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Leon Awiti, Richard Misigo Imbambi, Ng'ong'a E. Aketch, Wycliffe Mande, Moses Okumu

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Strategy Evaluation and Control on Performance of HIV and AIDS Interventions Managed by Non-Governmental Organizations in Nyanza Region, Kenya

Leon Awiti, Richard Misigo Imbambi, Ng'ong'a E. Aketch,

Monitoring, Research, Evaluation and Learning Practitioner, Kenya Email: awitileon@gmail.com, rmimbambi@yahoo.com, aketchngonga@yahoo.com

Wycliffe Mande, Moses Okumu

Human Resource, Research and Learning Practitioner, Kenya Email: cliffmande@yahoo.com, moseso664@gmail.com

Abstract

To sought to establish the influence of strategy evaluation and control on performance of HIV and AIDS interventions managed by non-governmental organizations in Nyanza Region. This study used a positivist and interpretive paradigms adopting an ex post facto research survey design. Both quantitative and qualitative approaches. The target population for the study was 18 the departmental heads of program management, 18 monitoring and 18 evaluation and program implementation in NGOs registered by the NGO council as implementing HIV and AIDS interventions as a major focus and operating within Nyanza Region. The study also targeted the directors of the three governing bodies for HIV programming. The population was thus 60 respondents. Nonprobability purposive sampling was used to pick the respondents. The research used two instruments: questionnaires, Interviews schedules. Content validity was measured by using the Content Valid Index (CVI). The researcher used Cronbach's Alpha reliability to measure the internal consistency of the questionnaires, r (10 items) = 0.702. Data analysis was done through descriptive statistics and inferential statistics such as Pearson correlation, hypothesis testing and multiple linear regression modeling. It was established that there was a significant strong positive relationship between strategy evaluation and the performance of HIV interventions, r (50)=0.737, pvalue<0.001,CL=95%.The null hypothesis was rejected, we adopted the alternative hypothesis (H₁) that there is a significant relationship between strategy evaluation and control and performance of HIV and AIDS interventions managed by non-governmental organizations in Nyanza Region.It was established that evaluating strategic options for consonance (β =8.391, p=0.001), consistency $(\beta=2.970, p=0.328)$, feasibility $(\beta=3.250, p=0.360)$, and adaptability $(\beta=3.299, p=0.185)$, positively influenced the performance of HIV and AIDS interventions. It was concluded that NGOs managing

HIV and AIDS interventions practiced strategy evaluation and control to a large extent. It was also inferred that evaluating strategic options for consonance, consistency, feasibility, and adaptability positively influenced the performance of HIV and AIDS interventions. The study recommended that there is need for NGOs managing HIV and AIDS interventions to review the procedures for evaluating their strategy for consistency to enhance its effectiveness in enhancing the performance of HIV and AIDS interventions. There is also need to scrutinize the process of identifying the corrective action when strategic initiatives are failing or could be improved to have them contribute expressly in enhancing the performance of HIV and AIDS interventions.

Keywords: Strategy Evaluation and Control, Performance of HIV and AIDS Intervention, Strategy Consistency, Strategy Consonance, Strategy Feasibility, and Strategy Adaptability.

Background

Non-governmental organizations (NGOs) have scaled up their operations in several parts of Kenya, especially in Nyanza region, towards the prevention and management of HIV/AIDS. Nyanza region of Kenya is no exception as it is the hardest hit areas with a high HIV prevalence rate of 13.3% (National Aids Control Council, 2018). Despite the NGOs rolling out intervention programmes, little success has been achieved, and this can be blamed on a lack of sufficient evaluation and control mechanisms. Many NGOs fail to conduct continuous monitoring and evaluation, and this is a major problem that can be partially linked to physical, human, and financial resource deficits (Hershey, 2013). Moreover, most NGOs operating in Nyanza region barely plan for the unexpected, a scenario that can be associated with their non-profit making motive and the extent of their operations of noncompetitiveness.

Massive inconsistency within a strategy appears unlikely until it is understood that many strategies have not been explicitly crafted but have gradually evolved over a period in a rather ad havoc fashion. Even some NGOs' strategies that result from formal procedures can easily involve compromised arrangements between different opposing power groups (Hershey, 2011). Inconsistency within a strategy is not a mere flaw in logic. A major function of strategy is to give coherence to organizational action. A concise concept of strategy can enhance a climate of tacit coordination that is more efficient than many administrative mechanisms adopted in intervention programmes (Gamble, Strickland &Thompson, 2007). Organizational conflict and interdepartmental wrangles are often symptoms of leadership disorderly but may also show problems of strategic inconsistency. Another consistency that must be sought in strategy is between organizational objectives and values of the management group. Inconsistency in this area is one that must be evaluated and controlled to avoid future conflicts that compromise the performance of the intervention programmes.

Strategy consonance, or matching, invites a focus on generic strategy. The role of evaluation, in this case, is to examine the basic pattern of economic relationships that characterize the programmes and determine whether adequate value is being derived to sustain the strategy (Tonui, 2009). Most macroeconomic analysis of changing economic conditions is oriented towards either formulation or evaluation of generic strategies (Hershey, 2011). Trends shift and therefore programmes must be periodically evaluated to see whether they are running in conformity with the current convention. The basic generic mission is the NGOs to make sure that their programmes match the current needs of the beneficiaries.

Strategy feasibility is a broad test that seeks to provide the answer as to whether a strategy is capable of being attempted within the available human, physical, and financial resources (Kariuki, 2008). The financial resources available for operation are the easiest to quantify and are usually the first limitation against which a specific strategy is tested. Some organizations tend to overlook the fact that innovative approaches for financing operations can both stretch the ultimate limitations and give a competitive advantage, even if it is not a permanent one (Kraeger, 2011). The less quantifiable but actually more rigid limitation on strategic choice is that imposed by human aspects and organizational capabilities that are available. If project managers are not moved by a strategy, not excited by its methods and goals, or strongly rally behind an alternative, then it is likely to fail in a big way. Therefore, NGOs need to incorporate both the quantifiable and less quantifiable aspects in their evaluations to facilitate the realization of their objectives.

Strategy adaptability is the planned ability of organizations to react effectively when environmental and business factors change abruptly. Whereas many businesses do a good job of planning how to operate when things go against the expectations, non-profit making initiatives like the NGOs are failing in this area (Hurteau, Houle, & Mongiat, 2009). Organizations that intend to survive in the long-run often plan for flexibility in response to the unexpected. The NGOs have to adjust their actions or approaches in response to changes in their external environment. They have to face the challenge of always planning for the unexpected for them to fulfil their strategic missions and objectives.

Kenya AIDS Response Progress Report (2018) reports that Nyanza region has the highest HIV prevalence of 13.3% while the prevalence rate for Kenya stands at 4.8%. New infections continuously rise and more HIV/AID-related deaths take place in this part of Kenya (KNASP, 2014). Despite the NGOs operating in the region conducting strategy evaluation and control, the performance of HIV/AIDS interventions in Nyanza region is still low, and the problem can be alluded to a gap in physical, human, and financial resources deficit.

Statement of the Problem

Monitoring and evaluation of strategic plans present special challenges because in contrast to monitoring and evaluating projects and activities, strategic management and its results are not easy to measure (James, 2001). More so, in evaluating strategies, NGOs implementing HIV and AIDs interventions have failed to look as aspect such as consistency, consonance, feasibility and adaptability hence proper control on those strategies is nearly impossible. According to NACC, Monitoring and Evaluation mechanism of HIV and AIDS interventions have been very weak to an extent that learning has not been documented to enhance improvement in performance, especially in high prevalence areas. Bichanga, Kamau and Karani (2014) established that there are several factors that affect the effective use of monitoring and evaluation by project managers in NGOs with HIV and AIDS projects in Kenya including lack of commitment by the project managers, incompetency on the use of the monitoring and evaluation systems by project managers, stringent donor requirements and capacity constraints of the NGOs.

Earlier studies by Ramothamo (2013), Muzinda (2007), Karani, Bichanga, Kamau (2014) and Mannell, Cornish and Russell (2014) focused on the contribution of monitoring and evaluation activities and systems on the performance of HIV and AIDS interventions and not how evaluation and control of strategic plans for HIV and AID would influence such performances. The study by Mulunga (2007) did

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a study on improving the effectiveness of strategic planning in local NGOs in Malawi, he looked at Monitoring and evaluation in general without focusing on the key indicators such as evaluation of strategy consistency, consonance, feasibility and adaptability.

Purpose of the Study

To establish the influence of strategy evaluation and control on performance of HIV and AIDS interventions managed by non-governmental organizations in Nyanza Region.

Research Hypothesis

H₀: There is no significant relationship between strategy evaluation and control on performance of HIV and AIDS interventions managed by non-governmental organizations in Nyanza Region.

Literature Review

Strategy Evaluation and Control

The fifth step in strategic management is strategy evaluation and control (David, 2013; Arasa & K'Obonyo, 2012). Strategy evaluation and control mechanisms are set in place to inform every stage of the strategic management process. They are a means of collecting whatever information we may need to compare plans against actual events, to ensure that things are working well and to anticipate, or correct, any faults or weaknesses in the system. Strategy evaluation and control play a central role in the strategic management by critically assessing how well things are going in every phase of the strategic management process and to take whatever action is necessary to improve performance (Montanari, Morgan & Bracker, 1990).

This variable is comprised of four indicators: Strategy consistency, Strategy consonance, Strategy feasibility and Strategy advantage. Strategy consistency holds that a strategy should not present inconsistent goals and policies. Organizational conflict and interdepartmental bickering are often symptoms of a managerial disorder, but these problems may also be a sign of strategic inconsistency. There are three guidelines to help determine if organizational problems are due to inconsistencies in strategy:(1) If managerial problems continue despite changes in personnel and if they tend to be issue-based rather than people-based, then strategies may be inconsistent (2) If success for one organizational department means or is interpreted to mean, failure for another department, then strategies may be inconsistent (3) If policy problems and issues continue to be brought to the top for resolution, then strategies may be inconsistent (Rumelt, 1994).

Strategy consonance refers to the need for strategists to examine sets of trends as well as individual trends in evaluating strategies. A strategy must represent an adaptive response to the external environment and to the critical changes occurring within it. One difficulty in matching a firm's key internal and external factors in the formulation of strategy is that most trends are the result of interactions among other trends. The way in which a business relates to its environment has two aspects: the business must both match and be adapted to its environment and it must at the same time compete with other firms that are also trying to adapt. This dual character of the relationship between the firm and its environment has its analog in two different aspects of strategic choice and two different methods of strategy evaluation (Rumelt, 1994).

Strategy feasibility holds that a strategy must neither overtax available resources nor create unsolvable sub-problems. The final broad test of strategy is its feasibility; that is, can the strategy be attempted within the physical, human and financial resources of the enterprise? The financial resources of a business are the easiest to quantify and are normally the first limitation against which strategy is evaluated. It is sometimes forgotten, however, that innovative approaches to financing are often possible. Devices such as captive subsidiaries, sale-leaseback arrangements and tying plant mortgages to long-term contracts have all been used effectively to help win key positions in suddenly expanding industries. A less quantifiable, but actually more rigid, limitation on strategic choice is that imposed by individual and organizational capabilities. In evaluating a strategy, it is important to examine whether an organization has demonstrated in the past that it possesses the abilities, competencies, skills and talents needed to carry out a given strategy (Rumelt, 1994).

The last indicator is strategy adaptability, which provides that a strategy must provide for the creation and/or maintenance of a competitive advantage in a selected area of activity. Competitive advantages normally are the result of superiority in one of three areas: (1) resources, (2) skills, or (3) position. The idea that the positioning of one's resources can enhance their combined effectiveness is familiar to military theorists, chess players and diplomats. Positional advantage tends to be self-sustaining as long as the key internal and environmental factors that underlie it remain stable. This is why entrenched firms can be almost impossible to unseat, even if their raw skill levels are only average. Although not all positional advantages are associated with size, it is true that larger organizations tend to operate in markets and use procedures that turn their size into an advantage, while smaller firms seek product/marker positions that exploit other types of advantage (Rumelt, 1994).

Strategy Evaluation and Control and Performance of HIV and AIDS Interventions

Ramothamo (2013) did a study on the monitoring and evaluation of HIV and AIDS donor funded projects in Maseru: an analysis of six organizations. The study used a qualitative approach while employing semi-structured interview questions and a Likert Scale questionnaire. He found out that all the six organizations practiced monitoring and evaluation of projects and there were full-time officers in-charge of monitoring and evaluation activities. However, the organizations faced various challenges like inadequate funding for monitoring and evaluation activities, nonexistence of policy, poor monitoring and evaluation systems and, lack of monitoring and evaluation of concept in the implementation of monitoring and evaluation. All the six organizations did report to donors frequently. The study also established that all organizations had a belief that M & E is a necessity for sustainability of projects and aligning results with strategic objectives.

Muzinda (2007) did a study on monitoring and evaluation practices and challenges of Gabon based Local NGOs managing HIV and AIDS projects in Botswana. The study employed descriptive survey design and a questionnaire was administered to project managers and monitoring and evaluation officials of the NGOs. The study determined that the monitoring and evaluation practices of the local NGOs fell short of the best practices. Most of the best practices were inconsistently done and others were not done at all. Planning for monitoring and evaluation was inadequately done and inconsistently by respondents. Implementing the monitoring and evaluation process was not effectively done by the respondents. The study also identified quite a number of challenges the NGOs

faced in carrying out monitoring and evaluation. The most significant ones included; inadequate finances, lack of expertise, stringent and multi-donor reporting requirements, lack of baseline data. The study made some recommendations in order to mitigate the challenges faced by the NGOs.

Karani, Bichanga and Kamau (2014) conducted assessed effective use of monitoring and evaluation systems in managing HIV and AIDS related projects: A case study of local NGOS in Kenya. This study sought to determine how effectively the HIV and AIDS projects implemented by NGOs in Kenya are monitored and evaluated as laid down by the current National HIV and AIDS Monitoring and Evaluation Framework found in the Kenya National AIDS Strategic Plan 2009/10-2012/13 (KNASP III). The study revealed that adequacy of finance has a positive correlation of 0.229 with effective use of monitoring and evaluation system (p-value of 0.05) The different reporting requirements has a positive correlation of r = 0.029 (p-value of 0.003) on management of HIV and AIDS related projects. Monitoring and evaluation reporting requirement from donors had a positive correlation of 0.52(p-value of r = 0.009). Demonstrating Long-term impact to the donor is rarely a straight forward as indicated by a negative r = 0.667 and p-value of zero. The study noted some few challenges that hinder the effectiveness of monitoring and evaluation systems: these included lack of commitment by the project managers, incompetency on the use of the Monitoring and Evaluation systems by project managers, stringent donor requirements and capacity constraints of the NGOs.

Mulunga (2007) did a study on improving the effectiveness of strategic planning in local NGOs in Malawi. Employing qualitative methods, the study used the 'levels of complexity' and 'stages of organization development' models to analyze factors influencing strategic planning and the roles and responsibilities played by the board, management, donors, consultants and communities respectively in five selected local NGOs. The study established that the organizations were taking monitoring and evaluation as a mere accountability tool to flash to donors and making it a donor rather than organizational priority and the resultant culture of business are sustained by lack of knowledge of monitoring and evaluation in general and monitoring and evaluation of strategic plans in particular. For the cases studied two factors stood in the way of effective monitoring of the strategic plans that demonstrated the lack of knowledge. The first one was that they did not have conscious strategies in their strategic plans upon which to base their monitoring and evaluation efforts at that level. The second one was that the boards and management were weak and did not have the capacity to monitor the strategies even if the strategies existed. In reviewing strategic plans for example, more emphasis was placed on how the projects and activities were implemented as opposed to how effective the strategies pursued were. Underlying this is lack of knowledge of monitoring and evaluation of strategic plans.

Mannell, Cornish and Russell (2014) did a study in evaluating social outcomes of HIV and AIDS interventions: a critical assessment of contemporary indicator frameworks. They analyzed the indicator frameworks of six international organizations involved in efforts to improve and synchronize the monitoring and evaluation of the HIV and AIDS response. The analysis classifies the 328 unique indicators according to what they measured and assessed the degree to which they offer comprehensive measurement across three dimensions: domains of the social context, levels of change and organizational capacity. They established that majority of indicators focus on individual-level (clinical and behavioral) interventions and outcomes, neglecting structural interventions, community interventions and social outcomes (e.g. stigma reduction; community capacity building;

policy-maker sensitization). The main tool used to address social aspects of HIV and AIDS is the disaggregation of data by social group. They noted that this raises three main limitations. Indicator frameworks do not provide comprehensive coverage of the diverse social drivers of the epidemic, particularly neglecting criminalization, stigma, discrimination and gender norms. There is a dearth of indicators for evaluating the social impacts of HIV interventions. Indicators of organizational capacity focus on capacity to effectively deliver and manage clinical services, neglecting capacity to respond appropriately and sustainably to complex social contexts.

Mannell, Cornish and Russell (2014) concluded that the current indicator frameworks of the six organizations couldn't adequately assess the social outcomes of HIV interventions. This limits knowledge about social drivers and inhibits the institutionalization of social approaches within the HIV and AIDS response. Another conclusion was that indicator frameworks should expand to offer a more comprehensive range of social indicators for monitoring and evaluation and to include indicators of organizational capacity to tackle social drivers. While such expansion poses challenges for standardization and coordination, they argue that the complexity of interventions producing social outcomes necessitates capacity for flexibility and local tailoring in monitoring and evaluation.

1. Conceptual Framework

The conceptual framework of the study is as shown in figure 1

Independent Variable Dependent Variable Performance HIV and **Strategy Evaluation and** AIDS interventions Control managed by NGOs Strategy consistency Strategy consonance, Proportion of the Strategy feasibility project objectives met Strategy Adaptability Proportion of People Living with HIV/AIDS in disease management support groups Number of people sensitized on HIV prevention Number of people tested for HIV/AIDS Number of new infections and prevalence of HIV/AIDS

2. Study Gaps

The studies Ramothamo (2013), Muzinda (2007), Karani, Bichanga, Kamau (2014) and Mannell, Cornish and Russell (2014) focused on the contribution of monitoring and evaluation activities and systems on the performance of HIV and AIDS interventions and not how evaluation and control of strategic plans for HIV and AID would influence such performances. The study by Mulunga (2007) did a study on improving the effectiveness of strategic planning in local NGOs in Malawi, he looked at Monitoring and evaluation in general without focusing on the key indicators such as evaluation of strategy consistency, consonance, feasibility and adaptability.

3. Operationalization of Variables

Table 1: Operationalization of Variables

| Objectives | Variable | Indicators and Dimensions | Measurement Scale | Research Approaches | Tools of Analysis |
|---|--|---|--------------------------------|-----------------------------|---|
| To establish how strategy evaluation and control influences performance of HIV and AIDS interventions managed by nongovernmental organizations in Nyanza Region | IV Strategy evaluation and control DV Performance of HIV and AIDS interventions managed by non- governmental organizations | Strategy consistency Strategy consonance Strategy feasibility Strategy adaptability | Nominal Ordinal Interval | Quantitative Qualitative | Descriptive statistics Linear regression ANOVA Content analysis |

Methodology of the Study

This study used a positivist and interpretive paradigms adopting an ex post facto research survey design. Ex-post facto research is one of the several well-established quantitative design methods to establish the direction and strength of relationships among variables under study. The study used both quantitative and qualitative approaches. The target population for the study was all the departmental heads of program management, monitoring and evaluation and program implementation in NGOs registered by the NGO council as implementing HIV and AIDS interventions as a major focus and operating within Nyanza Region. The NGOs meeting this criterion are 18 (NGO Coordination Board, 2013). The study also targeted the directors of the three governing bodies for HIV programming: Kenya AIDS NGO Consortium, National AIDS and AIDS and STDs Control program and Network of People National AIDS Control Council. The directors were targeted as key informants.

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According to NGO Coordination Board (2013), there were 18 NGOs having HIV and AIDS intervention as the main programming focus and operating in Nyanza Region, the sample size comprised the departmental heads of program/unit management, monitoring and evaluation and program implementation. The study picked the head of each department in the 18 NGOs giving a total of 54 respondents. The other category of respondents comprised the 6 Key Informants, they were drawn from three umbrella bodies coordinating Kenya AIDS NGO: National AIDS and STDs Control program and Network of People National AIDS Control Council. The researcher used non-probability purposive sampling to pick the respondents. The research used two instruments: questionnaires, Interviews schedules. Content validity was measured by using the Content Valid Index (CVI). The researcher used Cronbach's Alpha reliability to measure the internal consistency of the questionnaires by checking how well the items are related to each other, r(10 items)= 0.702. Data analysis was done through descriptive statistics and inferential statistics such Pearson Correlation, hypothesis testing, multiple linear regression modeling.

Study Findings

Organization Profile

The organization profile was as shown in Table 2

The findings showed that the organizations implementing HIV and AIDS interventions in Nyanza region are quite varied in structure, capacity and operations which gave the study a unique richness.

Table 2: Biodata of the Respondents

| Variables | Categories | F | % |
|--|----------------------------|----|------|
| Programme focus of interventions | HIV prevention | 18 | 36% |
| | HIV Treatment | 3 | 6% |
| | Both | 29 | 58% |
| | Total | 50 | 100% |
| Department of respondents in the | Project/Unit manager | 15 | 30% |
| organization | Implementing officer | 15 | 30% |
| | M&E officer | 14 | 28% |
| | Field Coordinator | 6 | 12% |
| | Total | 50 | 100% |
| Number of skilled employees | Less than 10 | 20 | 40% |
| | 11-20 | 10 | 20% |
| | 21-30 | 6 | 12% |
| | Over 30 | 14 | 28% |
| | Total | 50 | 100% |
| Onset of the current strategic planning | Less than a year ago | 22 | 44% |
| period | 1-3 years ago | 9 | 18% |
| | Over 3 years ago | 19 | 38% |
| | Total | 50 | 100% |
| Conclusion of the current strategic period | Less than 5 years | 45 | 90% |
| | 5 - 10 years | 5 | 10% |
| | Total | 50 | 100% |
| Initiation of strategic planning process | Following donor's request | 5 | 10% |
| | Recognizing the need | 43 | 86% |
| | Chronological requirements | 2 | 4% |
| | Total | 50 | 100% |
| Sequence of organizational structure and | Organizational structure | 37 | 74% |
| strategic plan | Strategic plan | 13 | 26% |
| | Total | 50 | 100% |
| Period of implementation of HIV and AIDS | Less than five years | 10 | 20% |
| interventions | 5 - 10 years | 20 | 40% |
| | 11 -15 years | 14 | 28% |
| | Over 15 years | 6 | 12% |
| | Total | 50 | 100% |
| Annual budget for HIV and AIDS | Less than five Million | 3 | 6% |
| interventions | 5-10 Million | 11 | 22% |
| | 11 - 15 Million | 9 | 18% |
| | Over 15 Million | 27 | 54% |
| | Total | 50 | 100% |

Strategy Evaluation and Performance of HIV and AIDS Interventions

Views of the respondents were sought on the following indicators: Strategy consistency, Strategy consonance, Strategy feasibility and Strategy adaptability. The respondents were given statements

to react to in 5-point Likert Scale: 1-Strongly Disagree (SD), 2-Disagree(D), 3-Neutral(N),4-Agree(A) and 5-Strongly Agree (SA). The results were as shown in Table 1.

Table 3: Strategy Evaluation and Control and Performance of Interventions

| Statements | SD | D | N | Α | SA | X | SD |
|---------------------------------|--------|--------|---------|-----------|----------|------|-------|
| We often evaluate our strategic | 0(0%) | 0(0%) | 6(12%) | 22(44%) | 22(44%) | 4.32 | 0.683 |
| options, especially those used | | | | | | | |
| in HIV and AIDS interventions | | | | | | | |
| Our strategic options have been | 0(0%) | 0(0%) | 8(16%) | 24(48%) | 18(36%) | 4.20 | 0.700 |
| evaluated for consistency with | | | | | | | |
| our goals and policies | | | | | | | |
| Our strategy has been | 0(0%) | 0(0%) | 8(16%) | 24(48%) | 18(36%) | 4.20 | 0.700 |
| evaluated for consonance with | | | | | | | |
| our goals and policies | | | | | | | |
| Our strategy has been | 0(0%) | 0(0%) | 6(12%) | 31(62%) | 13(26%) | 4.14 | 0.606 |
| evaluated on whether it | | | | | | | |
| matches the internal and | | | | | | | |
| external environment | - 4 | | | _ , , | _ , | | |
| Our strategy has been | 0(0%) | 0(0%) | 3(6%) | 34(68%) | 13(26%) | 4.20 | 0.535 |
| evaluated for its feasibility | 2/22/ | 2/22/ | G(100() | 00/010/ | | | |
| Our strategy has been | 0(0%) | 0(0%) | 6(12%) | 32(64%) | 12(24%) | 4.12 | 0.594 |
| evaluated for its | | | | | | | |
| competitiveness | 0(00() | 0/00/) | 4 (20/) | 27/5 40/\ | 22/440/\ | 4.40 | 0.500 |
| Our org. is successful in | 0(0%) | 0(0%) | 1(2%) | 27(54%) | 22(44%) | 4.42 | 0.538 |
| identifying corrective action | | | | | | | |
| when strategic initiatives are | | | | | | | |
| failing or could be improved | 0(00() | 0/00/\ | 0/00/\ | 20/400/\ | 20/00/\ | 4.60 | 0.405 |
| Strategy evaluation has added | 0(0%) | 0(0%) | 0(0%) | 20(40%) | 30(60%) | 4.60 | 0.495 |
| value to our strategy | | | | | | | |
| implementation process | | | | | | 4.2 | |
| Mean of means | - | - | - | - | - | 4.3 | - |

The majority of the respondents at 44 (88.0%) supposed that they often evaluated their strategic options, especially those used in HIV and AIDS interventions, the least at 6 (12.0%) were undecided whether the strategic options used in HIV and AIDS interventions were evaluated often or not. This meant that the strategies were evaluated for viability and practicability looking at the project goals and the strategic fit. The item mean (4.32)> mean of means (4.30), SD=0.490, this implied that evaluating strategic options often contributed to strategy evaluation and control to a large extent. Most of the respondents at 42 (84.0%) stated that their strategic options had been evaluated for consistency with their goals and policies with the least number of respondents at 8 (16.0%) undecided/uncertain whether their strategic options had been evaluated for consistency with their goals and policies or not. This meant that the organizations make efforts to ensure that the strategic

options are in line with goals and policies. Rumelt (1994) holds that strategy should not present inconsistent goals and policies. Rumelt noted that organizational conflict and interdepartmental bickering may symbolize strategic inconsistency. The item mean (4.20) < mean of means (4.30), SD=0.70, this implied that evaluating strategic options for consistency with goals and policies contributed to strategy evaluation and control to a small extent.

A sizeable number of respondents at 42 (84.0%) stated that their strategy had been evaluated for consonance with your goals and policies with a small number of respondents at 8 (16.0%) were undecided/uncertain whether their strategy had been evaluated for consonance with their goals and policies or not. This meant that the strived to have their strategies response to the external environment and critical changes occurring within it. This was in line with Rumelt (1994) supposition that a strategy must represent an adaptive response to the external environment and to the critical changes occurring within it. The item mean (4.20) < mean of means (4.30), SD=0.70, this implied that evaluating strategic options for consonance with goals and policies contributed to strategy evaluation and control to a small extent. Among those who said their strategy had been evaluated for consonance with the organizational goals and policies, 39 (92.86%) said that it was established that the strategy was consistent with goals and policies, only 3 (7.14%) said that the strategy was not consistent with the organizational goals and policies.

Majority of the respondents at 44 (88.0%) said that the strategy had been evaluated on whether it matched the internal and external environment, the least at 6 (12.0%) undecided whether the strategy had been evaluated on whether it matched the internal and external environment or not as none of the respondents answered in the negative. This meant that the organizations were conscious of having strategies that truly reflect the internal and external conditions hence best adapted to address challenged on both fronts. The item mean (4.14) < mean of means (4.30), SD=0.61, this implied that evaluating whether the strategy matches the internal and external environment contributed to strategy evaluation and control to a small extent.

The majority of the respondents at 47 (96.0%) stated that their strategy had been evaluated for its feasibility, the minority at 3 (6.0%) undecided/uncertain whether their strategy had been evaluated for its feasibility or not. This meant that the strategies crafted by the organizations could be attempted within the physical, human and financial resources of the organization. This was found to be in line with Rumelt (1994) assertion that a strategy must neither overtax available resources nor create unsolvable sub problems. The item mean (4.20) < mean of means (4.30), SD=0.61, this implied that evaluating strategy for its feasibility contributed to strategy evaluation and control to a small extent.

A greater part of the respondents at 44 (88.0%) stated that their strategy had been evaluated for its competitiveness, the least number of respondents at 6 (12.0%) were undecided if their strategy had been evaluated for its competitiveness or not. This meant that majority of the organizations sought to make their strategies would permit the organizations to obtain advantage from policies that would not similarly benefit rival organizations. This was in compliance with Rumelt (1994) who contends that that in evaluating strategy, organizations should examine the nature of positional advantages associated with a given strategy. The item mean (4.12) < mean of means (4.30), SD=0.59, this implied that evaluating a strategy for its competitiveness contributed to strategy evaluation and control to a small extent.

An overwhelming majority of respondents at 49 (98.0%) stated that their organization was successful in identifying corrective action when strategic initiatives were failing or could be improved, the minority at 1 (2.0%) were undecided whether their organization was successful in identifying corrective action when strategic initiatives were failing or could be improved or not. This was in compliance with the affirmation of Montanari, Morgan &, Bracker (1990) that strategy evaluation and control play a central role in the strategic management process of critically assessing how well things are going on at every phase of the strategic management process and to take whatever action is necessary to improve performance. The item mean (4.42)> mean of means (4.30), SD=0.54, this implied that identification of corrective action when strategic initiatives are failing or could be improved contributed to strategy evaluation and control to a large extent.

All the respondents (100.0%) stated strategy evaluation and control added value to their strategy implementation process as none either undecided or stated that monitoring and evaluation had not added value to our strategy implementation process. This is in line with what Montanari, Morgan & Backer (1990) noted that strategy evaluation and control mechanisms inform every stage of the strategic management process. They enable collection of whatever information may be needed to compare plans against actual events, to ensure that things are working well and to anticipate, or correct, any faults or weaknesses in the system. The item mean (4.60)> mean of means (4.30), SD=0.50, this implied the perception that strategy evaluation added value to strategy implementation contributed to strategy evaluation and control to a large extent.

The respondents tended to have the greatest consensus that strategy evaluation had added value to the strategy implementation process (SD=0.495). Nonetheless, the respondents disagreed most on whether strategic options had been evaluated for consistency and consonance with the goals and policies (SD=0.700). The mean of means =4.3 which implied that strategy evaluation and control was practiced to a large extent by NGOs managing HIV and AIDS interventions.

Value of Monitoring and Evaluation in Strategic Management Process and Performance of HIV and AIDS Interventions

The respondents were asked to state how strategy evaluation and control added value in strengthening the strategic management. Some respondents mentioned that strategy evaluation enabled them to know if they were making progress towards the achievement of the strategic goals, document the weaknesses that may derail the process and institute measures to either get back on track or remain on the right track towards the achievement. Strategy evaluation and control was also important in enabling the management to make an informed decision in improving the performance of HIV and AIDS interventions as well as the strategic management.

Outcome of Evaluation of Strategy for Consistency and Performance of HIV and AIDS Interventions The respondents who mentioned that their strategy had been evaluated for consistency with the organizational goals and policy were asked to state the outcome of such evaluation, their responses were further used to assess the influence evaluation for consistency on the performance of HIV and AIDS interventions. The findings were presented in Table 2

Table 4: Strategy Consistency and Performance of Interventions

| Strategy Consistency | Frequency | Percent |
|---|-----------|---------|
| Strategy consistent with goals and policies | 39 | 95.12 |
| Strategy NOT consistent with goals and policies | 3 | 4.88 |
| Total | 41 | 100.0 |

Among the NGOs that evaluated their strategy for consistency, majority at 95.12% had their strategy consistent with the organizational goals and policies. It was established that there was a significant association between strategy consistency and performance of HIV and AIDS interventions (β =15.085, p=0.035).

Key Informant Interview Results

Key Informants noted that, strategy evaluation and control has been used to a moderate extent. It was evident that strategy evaluation and control is an emerging practice, technical and requires a lot of resources. Most NGOs had not set aside adequate resources to conduct evaluations on how the strategy has been managed. It was noted that strategy evaluation and control has enhanced the performance of HIV and AIDS interventions.

"Despite strategy evaluation being critical in assessing the viability and progress of the strategic options for continuous improvement, organizations have not committed adequate resources to undertake it." Said the director at Kenya AIDS NGO Consortium

The interview findings converged with the questionnaire findings, the analysis of the mean showed that strategy evaluation and control (\overline{x} =4.30) were adopted to a lesser extent compared to strategy formulation (\overline{x} = 4.96) and strategy implementation (\overline{x} =4.40).

Correlation between Strategy Evaluation and Control and Performance of HIV and AIDS Interventions

The study conducted a bi-variate correlation test using Pearson's coefficient to analyse the direction and magnitude of the relationship between strategy evaluation and control and performance of HIV and AIDS intervention, the results were as shown in Table 3.

Table 5: Correlation for Strategy Evaluation and Performance of Interventions

| | Variables | Statistic | Strategy | Performance of | | |
|-------------|-----------------|------------------|------------|-------------------|--|--|
| | | Descriptor | evaluation | HIV interventions | | |
| | | Correlation | 1.000 | 0.737** | | |
| | Strategy evalua | tion Coefficient | | | | |
| | and control | Sig. (2-tailed) | | .000 | | |
| Pearson's r | | N | 50 | 50 | | |
| | | Correlation | 0.737** | 1.000 | | |
| | Performance of | HIV Coefficient | | | | |
| | interventions | Sig. (2-tailed) | .000 | | | |
| | | N | 50 | 50 | | |

The study sought to establish the influence of strategy evaluation and control on performance of HIV and AIDS interventions managed by non-governmental organizations in Nyanza Region. It was established that there was a significant strong positive relationship between strategy evaluation and the performance of HIV interventions, r(50)=0.737, p-value<0.001,CL=95%. This implied that strategy evaluation and control positively impacted the performance of HIV interventions managed by NGOs in Nyanza.

Hypothesis Testing for Relationship between Strategy Evaluation and Control and Performance of HIV and AIDS Interventions

The study tested the null hypotheses (H_0) using F-statistic to ascertain the statistical insignificance of the relationship between strategy evaluation and control and performance of HIV and AIDS interventions, the results were as shown in Table 4

Table 6: Hypothesis for Strategy Evaluation and Performance of Interventions

| | , , , , , , , , , , , , , , , , , , , | | | | |
|----------------|---|-------------|--------|------|--|
| Descriptor | Sum of df | Mean Square | F | Sig. | |
| | Squares | | | | |
| Between Groups | 6034.285 8 | 754.286 | 26.820 | .000 | |
| Within Groups | 1153.095 41 | 28.124 | | | |
| Total | 7187.380 49 | | | | |

The study tested the null hypothesis H_0 that there is no significant relationship between strategy evaluation and control on performance of HIV and AIDS interventions managed by non-governmental organizations in Nyanza Region. The F distribution table gave a reading of critical value= 2.17 and the F(8,41) =26.820, 2.17< 26.820, therefore we reject the null hypothesis, this meant that there it is statistically very unlikely that that the null hypothesis (H_1) is true. We adopt the alternative hypothesis (H_1) that there is a significant relationship between strategy evaluation and control and performance of HIV and AIDS interventions managed by non-governmental organizations in Nyanza Region. The output of the hypothesis testing converges with the correlation analysis that the relationship between strategy evaluation and control and performance of HIV and AIDS interventions managed by non-governmental organizations is significant.

Strategy evaluation and Control Elements on Performance of HIV and AIDS Interventions

Linear regression analysis was done to establish the relationship between the elements of organizational purpose and the performance of HIV and AIDS interventions managed by non-governmental organizations in Nyanza Region, the findings were as shown in Table 5.

Table 7: Strategy Evaluation Elements and Performance of Interventions

| Model | Unstandardize t d Coefficients | | Sig. | 95.0% CI for B | | Collinearity Statistics | | |
|--------------------------|--------------------------------|--------|-------|----------------|--------|-------------------------|------|-------|
| | В | S.E | | | LB | UB | Tol | VIF |
| (Constant) | 88.050 | 13.126 | 6.708 | .000 | 61.613 | 114.486 | | _ |
| Strategy consonance | 8.391 | 2.250 | 3.730 | .001 | 3.860 | 12.922 | .597 | 1.675 |
| Strategy consistency | 2.970 | 3.004 | .989 | .328 | -3.080 | 9.021 | .446 | 2.242 |
| Strategy feasibility | 3.250 | 3.514 | .925 | .360 | -3.828 | 10.328 | .419 | 2.384 |
| Strategy adaptability | 3.299 | 2.452 | 1.346 | .185 | -1.639 | 8.238 | .851 | 1.175 |

It was established that evaluating strategic options for consonance (β =8.391, p=0.001), consistency (β =2.970, p=0.328), feasibility (β =3.250,p=0.360), and adaptability (β =3.299,p=0.185), positively influenced the performance of HIV and AIDS interventions.

Conclusions

NGOs managing HIV and AIDS interventions practiced strategy evaluation and control to a large extent. It is inferred that evaluating strategic options for consonance, consistency, feasibility, and adaptability positively influenced the performance of HIV and AIDS interventions. There was a significant positive relationship between strategy evaluation and the performance of HIV and AIDS interventions. Strategy evaluation and control were adopted to a lesser extent compared to strategy formulation and strategy implementation.

Recommendations

The study recommended that NGOs managing HIV and AIDS interventions should continue to improve on the evaluation of the strategic options used in HIV and AIDS interventions to enhance their contribution towards the performance of HIV and AIDS projects. There is the need for NGOs managing HIV and AIDS interventions to review the procedures for evaluating their strategy for consistency to enhance its effectiveness in enhancing the performance of HIV and AIDS interventions, this had the least contribution. Based on the findings from the Key informants, there is also need to scrutinize the process of identifying the corrective action when strategic initiatives are failing or could be improved to have them contribute expressively in enhancing the performance of HIV and AIDS interventions.

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