilizing the residents in order to come together and support water related projects reduce the impact of water challenges the residents are facing in the area.

To implement water projects successfully require coordination of several activities. First it requires putting the action plan in operation, achieving tangible project deliverables which translate to change. The implementation process is also the stage where project manager and the team must ensure that utilization of project resources is optimal; seek for community participation as a way of increasing transparency and accountability of project resources. According to Philip et al (2010) to increase project implementation success the project team must establish an atmosphere of candour and trust with project stakeholders to promote resolving issues informally. Success in the implementation phase of the project also require realistic long term planning of finances, communication strategy should also be used to raise awareness to promote community public participation during the process of project implementation. In NGOs projects, if the participatory approach is employed for the planning stage, the expectations for such projects are normally high therefore it is important for actions in such cases to be visible and demonstrate tangible results to promote confidence within the stakeholders. According to pulse survey (2014) communication strategy would be useful to raise awareness for the positive benefits to the community. NGOs handle most social projects which target the human factor.

Project implementation is crucial since it is the stage which gives the project its visibility. Successful stories and experience can be shared and thus this encourage sharing of best practices among specialists. A project can be said to be successfully implemented if it is done within schedule, within budget and basically achieves all the goals early set (effectiveness criterion), in addition to meeting clients satisfaction. (Cleland & Ireland, 2011)

Binder (2007) despite the popularity of adopting projects as a new way of implementing change, the process of project execution is rather inconsistent and differs uniquely across several projects types and organizations. Moreover, conflicting ideologies exist, on critical success factors and success criteria within project practitioners. Little is known on what exactly contribute significantly to project success during implementation stage. This is due to past studies which have been contradictory and misleading. For instance, Project Management Institute (PMI) argues that project management consists of 42 processes of which 20 processes relates to planning. This means that project planning cycle should take and consume 48 percent of project time and resources. Contrarily, new opinion has emerged where scholars now advocate for less planning at the initial stages of the project. They argue that there is no need to take 48 percent of time planning before you begin the project execution while it is definite that project plans continue to be adjusted so as to respond to new challenges and opportunities during implementation phase. It is arguable that planning should be iterative since new information continually become available as project passes through different milestones. Therefore agile methodology is recommended as opposed to traditional approach to planning which over relied on planning at the beginning of the project. Furthermore, as project progresses, new issues definitely become apparent. Priorities change; proposed resources may be omitted or adjusted appropriately and this can only be realized during implementation phase. A such, implementation cycle of the project should rather take more time and resources and must be emphasized by all project teams for success to be realized (PMI, 2014).

Isensi (2006) conducted a study in Kenya on factors which results to project failure. He found that poor design, inadequate experience, poor methods of tracking progress and poor cost estimations are among the factors which lead to failure. Similarly, Gharashe (2009) analyzed factors that inhibit proper implementation of projects in Kenya and found that organizational factors and enterprise environmental factors greatly suppress success of most projects in Kenya. Mwadali (2006) conducted a study and found that inexperienced project team, poor control techniques, poor monitoring and control and lack of sustainability in most projects NGOs pursue hamper overall success of projects in the country. Because of various inconsistencies in the literature on critical factors essential for project implementation success, this study will develop a framework of implementation success factors with four variables, that of community participation, resource mobilization, team competency, and project control as essential and important ingredients to implementation success in NGOs projects in Kenya.

Global Perspective of Project Implementation

Globally, project is now being recognized as the new avenue for organizational change. Already global standards for regulating and training project practitioners have been outlined by Project Management Institute by requiring that professional members attain certification in Project Management Professionals (PMP). The guide book has since been revised according to PMBOK, 6th edition (2017) requiring that all project professionals need to perfect skills in talent

management, agile practices, project schedule management, project resource management, implement risk response, control resources, estimate activity resource, stakeholders management.

Even by these interventions efforts, project implementation success still fall of expectation. Though success rates across the globe differ with projects types and industry, about 42 percent of projects on average are considered a failure. According to PMI pulse survey, most organizations across the globe loss about US 109 million for every US 1 billion spent on projects. However, the figure shows improvement from similar report in 2013 where on average most organization lost about USD 135 million for every USD 1 billion invested in the projects. The slight change in the statistics was attributed to the role of Project Management Office (PMOs) as more organizations adopt new structure systems of embracing the role of PMOs in taking on more strategic role practices such as monitoring success metrics as well as the development of core project management competencies.

For organizations to remain relevant and push for high performing culture in managing their projects, they must focus on developing people's talents through various rapid organizational changes which emanate from new strategic initiatives (Binder, 2007). Furthermore, organizational need to ensure that executive sponsors are in place to help drive organizational changes. In order to improve project team competency, project organizations need to inculcate the culture of ongoing team training, put in place formal process to mature project management practices, encourage formal knowledge transfer process in the organization and have a clear career path for all it team members. The overall worldwide trend for organizational effective change management has also been low. Central to organizational change is actively engaged sponsors. Despite this variable being top driver from project success fewer organizations have active project sponsors. Another factor that contributes more to project success is when organizations are willing to mature their processes. Process maturity involves that the organizations fully understand the value of project management, has PMO, has standardized practices used throughout project management cycle and has project, portfolio and programme management maturity (PMI, 2014). Finally, successful organization in implementing projects has a continued focus on their outcomes. Benefit realization can be defined as the practice of ensuring that outcomes produces the exact benefits claimed in the business proposals. This can be achieved by project manager and the team putting in place well established mechanism for measurement and communication of expected benefits to the stakeholders.

Regional Perspective of Project Implementation

World Bank reports that failure rate of most of the projects in Africa is about 50 percent. Underlying reasons for these high failure rates are factors related with managerial as well as organizational issues. These managerial issues are to do with poor planning, poor communication, lack of proper project control techniques, delays during project implementation, costs overruns as well as coordination failure (Gunawan & Ahsan, 2010). Organizational factors which are associated with project failures are; improper project culture, lack of proper project governance, organizational politics and weak process and procedures designed to aid the project execution. The international Finance Corporation in (2010) conducted an evaluation from independent Evaluation Group (IEG) and reported that 39 percent of projects they manage in Africa are

unsuccessful (Chauvet et al., 2010). Interestingly, the focus of most researchers that have been done in the implementation of projects have taken a narrow angle. A lot of emphasis has been placed on project management cycle in general without a clear demarcation on what exactly results to project failure during project execution stage. Notably, the focus has never been how local NGOs can improve their project implementation process and ensure that project outcome meets the felts needs of the community. No wonder, poor performance of projects, disappointment by beneficiaries and stakeholders are always apparent and common in numerous projects across Africa.

Local Perspective of Project Implementation

Kenya is ranked second by the World Bank assessment report as the most inequitable county in the world with only 10 percent nationals owning 47 percent of the nation wealth. With that kind of financial disparity comes a huge difference between control of resources and how people get the services. Additionally, Kenya has widespread gender inequality this is despite some promising interventions by the government through formulation of laws and legislations supporting affirmative action, the reality is societal laws and traditions still prevent women from owning or acquiring family wealth leaving them disadvantaged and often vulnerable to social ills and diseases as they pursue their livelihood. Financial Aid comprises about 10 percent of the nation revenue sources per year. Most of the aid funds are challenged through Non- Governmental Organizations. This means that improving NGOs understanding on how to successfully implement projects is one step in the right direction which will prevent donor fatigue and increase reliance on NGO to fulfill their mandates with the donor funds they get annually.

Statement of the Problem

About 6000 NGOs operate different projects in Kibera informal settlements however for over three decades despite the massive funds channeled to improve the living standards little impacts so far have been realized (Bodewesa,2010). Mbatia and Indusa (2007) found that regardless of the participation of locals, many of the projects remain under a top-down approach. Without denying the good intentions of many organizations, it is undeniable that they still dish up western interests. These NGOs do not want to be accountable to the government and often there is a rift between NGOs operating in Kibera and the government officials send to ensure NGOs compliance.

Other studies have established that poor NGOs relationship within themselves is attributing to poor project performance projects since instead of each NGO complementing one another where there is insufficient capacity they end up competing one another. Some NGOs have also been reported not to have accounted for previous funds given resulting to donor apathy. According to Kimwele (2011) lack of capacity to design effective control systems and proper communication during projects execution has hindered completion of most projects. If we continue ignoring the major determinants of projects success at Kibera then little impacts will continue to be realized and thus there shall be no significance results to the project beneficiaries. It is on this account that this project aimed at establishing these determinants to help advise local NGOs accordingly to improve their project implementation success rates.

Objectives of the Study

i. To determine the effects of community participation in successful implementation of health projects in Kibera
ii. To find out the effects of resource mobilization in successful implementation of health projects in Kibera
iii. To determine the effects of communication in successful implementation of health projects in Kibera
iv. To examine the effects of project control in successful implementation of health projects in Kibera

LITERATURE REVIEW

Theoretical Review

Stakeholder Theory

Stakeholder's theory was developed by Ian Mitroff and Edward Freeman in (1983). The theory argues that in any development initiative engagement of stakeholders is crucial for success of the programs or projects or portfolio. Admittedly, stakeholder is any person directly affected by the initiative. Bryson (1995) cited in Freeman (2010) view stakeholder as a person, group of people or an organization that is able to place a claim on the organizations attention, resources and output or is affected by that output. Within the framework of local NGOs, stakeholder may refer to project donors, partners NGOs, government agencies, suppliers, employees, trade unions and community members who are the participants. The theorists argue that engaging stakeholders is vital at all phases of the project and it increases success. Ayuso, Rodriguez and Ricart (2006) used the theory and expressed that stakeholders influence is critical towards the project success due to normative reasons. As adapted in this study, success in project can only be realized through well-organized stakeholders consultation and engagement plan which must be followed. Engaging stakeholders fully throughout the project cycle will promote most of community concerns to be resolved during the implementation stage which may hinder project progress and through stakeholder's engagement positive constructive community partnership in the project is encouraged. However, according to Freeman (2010) in adopting stakeholder theory to this study, the researcher is not ignorant of its shortcomings.

Agreeing on all views of the stakeholders sometimes is problematic since most of their interests add costs to the initial budget which was not in the initial project budget and may result to scope and budget creep. This theory also requires a shared vision so that all stakeholders can be in the same page which is sometimes difficult to attain within limited constraints of the project.

Resource Mobilization Theory

Resource mobilization advanced by John D. McCarthy (1977) and Mayer Zald (1977) founded the entrepreneurial perspective of this theory and Edwards and McCarthy (2004) Charles Tilly and Doug McAdam are proponents of the political version of resource mobilization. The first approach uses political model to examine the processes that lead to social movements. It focuses mainly on changes in the structures of various opportunities for collective actions. It examines issues to do with the political power, political resources, interests and group solidarity. The second

model however focuses on organizational dynamics, leadership and resource management. It applies economic and organizational theories to the study of social movements. RM theorists argue that prosperity and affluence tend to foster social movement activities. That is prosperous organizations or communities tend to generate a number of resources such as good telecommunication infrastructure, money and intellectual classes that can support the process of social movement mobilization. Those societies also open different opportunities for grievance entrepreneurs to develop and aid in marking social movement products. Affluent communities also give rise to conscience constituents who donate resources to SMs (McCarthy & Zald, 1973; McAdam et al., 1988). The theory main focus is how groups organize to pursue their goals by mobilizing and managing resources. The resource management perspective view resources as permanently created, consumed, lost and transferred. Mobilization becomes the process by which the group can put together material and non- material resources under collective control for the purpose of pursing group interests. For this to take place dependent on four central factors that is organization, leadership, political opportunity and the nature of political institutions. For effective implementation of this theory, five central principles are needed. First all actors must be able to weigh the benefits and the costs of the movements. Secondly, group members are recruited through networks and the obligation of the group is strengthened by building collective identity and continuous nurturing of interpersonal relationships (McAdam et al., 1988). The third principle holds that movement's survival is based on collection of resources as well as good leadership. Finally, the resources shape the activities of the organization.

However, in adopting this theory to this study, the researcher is not ignorant of its shortcomings. First, by focusing exclusively on rational-instrumental action and limiting the actions of SMs to the political realm, RM theory neglects the normative and symbolic dimensions of social action. Second weakness is exclusive focus on how social movements' decisions, strategies, resources can converge to give rise to social movements. Third weakness is looking at individual actions which make people to join groups as trade- off between costs and benefits; this is a narrow focus on rationality. RM theory cannot explain the processes of group formation and the origins of the organizational forms it presupposes; it fails to explain how a social category — an aggregate of people with shared characteristics develops a sense of identity and become a social group. RM theory assumes that collective actors have common interests and focuses instead on the processes that hinder or facilitate collective action in pursuit of those interests (Mayer Zald, 1977).

However, in applying this theory, the researcher is not ignorant of some of limitations thereof in the theory. This theory fails to explain social movement communities, which are large networks of individuals and other groups surrounding social movement organizations, and providing them with various services. Critics also argue that it fails to explain how groups with limited resources can succeed in bringing social change and that it does not assign sufficient weight to grievances, identity, and culture as well as many macro-sociological issues.

Organizational Control Theory

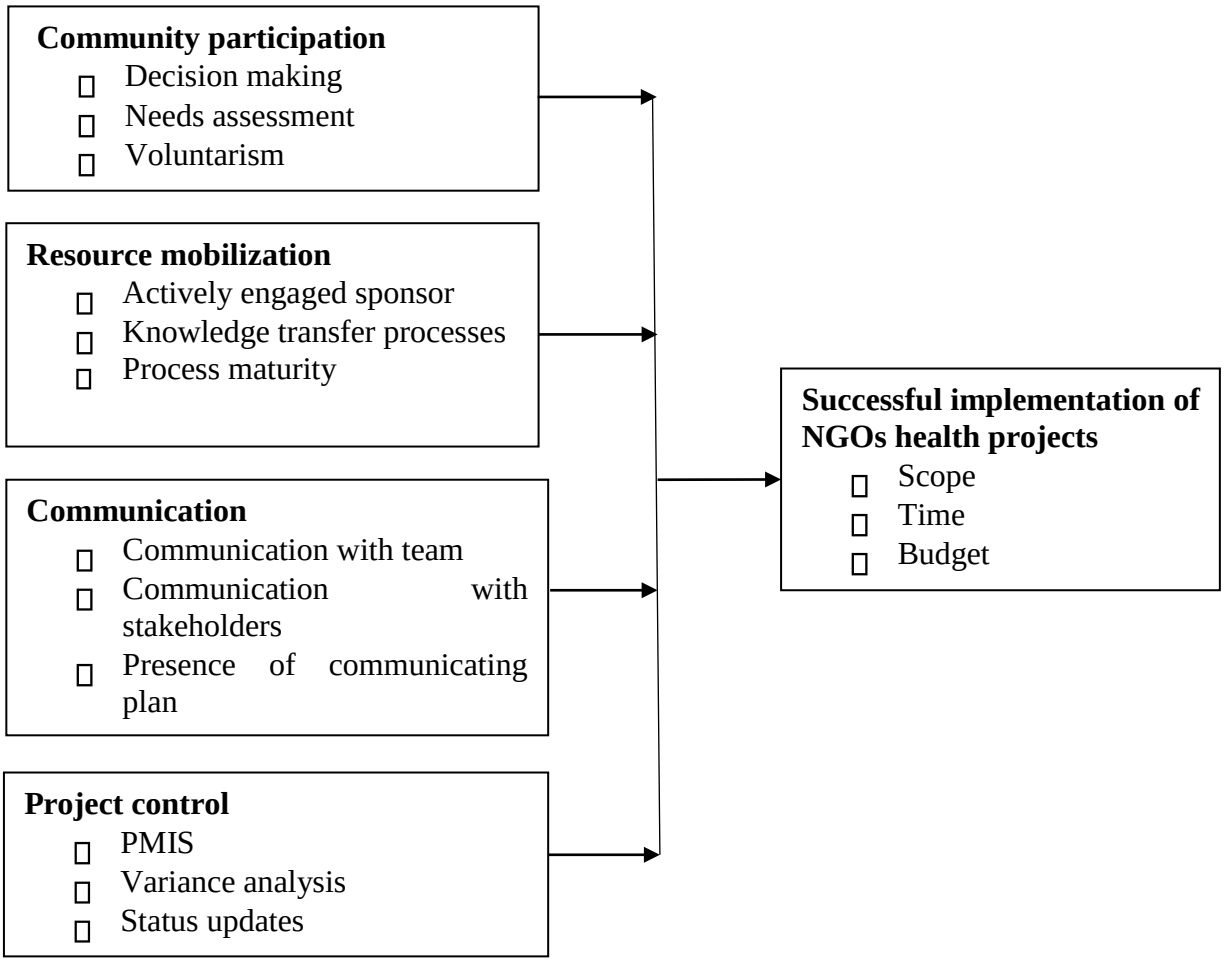
Organization control theory is based on premise of efficient functioning of all sub sections within an organization. This theory was advanced by Max Weber in 1947. The theory argues that managers should not rule through arbitrary personal whims but through a formalized systems of rules. Later the theory was re-modified by Henri Fayol in (1949) by outlining a series of principles

of management which managers need to initiate control in organizations. Later in Ouchi (1979) developed a model which is currently used in many empirical studies involving project control. Ouchi argues that to initiate effective control relies on task programmability and measurability of key critical factors of project success. In applying this theory, projects control systems in project environment should be systematically developed, measured and right competent staff deployed to manage the control since the success of most projects depends on effectively monitoring which includes schedule control, baseline control, budget control, scope control.

Project Success Model

Project success model for over three decades have been seen in terms of how a project is implemented to meet the initial baselines that is budget, time and performance requirements (PMBOK, 2017). However, current view on success has changed due to recent studies which established that the stakeholders interests especially beneficiaries must be included in the success model since they are the number one priority for doing the project. Therefore this study shall adopt success model which include, budget, time, performance and stakeholder's satisfaction.

Conceptual Framework



Independent variables **Dependent Variable Community Participation**

According to World Bank community participation refers to active process where the beneficiaries influence the direction and the implementation of development projects as opposed to merely receiving a share of the benefits. Roodt (2011) has looked at the concept of community participation as active involvement of people in development initiative with the sole purpose of influencing decisions that affects their lives. According to PMBOK (2017) involvement and participation by the stakeholders is an essential component that promote chances of project success. Participation in project can be done in many ways. That is community participation in establishing the baseline condition before the implementations of any project intervention. Secondly, community may participate in a project during planning stage, execution and during project closure.

According to PMBOK (2017) the main justification for community participation is to give the project a clearer focus on remaining relevant in meeting the needs of the stakeholders. Community participation and sensitization of people increase receptivity to the development intervention.

Involving the community has also been found to promote project sustainability. Once the donor agencies phases out after closure, the community is expected to continue getting the project benefits. This is only possible if they were involved throughout the project management cycle otherwise the community would reject the project thereafter since they may not have understood its technical requirements (Ika et' al, 2012). Andersen, Birchall, Jessen & Money (2006) engagement of community is also useful since it help to dispel any rumors which can be associated with the project intervention. Community participation during planning and conception stage assist the designers to match the requirements and project outputs with the community needs. However, studies have found that health programs in most of cases are being implemented in communities across Africa with less involvement of the beneficiaries since the community are only left to be at the receiving end of the services. This is not good since it create a dependence syndrome on the part of the beneficiaries (Yakubu & Ming, 2015). An effective health model should encompass both curative and preventive measure and this means that all health interventions should be inclusive and done in a participatory manner.

Resource Mobilization

Resource mobilization is defined by World Bank (2012) report as means of securing funding for implementing project interventions. However, the practical guide for resource mobilization defines it as management process which identifies people who happen to share the same values similar to the implementing organization and taking recommended steps to manage that relationships. Arguably, resource mobilization has also been defined as the process by which project inputs are steady and consistently flowing in a project endeavor to help fulfill the project needs. In addition, resource mobilization can be considered as the process of making proper use of the various resources available for the project. In Non-Governmental organizational framework, resource mobilization is essential since it offers continuity of the project to the beneficiary beyond donor support. Project resources in a health project include funding, training materials, skilled personnel to train and offer curative services to the community. Successes of such projects are required to receive full community support when it involves several stakeholders including the Ministry of health services at the county levels. Health program resources are wide and varied from project to project. Community should be trained on the importance of voluntarism in most health programs. Such volunteers stand a better chance to be trained on how they can be useful members of society who can offer first aids to victims of fire and even accidents and other emergencies before patients reach main hospitals for major treatments and surgeries (Odiek, 2010). Continuation of service provision supports sustainability, allows for scaling up projects, products and above all organizations in order to remain relevant must learn to generate new businesses (Yakubu & Ming, 2015). Monthly contributions to a health program by the community is another way a programme can elicit interest of the community since that contribution represents their sacrifice.

Communication

According to PMBOK (2017) communication is essentially at the centre of effective project management process. Studies have found the success of any project intervention depends on how successful the communication network is managed. In a project environment, effective communication entails giving out feedbacks through status reports, developing proper channels of communication and providing information promptly to where it is required when needed. It has

been said that almost 90 percent of project manager's work involve communication. Invariably, communication becomes an essential component for effective project implementations. In a health intervention communication involves allowing community to provide feedback on what they want done to them and their inputs on how the project can be made better through involvement of community and other stakeholders in the design and execution of the project. The project manager must keep an open communication doorway to project team as well as beneficiaries. This means that project communication is what makes the team to execute the project as designed. The stakeholders or the project board sets project objectives, participate in problem analysis and agreeing on outcomes and intermediate objectives. Communication is an essential process in our day-to-day life, and more so in projects where missing deadlines means a lot in terms of changing the expected budget (Rajkumar, 2010). Communication is exchanging of information from one point of the project to the other point in an efficient manner. Project often involves the project manager coordinating large group of people. Clarity in communication is the only tool that guarantee success of the project. First everyone involved in the project must be aware and clear on the scope, and they need regular updates on how the implementation process of the project will be met.

Project Control

Project control according to PMBOK (2015) means collecting data, assessing, analyzing and taking corrective actions where projects are not meeting expected deadlines. However, Jackson(2014) states that there are fundamentally seven steps towards effective project control cycle (1) develop the project plan, (2) establish the project benchmarks, (3) monitor the project performance, (4) identify performance deviations, (5) evaluate corrective options, (6) make adjustments as needed, and (7) document, report, and evaluate results. PMBOK (2014) defines project control process as ensuring that project objectives are met by monitoring and measuring progress regularly to identify variance from the project plan to facilitate corrective action. Project control is at the centre of what a project manager's core functions are since the success or failure of a project to great extent depends on how resources and results are measured during project implementation stage. Controlling a project intervention involves checking to ensure that deadlines are met as planned and the right amount of doses are given to patients and necessary training is done to ensure that patients adhere to the prescriptions given to avoid drug resistance due non-compliance to the recommended dosages by the physicians. In order to effectively control a health project, past studies recommend that several tools such as variance analysis, earned value management systems and use of beneficiary assessment tools including survey on whether the project is meeting beneficiary's expectations.

Controlling project general according to PMBOK (2017) involve assessments on how project is meeting the objectives, how project is being done within time, scope and quality specification. This simply means project control determines to a great extent the level of project success. Past studies have found that much of communication management processes are linked to enterprise environmental factors (Yakubu & Ming, 2015). These factors include culture and structure in the project; human resources that the project will rely on; policies and procedures; project work authorization systems and stakeholders risk tolerances and project management information systems.

Projects Success

The central goal of project management is to deliver successful projects. Therefore success is seen as the reason for undertaking project management. However, past studies have established that the concept of project success is subjective and more often is based on perspective of whoever is measuring it and the project type. notably, there is no consensus regarding the success criterion among researchers (Jha & Iyer, 2011) because there are many variables that can affect success, such as the context of the internal organization and the external environment in which a project is performed, and can influence both the outcome and the success of a project (Papke-Shields et al., 2010). Traditional success model that has existed for long is looking at project success within the angle of project manager that is through the lens of iron- triangle. This angle stipulate that when a project is done within time, budget and performance then this a successful project. If applied in any health intervention, then the project is done within the initial baselines, such projects can be deemed as successful.

However, according Andersen, Birchall, Jessen, & Money (2006) argued that in modern times looking at success of a project has changed. This has been supported by the past studies which found some of the previous projects were done within time, budget and designed performance but stakeholders were not happy with the project and rejected the outcome. This means that the main aim of the project is not to be done to meet the traditional iron triangle core components. Project is conceived and done for the sake of meeting the interest of stakeholders so a good success model must consider the value the project and bring in those it is intended to benefit.

Therefore, any successful model without measuring beneficiaries' satisfaction is ill conceived and inadequate. According to PMBOK (2014) project success is measured through project quality, product, timeliness, budget compliance and the level of customer satisfaction. A study by Ling *et al* (2009) examined critical successful factors that promote project success. The authors measured to what extent project nine knowledge areas contribute to success. The findings found significant association between knowledge areas and project success.

RESEARCH METHODOLOGY

The study adopted a descriptive research design and targeted 130 employees from four international health NGOs operating in Kibera. The unit of observation comprised of project team managers. The study adopted Fishers Sampling Formula in deriving a sample of 116 respondents. The study used structured questionnaires to collect both qualitative and quantitative data captured through a 5-point likert scale. Inferential and descriptive statistics was used to analyze data. Results of the analysis were presented by use of tables and figures. Inferential statistics was used to establish the association between independent variables and dependent variable. The study used

the following regression model: $\mathbf{Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_4 X_4 + \varepsilon}$

Where; **Y** = successful implementation of NGOs health projects, β_i ;i=1,2,3,4} = The coefficient for various independent variables, X_1 = Community participation, X_2 = Resource mobilization, X_3 = project communication, X_4 = project control and ε= Error term

RESULTS AND DISCUSSIONS

The study administered 116 questionnaires where 92 questionnaires were filled and returned. This represented a response rate of 79%.

Descriptive findings and analysis

Descriptive statistics enables the researcher to use statistics in describing distributions of measures or scores. The study used means percentages and mean standard deviations to present the study findings. The study rated the responses from a scale of 1-5 and presented the mean response per statement for all the study variables. The main focus of the study was to establish the determinants of successful implementation of health projects by NGOs in Kibera. The responses are presented in terms of means per study objective.

Community Participation

The first objective for this study was to establish the role of community participation in the successful implementation of health projects at the informational settlements Kibra. The items used for testing community involvement and level of impact on success of the project was measured on a five Likert scale. The scale range from strongly agree (5) to strongly disagree (1). Overally, a scale greater than 3.5 meant agreement. The data being categorical variable was analyzed in SPSS using frequencies and result presented in the table 1 below. The results shows that majority of respondents with the statements that the community actively involved in the in local projects (mean=3.97 and standard deviation=1.14), Project decisions are made by top leadership only in the team (mean=3.55 and standard deviation=1.29), that community participates through voluntarism (mean=4.23 and standard deviation=1.01), that community gives donations to support programs (mean=3.01 and standard deviation=1.34), and the NGO helps the community in needs assessment identification (mean=3.66 and standard deviation=1.31). However, respondents were indifferent on whether there is low community involvement (mean=3.21 and standard deviation=1.44) and whether the community is involved in needs assessment (mean=3.31 and standard deviation=1.23). On average, all respondents agreed with the statements on community participation as shown by an average mean of 3.69 and average standard deviation of 1.22. The result concurs with PMBOK (2017) findings that involvement and participation by the community is essential components that promote chances of project success.

Table 1: Community Participation

Statements	Mean	Std.Dev
We nurture local talents	4.01	0.89
We participates in local resource planning	4.44	0.72
Pulling efforts together	4.34	0.74
I have participated in grant proposal writing	3.19	1.19
We hire consultants to write for us proposals	2.98	1.26
We increase our partners everyday	3.99	0.95
Top leadership are responsible for networking our organization	3.78	1.01
We use social media	3.41	1.12
Average	**3.77**	**0.99**

Resource Mobilization

The second objective for this study was to examine the role of resource mobilization on successful implementation of health programs at Kibera informal settlements. There were eight items used for testing resource mobilization on a five Likert scale. The scale range from strongly agree (5) to strongly disagree (1). The results were presented in the table 2 below. The results showed that respondents agreed with the statements NGOs nurture talents (mean=4.01 and standard deviation=0.89), that the NGOs participates in local resource planning (mean=4.44 and standard deviation=0.72), that they pull resources together (mean=4.34 and standard deviation=0.74), that they increase partners everyday (mean=3.99 and standard deviation=0.95), and that the top leadership is responsible for networking the organization (mean=4.01 and standard deviation=0.89). The respondents were however indifferent with statements that they participate in writing grant proposals (mean=3.19 and standard deviation=1.19) and that they use social media in course of running their endeavors (mean=3.41 and standard deviation=1.12). On average, the respondents agreed with the statements on resource mobilization as shown by average mean of 3.77 and average standard deviation of 0.99. The results concurs with World Bank (2012) findings that in Non-Governmental organizational framework, resource mobilization is essential since it offers continuity of the project to the beneficiary beyond donor support.

2: Resource mobilization

Statements	Mean	Std.Dev
We nurture local talents	4.01	0.89
We participates in local resource planning	4.44	0.72
Pulling efforts together	4.34	0.74
I have participated in grant proposal writing	3.19	1.19
We hire consultants to write for us proposals	2.98	1.26
We increase our partners everyday	3.99	0.95
Top leadership are responsible for networking our organization	3.78	1.01
We use social media	3.41	1.12
Average	**3.77**	**0.99**

Communication

The third objective for this study was to investigate the role of communication on successful project implementation of health programs at Kibra informal settlements. There were eight items used for testing communication variable on a five Likert scale. The scale ranged from strongly agree (5) to strongly disagree (1). The results were presented in the table below 3. The results revealed that respondents agreed with statements they have cordial communication within the team(mean=4.62 and standard deviation=0.78), that team building is critical in the organization (mean=3.58 and standard deviation=1.19), that the organization practices team development and training(mean=3.68 and standard deviation=0.43), that they normally give feedback on the status of the project(mean=4.55 and standard deviation=0.52), that the management plan involves stakeholders(mean=4.3 and standard deviation=0.72) and that they usually have clear agenda before organizing any meetings (mean=4.08 and standard deviation=0.90). The respondents were however indifferent on the statements that they have workshops for training projects' stakeholders (mean=3.33 and standard deviation=1.69) and that their project meetings usually takes a long time(mean=3.11 and standard deviation=1.23). On average, respondents were in agreement with statements on project communication as shown by average mean of 4.08 and average standard deviation of 0.9. The results are consistent with Birchall, Jessen and Money (2006) who established that high-performing organizations are better at communicating key project topic areas, including objectives, budget, schedule, scope, outcomes and the project's business benefit.

3: Communication

Statement	Mean	Std.Dev
We have cordial communication within the team	4.62	0.78
Team building is crucial in our organization	3.58	1.19
Team development & training is practiced in our organization	4.68	0.43
We normally give feedback on project status	4.55	0.52
We have workshops for training projects stakeholders	3.33	1.69
We have stakeholders management plan	4.43	0.72
Our project meetings usually take long	3.11	1.23
We usually have clear agenda before any meetings are organized	4.35	0.62
Average	**4.08**	**0.9**

Internal Controls

The fourth objective for this study was to find out the role of internal controls and health programs success. There were eight items used for testing internal control variable on a five Likert scale. The scale ranged from strongly agree (5) to strongly disagree (1). The results presented in table 4 revealed that respondents agreed with the statements that they use PMIS to design and control their projects(mean=4.53 and standard deviation=0.81), that they share status updates through PMIS (mean=3.61 and standard deviation=1.01), that they send feedback through PMIS (mean=4.55 and standard deviation=0.61), that they set baseline indicators at the beginning of the project (mean=4.46 and standard deviation=0.62), that they compare budget with actual planned one (mean=3.63 and standard deviation=1.42) and that the NGO sets tracking systems to manage projects(mean=4.32 and standard deviation=0.71). Additionally, respondents also agreed to the statements that the status report is prepared by monitoring and evaluation teams (mean=4.35 and standard deviation=10.62) and that the NGO had an audit system (mean=3.56 and standard deviation=1.23). Respondents however refuted the statement that there is provision of status report on monthly basis. However, an average mean of 4.06 and average standard deviation 0.91 implies that the respondents agreed with statements on internal control. The results are consistent with Okelo (2011) who opines that project internal controls is at the centre of effective project management since project have tight deadlines and therefore the constraints must be closely monitored to ensure that deliverables are done according to specified laid down standards to enhance the success rates of projects.

Table 4: Internal control

Statements	Mean	Std.Dev
Use PMIS to design and control our projects	4.53	0.81
Sharing status updates is done through PMIS	3.61	1.01
We send feedback through PMIS	4.55	0.61
We set baseline indicator at the beginning of any project	4.46	0.62
We compare budget with actual	3.63	1.42
We set tracking systems to manage projects	4.32	0.71
Our status updates are provided every month.	3.21	1.19
Status reporting is designed by monitoring and evaluation team.	4.35	0.62
We have audit in our organization	3.56	1.23
Average	**4.02**	**0.91**

Project Implementation Success

Respondents were requested to indicate their level of agreements with statement regarding project implementation success on a scale of 1 to 5 where 1= strongly disagree,2=disagree, 3=neutral, 4=agree and 5 strongly agree. The results of the responses as presented in table 5 indicated that respondents agreed with the statements that their past three projects were able to meet the intended goals (mean=3.69 and standard deviation=1.11), that they met all preplanned deliverables (mean=4.53 and standard deviation=0.89), that the past projects were done within scope (mean=4.67 and standard deviation=0.63) and that the NGOs managed meetings efficiently (mean=4.65 and standard deviation=0.53). Consequently, respondents agreed that their projects their projects efficiently managed schedule duration (mean=4.34 and standard deviation=0.96) and that their past projects were done within time and budget as shown by (mean=4.44 and standard deviation=0.72) and (mean=3.52 and standard deviation=1.01) respectively. On average, all respondents agreed with the statements on successful implementation of projects as shown by average mean of 4.26 average standard deviation of 0.84. This corresponds with Njau (2012) findings which indicated that success in any project is subject to management of a number of project constructs which identified as project scope, project budget, project timelines and adherence to set quality standards.

Table 5: Project implementation success

Statement	Mean	Std.Dev
The past 3 project we were able to meet the goals	3.69	1.11
We met all preplanned deliverables	4.53	0.89
Past projects were done within scope	4.67	0.63
We manage project meetings efficiently	4.65	0.53
In our projects we efficiently manage schedule durations	4.34	0.96
Past three projects were done within time	4.44	0.72
The past three projects was done within budget	3.52	1.01
Average	**4.26**	**0.84**

Inferential Statistics

Correlation Analysis

A spearman's correlation was run to assess the relationship between community participation, resource mobilization, communication and internal controls on project implementation success on 92 respondents. The study established a strong positive correlation which was statistically significant that is r= .443, p=0.000 on resource mobilization, r_s = .573**, p = .000 on communication, and r=.798**, p=0.000 on internal controls. The results showed that community participation negatively influenced implementation success of projects as shown by r=-.078 and p=.463.

Table 6: Spearman's Correlation

			Participation	Resource mobilization	communication	Internal control	Success
Spearman's rho	Community participation	Correlation Coefficient	1.000				
		Sig. (2-tailed)	.				
		N	92				
	Resource mobilization	Correlation Coefficient	.062	1.000			
		Sig. (2-tailed)	.558	.			
		N	92	92			
	communication	Correlation Coefficient	.035	.573**	1.000		
		Sig. (2-tailed)	.742	.000	.		
		N	92	92	92		
	Internal control	Correlation Coefficient	-.111	.458**	.573**	1.000	
		Sig. (2-tailed)	.293	.000	.000	.	
		N	92	92	92	92	
	Success	Correlation Coefficient	-.078	.443**	.511**	.798**	1.000
		Sig. (2-tailed)	.463	.000	.000	.000	.
		N	92	92	92	92	92

**. Correlation is significant at the 0.01 level (2-tailed).

Regression Analysis

Regression Analysis was conducted to establish the relationships between the variables and the results presented in table 8. The model summary shows that the coefficient of determination was R Square = .850 showing that the variables had high influence on the dependent variable (project success to (85%) only leaving factors outside the model error term to be 15%.

Table 7: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.922[a]	.850	.843	.033401

a. Predictors: (Constant), X1, X2, X3, X4

A multiple linear regression was calculated to determine project implementation success based on community participation, resource mobilization, communication and internal control. A significant linear regression was found (4, 87) = 122.868, $p < 0.000$ with an R-Square of 0.850 also called the coefficient of determination. ANOVA findings established that the model linking independent variables to the independent variables was statistically significant. The significance is confirmed by p value =0.000 which is less than 0.05.

Table 7: ANOVA (Model Significance)

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	54.830	4	13.707	122.868	.000b
	Residual	9.706	87	.112		
	Total	64.535	91			

a. Dependent Variable: Success of implementing projects

b. Predictors: (Constant), X4, X1, X2, X3 where X4 = internal control, X1= community participation X2= resource mobilization X3 = communication

Table 8: Model Coefficients

	Standardized Coefficients		Unstandardized Coefficients		
	B	Std. Error	Beta	t	Std. Error
(Constant)	-0.464	0.317		-1.465	0.146
Community participation	-0.04	0.056	-0.03	-0.711	0.479
Resource mobilization	0.264	0.168	0.051	0.573	0.0348
Communication	0.043	0.139	0.026	0.309	0.05
Internal control	0.554	0.103	0.371	5.377	0

The optimal linear regression model for the study therefore becomes:

Successful implementation of projects = -0.464 + 0.554 (Internal Control) + 0.264 (Resource Mobilization) + 0.043 (Communication) - 0.04 (Community Participation)

CONCLUSION AND RECOMMENDATIONS

Conclusion

The study findings concluded that resource mobilization positively and significantly determines successful implementation of NGOs health projects in Kibera. The study further established that practices such conducting harambees to raise funds, presenting grant proposals to prospective donors and creating networks with various institutions and individuals for funding purpose positively and significantly determine successful implementation of NGOs health projects in Kibera. The study findings also concluded that communication positively and significantly determines successful implementation of NGOs health projects in Kibera. Remarkably, the study established that practices such as team communication, stakeholders' communication and continuous meetings on progress of the project positively and significantly determine successful implementation of NGOs health projects in Kibera

The study findings further concluded that internal controls positively and significantly determine successful implementation of NGOs health projects in Kibera. The study further established that practices adoption of project management information systems, conducting variance analysis in terms of cost and time and offering progressive status updates on the project determines successful implementation of NGOs health projects in Kibera. The study finally concluded community involvement negatively and insignificantly determines successful implementation of health projects amongst NGOs operating in Kibera. The study further established that involving the community in making decisions, needs assessment and making participation voluntary negatively and insignificantly determines successful implementation of health projects by NGOs in Kibera.

Recommendations

The study found a weak relationship and negative relationship between community involvement and project implementation success. Majority of the respondents argued that community is only useful during planning but the implementation stage is left on experts. However, this is contrary to the concept of participatory monitoring and evaluation where the community must be properly

integrated throughout the project cycle. The study also found a strong relationship between resource mobilization and implementation success. Most respondents argued that resource flow is the lifeline of project and therefore resource identification, screening and matching of resources is at the core of project management. This study recommends thus, project managers must consider resource allocation, planning and loading important parameters for effective implementation process. The studies also recommend that effective communication network is necessary during project execution and should be a top priority for success. The study also recommends putting necessary and important safeguard in the form of controls in the key constrains like cost controls mechanisms, time and quality controls which guaranteed beneficiary to receive the best outputs out from projects being implemented.

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REFERENCES

A guide to the project management body of knowledge (PMBOK® guide) (2017) Fifth edition, Project Management Institute, Inc.

Abbott, M.L., & McKinney, J. (2013). *Understanding and applying research design* (1st edition). Somerset, NJ, USA: John Wiley & Sons, Inc

Alexander, A., & Martin, D. (2013). Intermediaries for open innovation: A competence-based comparison of knowledge transfer offices practices. *Technological Forecasting & Social Change. 8 (2):* 38–49.

Andersen, E. S., Birchall, D., Jessen, S. A., & Money, A. H. (2006). Exploring project success. *Baltic Journal of Management, 1*(2), 127–147.

Andreja, T. (2004). *How to mobilize local resources; A guide for NGOs and citizen's initiatives*. Academy for educational development.Croiatia

Bell, E., & Bryman, A. (2007). The ethics of management research: an exploratory content analysis. *British journal of management, 18* (1): 63- 77.

Binder, J. (2007). *Global project management: Communication, collaboration and management across borders.* Aldershot, UK: Gower.

Bonjour, E., & Micaelli, J. P. (2010). Design core competence diagnosis: a case from the automotive industry. *Engineering Management, IEEE Transactions on, 57*(2), 323-337.

Chaim Vivian, C. (2011*). A guide to resource mobilization planning*. Telecentre foundation. Philippines.

Chauvet et al. (2010). *Global project management handbook: Planning, organizing and controlling international projects* (2nd ed.). New York, NY: The Mc-Graw Hill Companies Inc.

Clarke, A. (1999). A practical use of key success factors to improve the effectiveness of project management. *International Journal of Project Management, 17*(3), 139–145.

Cook, W.K. (2008). Integrating research and action: a systematic review of community-based participatory research to address health disparities in environmental and occupational health in the USA. *Journal of epidemiology and community health. 62*(8), 668–676.

Cooper, R.D., & Schindler, S. P. (2012). *Business research methods* (11th edition). Singapore: McGraw Hill

Creswell, J.W. (2005). *Educational Research: Planning, conducting and evaluating Quantitative and Qualitative Research*. 2nd edition. Pearson Merrill Prentice Hall

Danilovic, M., & Leisner, P. (2007). Analyzing core competence and core products for developing agile and adaptable corporation. In Proceedings of the 9th Dependency Structure Matrix (DSM) International Conference, 16–18

Frankfort- Nechmias, C., & Nachmias, D. (2007). *Study guide for research methods in the social sciences*. 1 edition: Macmillan press.

Frese, R. & Sauter, V. (2013). *Project success and failure: What is success, what is failure, and how can you improve your odds for success?* Retrieved from http://www.umsl.edu/~sauterv/analysis/6840_f03_papers/frese/

Goetz, K.H., Patz, R. (2017*). International Organizations: Resource Diversification, Organizational Differentiation, and Administrative Governance', forthcoming in*: Global Policy.

Ika, L. A., Diallo, A., & Thuillier, D. (2010). Project management in the international development industry: the project coordinator's perspective. *International Journal of Managing Projects in Business, 3*(1), 61-93.

Israel B, Schulz A, Parker E, Becker A. (2001). Community-based participatory research: policy recommendations for promoting a partnership approach in health research. *Education for Health. 14*(2):182–197.

Kimwele, J. (2011). Factors affecting effective implementation of integrated financial management information systems (IFMIS) in government ministries in Kenya, Unpublished Thesis, University of Nairobi: Kenya

Kliem, R. L. (2008). *Effective communications for project management.* Boca Raton, FL: Auerbach Publications.

Kothari, C.R. (2009). *Research methodology: Methods and Techniques*. New Delhi: New Age International Publishers

Manila (2010).Venture for fund raising, Resource mobilization, a practical guide for research and community based organizations. Second edition.

Mbatia, W. & Indusa, H. (2007). The Kenya Networks of Grassroots Organizations (KENGO) Progress report on activities with grassroots organizations.

Mugenda, A.G. (2008). *Social science research: theory and principles*. Nairobi Applied

Mutisya, P. (2013). *Strategy implementation by milk processors in Kenya* (Unpublished Thesis, University of Nairobi, Kenya).

Nachmias, D., & Nachmias, C. (2008). *Research methods in social sciences*. London: St Martin's Press

Njau, J. (2012). *Factors influencing implementation of the African Development Bank funded project in the ministry of higher education, science and technology – Kenya* (Unpublished Thesis, University of Nairobi, Kenya)

Ntuala, S. (2010). *Factors influencing implementation of Constituency Development Funded Projects: a case of Tigania East Constituency* (Unpublished Thesis, University of Nairobi, Kenya).

Okelo, S. (2011). *Factors influencing completion of constituency development funded projects in secondary schools in Rongo District, Kenya* (Unpublished Thesis, University of Nairobi, Kenya).

Othieno, F. J. J. (2012). *The role of communication in development projects in Kenya: a case of Kibera Soweto Housing Project* (Doctoral dissertation, University of Nairobi, Kenya).

PMI, (2014). *A guide to the project management body of knowledge*. (3rd Ed.) Newtown Square, USA: Project Management Inc

Project Management Institute. (2014). *A guide to the project management body of knowledge*: PMBOK® guide – Third Edition.

Project Management Institute. (2017). *A guide to the project management body of knowledge (PMBOK® Guide)* (6th ed.). Newtown Square, PA: Project Management Institute.

Yakubu, O, Ming, S. (2015) Construction project control in the UK: Current practice, existing problems and recommendations for future improvement, *International Journal of Project Man agement 33(12)*, 623–637.