



INFLUENCE OF STAKEHOLDERS INVOLVEMENT IN MONITORING AND EVALUATION ON COMPLETION OF CDF HEALTH CONSTRUCTION PROJECTS IN BUSIA COUNTY, KENYA

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Abstract

Monitoring and evaluation of projects is fundamental if the project objectives and success is to be achieved since it improves overall efficiency of project planning, management and implementation. This study sought to determine the influence of stakeholders involvement on completion of CDF health construction projects in Busia County, Kenya. This study employed a descriptive survey research design. The total target population for the study comprised of 154 and therefore sample size for this study was 48 respondents. The main tools of data collection for this study were questionnaires and interview schedules for the key informants. The researcher administered questionnaires directly to the target respondents, to complement the questionnaire model; the researcher interviewed the key informants. Frequency tables with varying percentages were used to present the findings. The data was analyzed using both descriptive (arithmetic means, standard deviations), and inferential (Simple, multiple linear regression and Pearson's correlation coefficient) statistical methods with the aid of SPSS-version 21. Tests of statistical assumptions were carried out before data analysis to avoid invalidation of statistical analysis. The hypotheses was tested at $\alpha=.05$ level of significance.

H01: Stakeholder involvement does not significantly influence completion of CDF health construction projects was rejected since $P=0.000<0.05$; The researcher recommends that government policies should be integrated to monitoring and evaluation tools in order to fast struck completion of CDF health construction.

Keywords: Monitoring, evaluation, stakeholders, CDF, health construction projects

INTRODUCTION

Monitoring and evaluation (M&E) are tools employed to assess the relationships of intentions versus actions, actions versus outcomes, and outcomes versus impacts. However, the most important, yet quite often the most neglected aspect of monitoring and evaluation is feedback. It is the feedback of lessons learned through M&E that assists correction of current mistakes and improvement of future decisions (Khan, 2010).

In Kenya, Constituency Development Fund (CDF) was established in 2003 through an act of parliament in Kenya after Local Authority Transfer Fund (LATF) failed to improve service delivery to the society as an attempt to decentralization (GoK, 1998). It aimed at improving service delivery, alleviating poverty, enhancing economic governance and ultimately contributing to socio-economic development. Under the CDF Act, an amount not less than 2.5% of government's annual revenue is set aside for the fund (Awiti, 2008).

In order to ensure successful project implementation as per the set goals and objectives, governments and private businesses are continuously getting involved in the process of monitoring and evaluation. Monitoring and evaluation provides development partners with answers to questions like; what development interventions make a difference? Is the project having the intended results? What can be done differently to better meet goals and objectives? Monitoring and evaluation are therefore important management tools which are used to track project progress and facilitate decision making for better performance of the project. When planning for monitoring and evaluation, there are key steps that should be taken into account; firstly, identifying who will be involved in design, implementation and reporting which involves engaging stakeholders to ensure their perspectives are understood and feedback incorporated. Secondly, clarifying the scope, purpose, intended use, audience and budget for evaluation. Thirdly, developing the questions to answer what you want to learn as a result of the project. Fourthly, selecting measurable indicators and fifth, determining the data collection methods. Evaluation aims to analyse the past to understand the future of the project (Gaventa and Blauert, 2014). Providing support and strengthening of M and E team is a

sign of good governance. Providing support and strengthening of M&E team will also play a key role in ensuring that the M and E team adds value to the organizations operations (Naidoo, 2011). A motivated team usually achieves high performance.

Objective of the Study

The study sought to determine the influence of stakeholders involvement on completion of CDF health construction projects in Busia County, Kenya.

LITERATURE REVIEW

Monitoring and evaluation (M&E) are tools employed to assess the relationships of intentions versus actions, actions versus outcomes, and outcomes versus impacts. However, the most important, yet quite often the most neglected aspect of monitoring and evaluation is feedback. It is the feedback of lessons learned through M&E that assists in correction of current mistakes and improvement of future decisions (Khan, 2010). A results-based M&E system is essentially a feedback system; it is a management tool to measure and evaluate outcomes, providing information for governance and decision making (Gorgens and Kusek, 2010). A results-based system, whilst not neglecting the monitoring of inputs and outputs, attaches the highest importance to providing feedback on results at the level of outcomes and goals (Edmunds and Marchant, 2010).

According to a study by Mwangi (2015) on the Factors influencing success of Constituency Development Fund (CDF) projects in Nyeri County, Central Province, Kenya, it was found out that majority of the projects that carry out monitoring and evaluation use only one of the monitoring tools; with weekly progress reports being the most preferred. Other tools that are used include Gantt charts and earned value charts. Gantt charts help to plan, coordinate and track specific tasks for a simple project while earned value charts helps to control cost and schedule especially in larger logistics projects using Work In Progress (Śliwaczyński, 2016). However, a considerable proportion of the projects do not use any of the monitoring tools. It was also found out that in majority of the projects, monitoring tools are updated on weekly basis. These factors point out that the monitoring and evaluation systems adopted are weak since they are relatively inadequate and infrequently updated. This could explain why most of the projects are completed over budget and behind schedule.

Stakeholder engagement has become increasingly necessary as large and more complex projects are planned and implemented (Gray, 2001). Stakeholders can participate at various levels of which the lowest is information sharing at a higher level is consultancy for decision making. At higher level the developer can collaborate with stakeholders in each aspect

of decision making including the development of alternatives and the identification of the preferred solution. At highest level it can empower stakeholders to make final decision.

Shepard and Gonzalez (2004) assessed the effectiveness of organizations through interviews with managers of twenty (20) different projects. The projects covered energy, aerospace, and chemical endeavours. According to their study, stakeholder Involvement management solving problems was found preferable to vertical management structure. They termed communication among the managers as a critical need. Furthermore, they found the project variables such as, clearly defined goals, role clarity, teamwork values, flexibility in response to need and a team commitment, as critical variables for success.

Holmes and Moir (2009) observed that stakeholder's Involvement in environmental control project in construction is a formal process of relationship management through which clients, contractors and sub-contractors engage with a set of primary and secondary stakeholders, in an effort to align their mutual interest to reduce risk in projects. According to Madeeha and Imran (2014), stakeholder Involvement in monitoring of the Baku-Tblisi-Ceyhan Pipeline project by national NGOs was a recommendation that arose during the construction phase of the project. BTC took up this recommendation, with support from IFC and EBRD, with the view that constructive and well-informed NGO monitoring was useful to the company as it improved the performance of the project.

Aapaoja, Haapasalo and Söderström (2013) examined early stakeholders' involvement in the project definition phase in Finland. They discussed the process and nature of the project definition phase in relational project delivery methods (RPDMs), with the main focus on early stakeholder involvement. The results are derived from the analysis of the literature and an empirical study (interviews). The stakeholders, their roles in the renovation project, and at which stage they should each be involved in the project definition process are determined. Their findings show that projects cover different levels of stakeholders, whose requirements and purposes must be considered and managed. Early involvement allows room for creative solutions and the intensive exchange of ideas. Thus, it leads to procedures that run in phases, which in turn change the project's value creation to holistic value correlation. Their work facilitates and contributes to early stakeholder involvement and the creation of integrated teams by identifying and consolidating the different levels, roles, responsibilities, and objectives of the stakeholders.

Heravi, Coffey, and Trigunarysyah (2015) examined the level of stakeholder involvement during the project's planning process in Australia. Stakeholders often provide the needed resources and have the ability to control the interaction and resource flows in the network. They also ultimately have strong impact on an organisation's survival, and therefore appropriate

management and involvement of key stakeholders should be an important part of any project management plan. A series of literature reviews was conducted to identify and categorise significant phases involved in the planning. For data collection, a questionnaire survey was designed and distributed amongst nearly 200 companies who were involved in the residential building sector in Australia. Results of the analysis demonstrated the engagement levels of the four stakeholder groups involved in the planning process and established a basis for further stakeholder involvement improvement. Their study established that project managers/owners have the highest and contractors have the lowest level of engagement in the planning process. They therefore saw a need to improve the effectiveness of key stakeholder's involvement during the initial and planning phases.

Eyiah-Botwe, Aigbavboa and Thwala (2015) looked into Critical barriers affecting stakeholder management in the construction industries of Ghana, Nigeria, South Africa and Botswana. A literature review of selected articles on stakeholder management was validated using interviews of 6 project key stakeholders. The study confirmed five additional critical barriers relating to (1) project managers knowledge in stakeholder management (2) public procurement approach, (3) politicization of projects (4) project delays and (5) poor project planning and development. These findings may not be generalized due to limited research participants involved. Nonetheless, it serves as a useful basis for further research and contributes to the body of knowledge by identifying critical barriers affecting stakeholder management in the developing nations' construction industry for improved construction projects delivery. Considering and managing these critical barriers will ensure the achievement of project goals, stakeholder needs and satisfaction.

In Kenya, Kinyoda (2009) did a study on the level of participation in project identification and selection by constituents in Makadara. The study recommended that the government and civil society should facilitate public awareness campaigns. Further there should also be guidelines on how public participation should take place. Mochiemo (2007) did a study on the contribution of the community in successful completion of CDF projects in KitutuChacheKisii central District and found that the government NGO's, CDF and any other body which would like to start a project in a community, should involve and encourage contributions of the community from the initial identification of a project to end and ensure successful completion and sustainability. Further, Kairu (2010) did an analysis of the factors that influence successful management of the CDF. The case of Gatanga constituency and recommended that there should be adequate transportation at the constituency level for effective M and E of the projects. There is need for strict enforcement of the provisions of CDF act in CDC formation to reduce problems in implementation of the CDF projects.

METHODOLOGY

The research design for this study was descriptive survey research design. The study fitted within the provisions of descriptive survey research design because the researcher collected data and report the way things are without manipulating any variables. The target population for this study was 194. It comprised of all the 28 CDF committee officials, 42 community local leaders, 62 project committee members and 62 officers in-charge of health institutions. The target population was drawn from the seven constituencies in Busia County, Kenya. The researcher used 30% of each constituency health facilities to get the sample sizes of health facilities (Gay, 2003). The study used probability sampling procedure to select respondents for the study. The probability sampling used was stratified and random sampling technique, from each stratum simple random sampling was applied to arrive at 59 respondents. The sample size consisted of 7 CDFC officials, 14 Community local leaders, 19 officers in charge of health institutions and 19 project management committee officials drawn from all the seven constituencies of Busia County. The main tool of data collection for this study was a questionnaire and the use of interview schedules targeting key informants. Data of both quantitative and qualitative type was collected in the month of November by the researcher through interview schedules. The researcher obtained research permission from the Busia county Education office and the office of the County Commissioner. Quantitative data analysis began by editing, coding checking for clarity. Data was then analysed using descriptive statistics of mean, percentages and frequencies. Data from the likert scale was analysed by inferential statistics. The hypothesis was analysed as follows using Pearson correlation coefficient. Hypothesis H₁: There is significant relationship between stakeholders' involvement and completion of CDF health construction project in Busia County, Kenya. Multiple regression was conducted. H₁: There is a significant relationship between stakeholders' involvement and completion of CDF health construction project in Busia County, Kenya.

Completion of CDF health construction projects = f (stakeholders involvement, random error)

$$Y_j = \beta_0 + \beta_1 X_1 + \alpha_i$$

Qualitative data was measured thematically, responses were classified into broad categories. Coding was done as per themes after identification of consistency. A theme was considered present in the data if it occurred at least three times across all interviewees. Three times as used because it presented a 10% endorsement which is the lowest permissible effect based on Cohen (2000) non-linear arcsine transformation criteria. A value of 2 was to be assigned when a theme appears or deemed to be present, and a value of 1 when the theme did not appear on a respondent responses.

FINDINGS

Demographic Information of the Respondent

The study sought information of respondent's demographic information. The demographic questionnaire for respondents sought information on the respondent's constituency, gender, age bracket, and educational level. 7 of the respondents who constitute 15.2% were from Teso North constituency, 7 of the respondents who constitute 15.2% were from Nambale constituency, 6 of the respondents who constitute 13.0% were from Funyula constituency, 6 of the respondents who constitute 13.0% were from Butula constituency, 7 of the respondents who constitute 15.2% were from Bunyala constituency, 5 of the respondents who constitute 10.9% were from Matayos constituency and 8 of the respondents who constitute 17.4% were from Teso South constituency. This descriptive frequencies statistics suggests that there were likely similar number of respondents from the seven constituencies. 21 (45.7%) of the respondents were female whereas 25 (54.4%) were males; implying that there were more males than females respondents in this study. Majority (22, 47.8%) of the respondents were in the age bracket of 36-45 years, followed by 14(30.4%%) who were in the age bracket of 46-60 years and 10(21.7%) drawn from ages 18-35 years . The age distribution implies that all the respondents were adults exhibiting both maturity and experience in responding to the items in the instrument used in the research. Majority of the respondents' 16(34.8%) had attended school up diploma level of education, 15(32.6%) respondents managed to have certificate level of education, 6(13.0%) respondents had both primary and degree and above level of education below level background and the remaining 3(6.5%) were having secondary level of education . The findings imply that respondents in this study had at least basic educational literacy to provide necessary responses that were related to this current study in terms of objectively answering the questions asked in the questionnaire. Table 1 presents the demographic profiles of the Respondents

Table 1: Respondents demographic profile

Respondent's Profile	Frequency	Percent (%)	Cumulative %
Age bracket			
18-35yrs	10	21.7	21.7
36-45yrs	22	47.8	69.5
46-60yrs	14	30.5	100
Total	46	100.0	

Table 1...

Gender			
Male	21	45.7	45.7
Female	25	54.3	100
Total	46	100	
Educational level			
Degree and above	6	13.0	13.0
Diploma	16	34.8	47.8
Certificate	15	32.6	80.4
Secondary	3	6.6	87.0
Primary	6	13.0	100
Total	46	100	
Constituency			
Teso North	7	15.2	15.2
Nambale	7	15.2	30.4
Funyula	6	13.0	43.4
Butula	6	13.0	56.4
Bunyala	7	15.2	71.6
Matayos	5	10.9	82.5
Teso South	8	17.5	100
Total	46	100	

Influence of stakeholders involvement on the completion CDF health construction projects

In order to ensure successful project implementation as per the set goals and objectives, governments and private businesses are continuously getting involved in the process of monitoring and evaluation. It was important to get information from project management committee's members pertaining influence of stakeholders involvement on completion of CDF health projects. This was the first objective that the study sought to achieve. The respondents were requested to respond to the statements in the Likert scale of 5-1 where 5=strongly agree, 4=Agree, 3=Neutral, 4=Disagree, 5=strongly disagree. The responses are presented in Table 2.

Table 2: Descriptive Analysis of the influence of stakeholder's involvement on the completion CDF health construction projects

Statements	SA	A	N	D	SD	Mean	Std. Deviation
Scoping process enhances completion of health construction projects	1 (5.9%)	7 (41.2%)	6 (35.3%)	1 (5.9%)	2 (11.8%)	3.24	1.091
Existence stakeholders' analysis enhances completion of health construction projects	3 (17.6%)	6 (35.3%)	6 (35.3%)	1 (5.9%)	1 (5.9%)	3.53	1.068
Stakeholder level of participation contributes to completion of health construction projects	4 (23.5%)	6 (35.3%)	5 (29.4%)	1 (5.9%)	1 (5.9%)	3.66	1.115
Identifying of stakeholders assists in completion of health construction projects	5 (29.4%)	4 (23.5%)	6 (35.3%)	1 (5.9%)	1 (5.9%)	3.65	1.169

Composite mean=3.100 ; Composite standard deviation=1.14

Four items were developed to measure the extent of this relationship of stakeholder's involvement on the completion CDF health construction projects

Item 1 sought to establish the extent to which the scoping process enhances completion of CDF health construction projects .The mean score was 3.24 while the standard deviation was 1.091. This result indicates that the majority; 7(41.2%) of the respondents agreed that scoping process enhances completion of CDF health construction projects, followed by 6(35.3%) who neutral that scoping process enhances completion of CDF health construction projects, 2 (11.8%) both strongly agreed and disagreed that scoping process enhances completion of CDF health construction projects whereas 2(11.8%) strongly disagreed that scoping process enhances completion of CDF health construction projects. Item 2 sought to establish the extent to which the existence of stakeholders analysis enhances the completion of CDF health construction projects. The mean score was 3.53 while the standard deviation was 1.068. This result indicates that the majority; 12(70.6%) of the respondents both agreed as well were neutral that the existence of stakeholders analysis enhances the completion of CDF health construction projects, followed by 3(17.6%) who strongly agreed that the existence of stakeholders analysis enhances the completion of CDF health construction projects and 2(11.8%) both disagreed and strongly disagreed that the existence of stakeholders analysis enhances the completion of CDF health construction projects. Item 3 sought to establish the extent to which the stakeholders

level of participation contribute to the completion of CDF health construction projects .The mean score was 3.66 while the standard deviation was 1.115. This result indicates that the majority; 6(35.3%) of the respondents agreed that the stakeholders level of participation contribute to the completion of CDF health construction projects, followed by 5(29.4%) who were neutral that stakeholders level of participation contribute to the completion of CDF health construction projects, while 4(23.5%) strongly agreed that stakeholders level of participation contribute to the completion of CDF health construction projects and 2(11.8%) both disagreed and strongly disagreed that the stakeholders level of participation contribute to the completion of CDF health construction projects. Item 4 sought to establish whether identification of stakeholders assists in completion of CDF health construction projects. The mean score was 3.65 while the standard deviation was 1.169. This result indicates that the majority; 6(35.3%) of the respondents were neutral that identification of stakeholders assists in completion of CDF health construction projects, 5 (29.4%) strongly agreed that identification of stakeholders assists in completion of CDF health construction projects, 4(23.5%) agreed that identification of stakeholders assists in completion of CDF health construction projects while 2(11.8%) both disagreed and strongly disagreed that the stakeholders level of participation contribute to the completion of CDF health construction projects. The composite mean score for these four items was 3.098; while the composite standard deviation was 1.135. The implication of this finding is that majority of the respondents agreed that the stakeholders involvement influences the completion of CDF health construction projects. These findings are consistent with (Schilder 1997).

These findings were further supported by qualitative data and this is what the project managers had to say on stakeholder's involvement and completion of CDF health construction projects. The entire project managers agreed that stakeholder involvement has significant influence on project completion.

The study sought to examine the relationship between stakeholder's involvement and completion of CDF health projects. Pearson correlation coefficient was used to test the relationship between stakeholder's involvement and completion of CDF health projects; this was done at 95% level of confidence. To test the extent of the relationship between stakeholders involvement and completion of CDF health projects four characteristics of stakeholders involvement were computed based on the following hypothesis;

H_{01} : There is no significant relationship between stakeholder's involvement and completion of CDF health projects

The Pearson's Product Moment Correlation coefficients showed that all the four items of stakeholder involvement strategies were positively correlated to the completion of CDF health

construction projects. The positive sign of correlation observed suggests that the completion of CDF health construction projects moves in the same direction with the continued involvement of stakeholders. In addition the correlation statistics results on the relationship between stakeholder involvement strategies and CDF health construction projects indicated that all the stakeholder involvement strategies indicators were significantly related (P -values <0.05) against the indicators of and CDF health construction projects. The small p -values ($p<0.05$) implies that there is a significant relationship between the stakeholder involvement strategies and CDF health construction projects, leading to rejection of the null hypothesis that is no significant relationship between stakeholder involvement and the CDF health construction projects and it was concluded that there was a significant relationship between stakeholder involvement and the CDF health construction projects. The results are consistent with the findings of other studies that found significant relationships between stakeholder involvement and the CDF health construction projects UNOPS (2013). The correlation statistics are shown in table 3.

Table 3: Correlation Analysis of stakeholder's involvement and completion of CDF health construction projects

Stakeholder involvement strategies	Completed CDF health construction projects
Scoping process enhances completion of health construction projects	Pearson Correlation Sig. (2-tailed) N
	.860** .000 17
Existence stakeholders analysis enhances completion of CDF health construction projects	Pearson Correlation Sig. (2-tailed) N
	.905** .000 17
Identifying of stakeholders assists in completion of CDF health construction projects	Pearson Correlation Sig. (2-tailed) N
	.902** .000 17
Stakeholders level of participation contributes to completion of CDF health construction projects	Pearson Correlation Sig. (2-tailed) N
	.530* .038 17
completion of CDF health construction projects	Pearson Correlation Sig. (2-tailed) N
	1 17

Influence of stakeholders involvement on the completion CDF health construction projects

In order to ensure successful project implementation as per the set goals and objectives, governments and private businesses are continuously getting involved in the process of monitoring and evaluation. It was important to get information from community local leaders pertaining influence of stakeholders involvement on completion of CDF health projects. This was the first objective that the study sought to achieve. The respondents were requested to respond to the statements in the Likert scale of 5-1 where 5=strongly agree, 4=Agree, 3=Neutral, 4=Disagree, 5=strongly disagree. The responses are presented in the Table 4.

Table 4: Descriptive Analysis of the influence of stakeholder's involvement on the completion CDF health construction projects

Statements	SA	A	N	D	SD	Mean	Std. Deviation
Scoping process enhances completion of health construction projects	0 (0.0%)	5 (50.0%)	4 (40.0%)	1 (10.0%)	0 (0.0%)	3.40	0.699
Existence of stakeholders' analysis enhances completion of health construction projects	1 (10.0%)	2 (20.0%)	4 (40.0%)	3 (30.0%)	0 (0.0%)	3.10	0.994
Stakeholder level of participation contributes to completion of health construction projects	0 (0.0%)	1 (10.0%)	5 (50.0%)	4 (40.0%)	0 (0.0%)	2.70	0.675
Identifying of stakeholders assists in completion of health construction projects	0 (0.0%)	8 (80.0%)	2 (20.0%)	0 (0.0%)	0 (0.0%)	3.80	0.422

Composite mean=2.30; Composite standard deviation=1.761

Four items were developed to measure the extent of this relationship of stakeholder's involvement on the completion CDF health construction projects. Item 1 sought to establish the extent to which the scoping process enhances completion of CDF health construction projects. The mean score was 3.40 while the standard deviation was 0.699. This result indicates that the majority; 5(50%) of the respondents agreed that scoping process enhances completion of CDF

health construction projects, followed by 4(40%) who were neutral that scoping process enhances completion of CDF health construction projects, 1 (10%) disagreed that scoping process enhances completion of CDF health construction projects whereas. Item 2 sought to establish the extent to which the existence of stakeholder's analysis enhances the completion of CDF health construction projects. The mean score was 3.10 while the standard deviation was 0.994 .This result indicates that the majority;4(40%) of the respondents were neutral that the existence of stakeholders analysis enhances the completion of CDF health construction projects, followed by 3(30%) who disagreed that the existence of stakeholders analysis enhances the completion of CDF health construction projects and 2(20%) who agreed that the existence of stakeholders analysis enhances the completion of CDF health construction projects and 1(10%) of the respondent strongly agreeing that the existence of stakeholders analysis enhances the completion of CDF health construction projects. Item 3 sought to establish the extent to which the stakeholders level of participation contribute to the completion of CDF health construction projects. The mean score was 2.70 while the standard deviation was 0.675. This result indicates that the majority; 5(50%) of the respondents were neutral that stakeholders level of participation contribute to the completion of CDF health construction projects, 4(40%) disagreed that the stakeholders level of participation contribute to the completion of CDF health construction project, while 1(10%) agreed that stakeholders level of participation contribute to the completion of CDF health construction projects. Item 4 sought to establish whether identification of stakeholders assists in completion of CDF health construction projects. The mean score was 3.80 while the standard deviation was 0.422.This result indicates that the majority; 8(80%) of the respondents agreed that identification of stakeholders assists in completion of CDF health construction projects, 2 (20%) were neutral that identification of stakeholders assists in completion of CDF health construction projects. The composite mean score for these four items was 2.30; while the composite standard deviation was 0.761 .The implication of this finding is that majority of the respondents were neutral that the stakeholder's involvement influences the completion of CDF health construction projects. This findings are consistent with Kariuki (2011).

These findings were further supported by qualitative data and this is what the project managers had to say on stakeholder's involvement and completion of CDF health construction projects. The entire project managers agreed that stakeholders involvement is key to completion of projects in agreement with the views of Kariuki (2011).

The study sought to examine the relationship between stakeholder's involvement and completion of CDF health projects. Pearson correlation coefficient was used to test the relationship between stakeholder's involvement and completion of CDF health projects; this was

done at 95% level of confidence. To test the extent of the relationship between stakeholders involvement and completion of CDF health projects four characteristics of stakeholders involvement were computed based on the following hypothesis;

H_{01} : There is no significant relationship between stakeholder's involvement and completion of CDF health projects

The Pearson's Product Moment Correlation coefficients showed that all the four items of stakeholder involvement strategies were positively correlated to the completion of CDF health construction projects. The positive sign of correlation observed suggests that the completion of CDF health construction projects moves in the same direction with the continued involvement of stakeholders. In addition the correlation statistics results on the relationship between stakeholder involvement strategies and CDF health construction projects indicated that all the stakeholder involvement strategies indicators were significantly related (P -values <0.05) against the indicators of and CDF health construction projects. The small p -values ($p<0.05$) implies that there is a significant relationship between the stakeholder involvement strategies and CDF health construction projects, leading to rejection of the null hypothesis that is no significant relationship between stakeholder involvement and the CDF health construction projects and it was concluded that there was a significant relationship between stakeholder involvement and the CDF health construction projects The results are consistent with the findings of other studies that found significant relationships between stakeholder involvement and the CDF health construction projects Kariuki (2011). The correlation statistics are shown in table 5.

Table 5: Correlation Analysis of stakeholders' involvement and completion of CDF health construction projects

Stakeholder involvement strategies	Completed CDF health construction projects
Scoping process enhances completion of health construction projects	Pearson Correlation Sig. (2-tailed) N
	.761** .020 10
Existence of CDF health construction projects	Pearson Correlation Sig. (2-tailed) N
analysis enhances completion of CDF health construction projects	
	.915** .000 10
Identifying of stakeholders assists in completion of health construction projects	Pearson Correlation Sig. (2-tailed) N
	832** .000 10

Stakeholders level of participation contributes to completion of CDF health construction projects	Pearson Correlation	.650	Table 5...
	Sig. (2-tailed)	.028	
	N	10	
Completed CDF health construction projects	Pearson Correlation	1	
	Sig. (2-tailed)		
	N	10	

Influence of stakeholders involvement on the completion CDF health construction projects

In order to ensure successful project implementation as per the set goals and objectives, governments and private businesses are continuously getting involved in the process of monitoring and evaluation. It was important to get information from officers in charge of health institutions pertaining influence of stakeholders involvement on completion of CDF health projects. This was the first objective that the study sought to achieve. The respondents were requested to respond to the statements in the Likert scale of 5-1 where 5=strongly agree, 4=Agree, 3=Neutral, 4=Disagree,5=strongly disagree. The responses are presented in Table 6.

Table 6: Descriptive Analysis of the influence of stakeholder's involvement on the completion CDF health construction projects

Statements	SA	A	N	D	SD	Mean	Std.Dev.
Scoping process enhances completion of health construction projects	2 (10.5%)	10 (52.6%)	3 (15.8%)	3 (15.8%)	1 (5.3%)	3.47	1.073
Existence of stakeholders' analysis enhances completion of health construction projects	2 (10.5%)	7 (36.8%)	3 (15.8%)	6 (31.6%)	1 (5.3%)	3.16	1.167
Stakeholder level of participation contributes to completion of health construction projects	8 (42.1%)	8 (42.1%)	0 (0.0%)	3 (15.8%)	0 (0.0%)	4.11	1.049
Identifying of stakeholders assists in completion of health construction projects	5 (26.3%)	4 (21.1%)	3 (15.8%)	6 (31.6%)	1 (5.3%)	3.32	1.336

Composite mean=2.69; Composite standard deviation=0.993

Four items were developed to measure the extent of this relationship of stakeholder's involvement on the completion CDF health construction projects. Item 1 sought to establish the extent to which the scoping process enhances completion of CDF health construction projects. The mean score was 3.47 while the standard deviation was 1.073. This result indicates that the majority; 10(52.6%) of the respondents agreed that scoping process enhances completion of CDF health construction projects, followed by 3(15.8%) who both disagreed and were neutral that scoping process enhances completion of CDF health construction projects, 2 (10.5%) strongly agreed that scoping process enhances completion of CDF health construction projects whereas and 1(5.3%) strongly disagreed that scoping process enhances completion of CDF health construction projects. Item 2 sought to establish the extent to which the existence of stakeholders analysis enhances the completion of CDF health construction projects. The mean score was 3.16 while the standard deviation was 1.167. This result indicates that the majority; 7(36.8%) of the respondents agreed that the existence of stakeholders analysis enhances the completion of CDF health construction projects, 6(31.6%), 3(15.8%) were neutral that the existence of stakeholders analysis enhances the completion of CDF health construction projects, 2 (10.5%) strongly agreed that existence of stakeholders analysis enhances the completion of CDF health construction projects and 1(5.3%) strongly disagreed that existence of stakeholders analysis enhances the completion of CDF health construction projects. Item 3 sought to establish the extent to which the stakeholders level of participation contribute to the completion of CDF health construction projects. The mean score was 4.11 while the standard deviation was 1.049. This result indicates that the majority; 8(42.1%) of the respondents both strongly agreed and agreed respectively that stakeholders level of participation contribute to the completion of CDF health construction projects, 3(15.8%) disagreed that the stakeholders level of participation contribute to the completion of CDF health construction project ,while 0(0.0%) both strongly disagreed and at the same time were neutral that stakeholders level of participation contribute to the completion of CDF health construction projects. Item 4 sought to establish whether identification of stakeholders assists in completion of CDF health construction projects. The mean score was 3.32 while the standard deviation was 1.336. This result indicates that the majority; 6(31.6%) disagreed that identification of stakeholders assists in completion of CDF health construction projects, 5(26.3%) of the respondents strongly agreed that identification of stakeholders assists in completion of CDF health construction projects, 4 (21.1%) agreed that identification of stakeholders assists in completion of CDF health construction projects, 3(15.8%) were neutral that identification of stakeholders assists in completion of CDF health construction projects and 1(5.3%)strongly disagreed that identification of stakeholders assists in completion of CDF health construction projects. The composite mean

score for these four items was 2.685; while the composite standard deviation was 0.993 .The implication of this finding is that majority of the respondents were neutral that the stakeholder's involvement influences the completion of CDF health construction projects. This findings are consistent with Kariuki (2011).

The study sought to examine the relationship between stakeholder's involvement and completion of CDF health projects. Pearson correlation coefficient was used to test the relationship between stakeholder's involvement and completion of CDF health projects; this was done at 95% level of confidence. To test the extent of the relationship between stakeholders involvement and completion of CDF health projects four characteristics of stakeholders involvement were computed based on the following hypothesis;

H_{01} : There is no significant relationship between stakeholder's involvement and completion of CDF health projects

The Pearson's Product Moment Correlation coefficients showed that all the four items of stakeholder involvement strategies were positively correlated to the completion of CDF health construction projects. The positive sign of correlation observed suggests that the completion of CDF health construction projects moves in the same direction with the continued involvement of stakeholders. In addition the correlation statistics results on the relationship between stakeholder involvement strategies and CDF health construction projects indicated that all the stakeholder involvement strategies indicators were significantly related (P -values <0.05) against the indicators of and CDF health construction projects. The small p -values ($p<0.05$) implies that there is a significant relationship between the stakeholder involvement strategies and CDF health construction projects, leading to rejection of the null hypothesis that is no significant relationship between stakeholder involvement and the CDF health construction projects and it was concluded that there was a significant relationship between stakeholder involvement and the CDF health construction projects The results are consistent with the findings of other studies that found significant relationships between stakeholder involvement and the CDF health construction projects Wabwire (2010). The correlation statistics are shown in table 7.

Table 7: Correlation Analysis on stakeholder involvement and completion of CDF health construction projects

Stakeholder involvement strategies	Completed CDF health construction projects
Scoping process enhances completion of health CDF health construction projects	Pearson Correlation .623
	P-Value Sig. (2-tailed) .000
	N 19

Existence stakeholders analysis	Pearson Correlation	.701 [*]	Table 7...
enhances completion of CDF	P-Value Sig. (2-tailed)	.000	
health construction projects	N	19	
Identifying of stakeholders assists	Pearson Correlation	.576 ^{**}	
in completion of CDF health	P-Value Sig. (2-tailed)	.000	
construction projects	N	19	
Stakeholders level of participation	Pearson Correlation	.405 [*]	
contributes to completion of CDF	P-Value Sig. (2-tailed)	.000	
health construction projects	N	19	
Completed CDF health	Pearson Correlation	1	
construction projects	P-Value Sig. (2-tailed)		
	N	19	

CONCLUSIONS AND RECOMMENDATIONS

The research objective was to establish the extent to which Stakeholders involvement influence on completion of CDF health construction projects. It was concluded that there is significance influence of Stakeholders involvement on completion of CDF health construction project following the finding of a P-value of 0.00 explaining the variance in the completion of CDF health construction projects.

Arising from the findings of the study, the researcher recommends that government policies should be integrated to monitoring and evaluation tools in order to fast struck completion of CDF health construction. The study also recommends that there should be proper identification of stakeholders to assist in completion of health construction projects. This will improve the stakeholder level of participation which is instrumental to completion of health construction projects. Another recommendation is that the scoping process should be strengthened as it enhances completion of health construction projects.

LIMITATIONS

The main limitation of the study was the vastness of the area. To overcome the limitation, the researcher contracted a research assistant. This ensured that the targeted population was reached. Lack of standard M&E tools across the country formulated for project implementation and completion leaving the researcher with liberty to adopt whatever is suitable for the study.

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