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Stakeholders' Capacity Building and Participation in Monitoring and Evaluation of Urban Water Supply and Health Projects in Kenya: Case of Kisii Town, Kisii Country

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Abstract

This study sought to investigate the role of capacity building on stakeholders' participation in M&E urban Water and Health projects initiated by the county government of Kisii Central Ward. This research project was guided by research questions based on the objective aforementioned. Data was collected using the questionnaire and interview schedules from county officers, public health officers, water officers, project committee members in Kisii Town. Reliability of research instruments were tested using test-retest technique and validated by experts in academic research. Stratified random sampling and simple random sampling were used to select the sample size of 45 respondents. The data was collected and analyzed by descriptive statistics. The study concluded that inadequate capacity building contributes to low participation of stakeholders in M&E of community projects in Kisii Town. Based on the findings the research recommended for Training (capacity building) on project M&E undertaken within the county government of Kisii. This will enable them embrace community participation and service delivery. Adequate resources (money, personnel, materials/ equipments) for M&E should be allocated for capacity building of communities and committees involved in project identification, implementation and monitoring and evaluation of community development projects. The Members of County Assembly (MCAs) should desist from interfering with the allocation of funds and materials/facilities to community health, water and sanitation projects. The county government should put in place severe punishment for MCAs who influence the selection of committee members and allocation of funds. Based on the findings, the study suggests further study to be carried out to establish the extent to which stakeholders' participation in monitoring and evaluation affects sustainability of county government initiated community projects.

Keyword: Stakeholders' participation; Monitoring and evaluation; Community projects; Capacity building

Introduction

Across the world there is a growing recognition in development that M&E of community-based development projects should be participatory. As institutions become more inclusive in project planning and implementation, then questions of the capacity of stakeholders to measures results and defines success of community projects has become critical [1]. Project capacity building is defined as process by which communities and other project stakeholders increase their capacity to perform project functions, solve problems, define and achieve project objectives and enhance sustainable development [2]. Langran [3] also defined capacity building as the ability of project initiators to strengthen the capacities of local communities at the periphery through resource allocation (financial, human, social and material), technical education, skill training and organizational support.

Capacity building consists of developing knowledge, skills and operational capacity so that individuals and community groups may achieve their purposes. It involves identifying root causes of poverty, empowering rights-holders to claim their rights and enabling duty-bearers to meet their obligations (World Vision). Its' mandate is to provide services such as water and sanitation, health, education, roads, upgrading of informal settlements and garbage collection. Evidence based on case studies in Australia, Canada and Thailand [4] clearly shows that local communities and other stakeholders are prepared to take leadership roles, take responsibility and devise ways of sustaining the activities they initiate and that they are able to work in partnership with national governments.

In the United State of America, citizen monitoring has been one approach through which local citizens are accountable and

assess the extent to which public programmes meet the needs of the community [1]. Devolution of resources to its local government focuses on participation of local people in financial processes, power dynamics that influence citizen engagement in priorities, expenditure allocations and accountability relations [5]. According to Elham [6] in their analysis of factors influencing people's participation in National Action Plan for Sustainable Management of Land and Water Resources (NAP-SMLWR) in Hable- Rud Basin, Iran, recommends that a range of capacity building activities should be undertaken to increase the number of technical experts, extension workers, community facilitators and local leaders with skills needed to carry out participatory project monitoring and evaluation.

In another study of Malawi Social Action Fund (MASAF) projects, Dulani [7] concluded that the level of stakeholders' participation in M&E was limited to being informed what had already been decided by other key players which implied passive participation by consultation.

A study carried in Tanzania by Masanyiwa and Kinyashi concluded that monitoring and evaluation of project activities is mainly done

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by project staff who report back to the local communities. Local stakeholders participate mainly as respondents to provide information during monitoring and evaluation processes. Uganda has adopted a radical model of local governance, with five levels, providing multiple opportunities for participation and election, including by poor, and with reservation of seats for women, youth and disabled. However, the local Government Department Programme (LGDP) is faced by problems of participatory processes which are not as participatory as they appear on paper, and stakeholders' involvement in monitoring and evaluation of those projects remain elusive [8].

In Kenya the Local Authority Transfer Fund (LATF) is one of the devolved funds from the Central Government to Local Authorities established in 1999 through the LATF Act No.8 of 1998, with the objective of improving service delivery, improving financial management, and reducing the outstanding debt of local authorities (LAs). However, low participation of stakeholders of Local Authorities in service delivery and management has been highlighted as one of the factors contributing to poor service delivery in the local government in Kenya [9].

A study carried in Kenya by Oyugi found that LATF has not met its objectives of improving service delivery, financial management and debt reduction; and that the performance of the programmes has been constrained by inadequate capacity building, lack of a coherent monitoring and evaluation framework, and politicization of the programmes. The study recommends for the amendment of LATF regulations, provision of funds for capacity building in LAs, and putting in place a coherent monitoring and evaluation framework.

The promulgation of the New Constitution in August 2010 provides a strong legal foundation for the enhancement of participatory governance through devolved structures at county level. To engage effectively, citizens not only need an awareness of their roles and responsibilities but knowledge and skills on how to execute the responsibilities. There could be a problem in the involvement of primary stakeholders in Monitoring and Evaluation of urban water and health projects in various counties.

According to Moseti challenges facing public participation in Kenya include lack of staff skilled in participatory techniques and processes and community development departments generally have very limited resources. Participation is still often dominated by elite groups, and not all CBOs have representatives especially of the poor. Many communities and CBOs remain unaware of Local Authority Fund (LATF) and LASDAP, and have limited capacity to demand engagement and accountability from their local authority.

Problem Statement

The Kisii County Government Report of 2013-2014, indicated low participation of citizens and other stakeholders in monitoring and evaluation of urban community projects. Cases of incomplete projects, unsustainable projects, little accountability and low stakeholders' involvement have always been experienced in the management of county government sponsored water supply and public health projects within Kisii Town. In comparison with other wards in the county, Kisii Central and Kisii Town are worst hit by the problem of low stakeholders' participation in monitoring and evaluation of community water supply and health projects. What contributes to this scenario? Could it be that capacity building plays a role in influencing stakeholders' participation in M&E of urban community projects? It is against this background that this study sought to establish the influence capacity building on

stakeholders' participation in monitoring and evaluation of urban health and water projects in Kisii Town.

Objectives of the Study

The study was guided by the following objectives:

- To identify the stages and level of stakeholders' participation in M&E of urban water supply and health projects in Kisii Township.
- To determine the influence of capacity building on stakeholders' participation in M&E of urban water supply and health projects in Kisii Township.

Literature Review

Project capacity building is defined as process by which communities and other project stakeholders increase their capacity to perform project functions, solve problems, define and achieve project objectives and enhance sustainable development [2]. Langran [3] also defined capacity building as the ability of project initiators to strengthen the capacities of local communities at the periphery through resource allocation (financial, human, social and material), technical education, skill training (Frankish) and organizational support.

According to Okello stakeholders' capacity building consists of developing knowledge, skills and operational capacity so that individuals and community or stakeholders groups may achieve their project purposes. A study carried in Iran by Elham [6] found that participation in Monitoring and Evaluation of projects has allocated last priority to itself among other levels of participation in NAP-SMLWR. They recommended that training should be undertaken to increase the number of technical experts, extension workers, community facilitators and local leaders with skills needed to carry out participatory project monitoring and evaluation.

According to Riddell M&E is typically conceptualized as 'project specific' –ending with the project, rather than as a potentially valuable tool that could be embedded in local practice to inform ongoing quality improvement processes through training. M&E capacity building is infrequently included as an explicitly resourced and carefully planned project intention. Thus opportunities are lost to maximize the potential gain in capacity building terms from the significant investment in M&E activities.

According to Foster-Fishman, building organizational capacity can be achieved through empowering others and through efficient and formalized processes and procedures that clarify staff and member roles. A leader that builds organizational capacity for their health professionals for example one that fosters a learning culture that supports professional and personal development as an integral component to capacity building.

A study carried in Kiambu by Kimani recommends that local people as actors and beneficiaries of participatory development should be trained and enlightened on the expectations of participatory development. While local leaders should be equipped with adequate participatory knowledge and skills, stakeholders should monitor and evaluate activities of all development projects so as to check on their performances, costs and expenditure.

According to Oyugi and Kibua funds should be provided under LATF for dissemination and capacity building; the planning process should strictly follow a bottom up approach; funds allocated for monitoring of LASDAP projects are ring-fenced and auditing timely

done and independent project monitoring and evaluation committees should be established. Whereas LATF Regulations in Kenya requires the development of LASDAP, there is no allocation of monies for capacity building of communities, committees involved in project Monitoring and evaluation at community level, which negatively impacts on the effective implementation of the fund. In addition, Syagga and Associates recommends that internal capacity building be undertaken within LAs to enable them properly embrace LASDAP process in comprehensive manner so as to include all stakeholders.

According to Moseti challenges facing public participation in Kenya include lack of staff skilled in participatory techniques and processes and community development departments generally have very limited resources. Participation is still often dominated by elite groups, and not all CBOs have representatives especially of the poor. Many communities and CBOs remain unaware of Local Authority Fund (LATF) and LASDAP, and have limited capacity to demand engagement and accountability from their local authority.

A study carried in Kenya by Oyugi found that LATF has not met its objectives of improving service delivery, financial management and debt reduction; and that the performance of the programmes has been constrained by a number of factors such as inadequate funds and human resources, lack of a coherent monitoring and evaluation framework. The study recommends for the amendment of LATF regulations, provision of funds for capacity building in LAs, and putting in place a coherent monitoring and evaluation framework.

This idea of resource allocation is also supported by Blore, who suggest that government should invest resources to build capacities of local communities to plan and monitor their own projects based on their own analysis of the needs. But stakeholders cannot do this effectively, unless they have access to resources, backed by law, accurate information as well as the technical and capacities of the local authorities.

Methodology

This study was conducted through a descriptive survey research design. The design involved investigating the factors influencing stakeholders' participation in M&E community water and health projects in Kisii Central Ward. Descriptive survey design was appropriate for study, as it allowed the researcher to use few LATF water supply and sanitation projects to explain the influence of training and availability of resources on stakeholders' participation in M&E of community projects. The target population was 125stakeholders, composed of county officers, 21 water project officers, 20 public health officers, 65 location representatives. The sample size included 5 county officers, 5 public health officers, 5 water officers, 30 ward committee representatives making a sample size of 45 respondents. This sample size was appropriate according to Gay and Dielh [10], who states that for descriptive research a sample of 10% of the large population is considered minimum while a sample of 20% may be required for smaller populations. In this study, the researcher used closed-ended and open-ended questions. Questionnaires and interview schedules were used as instruments to collect data. The data was analyzed by using quantitative approach using descriptive statistics. Data was presented in descriptive form supported by frequency counts and percentages.

Results and Findings

Stages in stakeholders' participation in M&E

The study sought to establish the stages of stakeholders participate

in monitoring and evaluation of urban water and health projects. Majority of the respondents (77.8%) indicated that they participated in consultation in forums, while 22.2% didn't participate in M&E consultation forums. Majoring of the respondents didn't participation in formulation of M&E objectives (80.0%), while 20.0% said that they participated in the process. On choice of M&E indicators (13.3%) had participated, while 80.0% did not participate in choice of M&E of urban water and health projects. Concerning participation in data collection, majority (88.9%) didn't participate, while 11.3% participated in data collection. Participation in reporting and sharing of M&E findings had low proportions (20.0%) of stakeholders, while majority 80.0% of the respondents were not involved. This concurs with Maina (2005) that M&E findings are communicated upwards to the ministry headquarters hence not utilized at the community level. Participation in taking actions and decision-making had the least proportion (6.7%) of stakeholders' participation and 93.3 % of the respondents did not participate; very few participated in discussing specific issues; therefore it was given the least priority among all the stages of participatory monitoring and evaluation (Table 1).

Capacity building workshops and seminars

The study sought to establish whether the county government holds stakeholders training on M&E of water supply and health projects. Majority of the respondents 40(88.8%) indicated that the county government holds M&E training workshops and seminars for urban water and health projects while 11.2% indicated that are no training workshops and seminars. This is in line with the requirement of the 2010 constitution, that the stakeholders be trained on all processes of project management. All respondents 45(100.0%) indicated that there is low attendance of stakeholders during these capacity building workshops and seminars. The findings indicate that there are no specific training workshops and seminars for monitoring and evaluation methodologies. The result pointed out that there was poor attendance in M&E training workshops and capacity building meetings and therefore this may have contributed to low participation in monitoring and evaluation of water and health projects in Kisii Municipality.

Effectiveness of stakeholders' capacity building on project monitoring and evaluation

The researcher sought to establish the effectiveness of training workshops and seminars on management of urban water and health projects. It can be seen that 39(86.0%) of the respondents indicated that training of stakeholders in monitoring and evaluation of urban water and health projects is ineffective, while 13.3% of the respondents indicated that that it is fairly effective. Majority of the respondents argued that the training workshops experience poor attendance of the key stakeholders and beneficiaries; it is attended by few county officers because they are given allowances to attend. These findings imply that the training workshops have not provided opportunities for stakeholders' to acquire enough technical skills and knowledge

Stages in M&E	Yes		No		
	No	%	No	%	Priority
Consultation in Forums	35	77.8	10	22.2	1
Formulation of M&E Objectives	9	20.0	36	80.0	2
Choice of M&E Indicators	6	13.3	39	86.7	3
Data Collection	5	11.3	40	88.9	4
Reporting and Sharing Information	9	20.0	36	80.0	5
Taking Actions and Decisions	3	6.7	42	93.3	6

Table 1: Stages in stakeholders' participation in M&E.

Suggestion on Improving M&E	f	%
Stakeholders Involvement Guidelines	37	82.2
Stakeholders Sensitization	42	93.3
Improve Information Sharing	40	88.9
Enhance accountability &Transparency	36	80.0
Enhance M&E Capacity Building	44	97.8
Remove Politicians from M&E Process	38	84.4
Improve Funding and Resources on M&E	35	77.7
Community involvement in Planning	34	75.6
Community Involvement in Implementation	39	86.7

Table 2: Suggestions to improve stakeholders' participation in M&E.

required for monitoring and evaluation of urban water and health projects.

Suggestions to improve stakeholders' participation in monitoring and evaluation

The study sought to establish suggestions given by respondents for improving stakeholders' participation in monitoring and evaluation of county government sponsored water and health projects in Kisii Central Ward. The respondents suggested that the stakeholder's involvement guidelines (82.2%), primary stakeholders be sensitized on functions of projects M&E (93.3%), improve information sharing from the county government to the community. Majority of the respondents (80.0%) suggested the need for accountability while 97.8% mentioned enhancing M&E capacity building. Respondents also proposed the need to prevent politicians from implementing the M&E process of urban water and health projects. 77.7% of the respondent cited increase of funding and resources on M&E of urban water and health projects. Lastly majority suggested the need for community involvement in planning (75.6%) and implementation (86.7%) (Table 2).

Conclusion and Recommendations

The findings of the study revealed that capacity building influences stakeholders' participation in monitoring and evaluation of water and health projects. The findings indicated there were limited training workshops and seminars and poor attendance of relevant stakeholders. The training opportunities are limited and coupled with lack of well-coordinated capacity building strategy within the county government of Kisii. The project staff and the stakeholders have low prospects of improving their M&E skills and competencies. The training workshops

and seminars did not provide opportunities for stakeholders' to acquire enough technical skills and knowledge required for monitoring and evaluation of LATF water and health projects. The study revealed that failure to embrace stakeholder training and learning culture contributed to low stakeholders' participation in M&E of water and health projects.

The study recommends for the need to sensitize the beneficiary households through civic education to participate in the monitoring and evaluation process as a way of checking excesses on the part of the county government. Training (capacity building) on project M&E be undertaken within the county government to enable them properly embrace stakeholders' participation process so as to include all stakeholders in monitoring and evaluation of county government sponsored projects.

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