

# Influence of Knowledge Management on Monitoring and Evaluation: A Case of Health NGOs in Kenya

Otieno Stephen Odiwuor

P.O. Box 13988 – 00400, Nairobi - Kenya

**Abstract:** *In the rapidly changing environment and the high technology atmosphere of the 21<sup>st</sup> century, organizations are becoming more innovative than ever before. Most organizations in the developed and the developing world are opting for change in management, looking for ways to improve their ability to create new ideas and to develop the best environment for creation of ideas. Monitoring, Evaluation and Knowledge Management is now recognized as an organization's most valuable asset. This study examines how knowledge management practices are linked with monitoring and evaluation, and their contribution to the development in Kenya and Africa. The aim of the study was to establish influence of knowledge management on monitoring and evaluation in health NGOs in Kenya. The study adopted practical research methodology that was able to generate key evidence to inform learning at all levels. Data collection was done using structured staff interviews to capture quantitative data while key informant guides were used to capture qualitative data to back up the quantitative data. The findings reveal that few organizations have put in place strategies to adopt knowledge management practices despite the fact that most of them appreciate the benefits of knowledge. Health NGOs in Kenya have also supportive organizational culture and promote involvement of employees in decision making, however, they are yet to promote management support and employee motivation. Furthermore, 50% of NGOs have M&E plans to inform projects planning and implementation. The study also reveals that M&E training has a strong influence on the role of evaluation in organizations. Based on the study findings, there is need for allocation of adequate resources of support Monitoring & Evaluation and Knowledge Management functions, strengthening management support, and standardizing M&E systems. Further research needs to be done on influence of M&E and knowledge management on organizational effectiveness.*

**Keywords:** Knowledge Management, Monitoring and Evaluation, Non-Governmental Organizations, Organizational Culture, Organizational Structure

## 1. Introduction

There is an increasing pressure on governmental and non-governmental organizations in development co-operation to improve monitoring and evaluation activities, with an emphasis on measuring the effects they have on the beneficiaries [1]. Monitoring is the function of following the implementation of an intervention along the lines of pre-set procedures and indicators in such a way that the results of these interventions can be analysed and used to validate the process and results of the intervention over time. This valuation can lead to changes in the project and/or influence future policies and actions in the field of the interventions. Evaluation is the assessment of the process and effects of a project of program in retrospect (ex-post). Three main reasons for improving monitoring and evaluation of effects are; accountability towards the stakeholders, learning from experiences, and sustainability of activities [2]. For this to be achieved there is need to appreciate the need of linking monitoring and evaluation results with knowledge management processes. It is against this background that this research was conducted to establish the influence of knowledge management on monitoring and evaluation with emphasis on health focused NGOs in Kenya in order to make decisions.

Making good decisions is not easy in today's world [3]. Managers are not only being asked to make further decisions, but they also must process an overwhelming amount of information during decision making process [4].

Furthermore, the orientation toward collaborative decision making and flatter organizational structures necessitates that managers obtain timely information from others dispersed throughout the organization or the world [4].

This realization has spawned a growing interest in the concept of knowledge management. Knowledge Management (KM) is the development of tools, processes, systems, structures and cultures explicitly to improve the creation, sharing and use of knowledge critical for decision making [3]. The effective use of knowledge management helps organizations improve the quality of their decision making and correspondingly reduce costs and increase productivity [5]. In contrast, ineffective use of knowledge management can be very costly and therefore it is important to always remember that information use adheres to the key principle that evidence based decisions lead to better health outcomes. The purpose of all information use related activities is to encourage the demand for and use of existing data in decision making. This data is generated from monitoring and evaluation and hence the linkage between monitoring and evaluation and knowledge management. The study focused on how knowledge management practices, organizations, projects and donors influence quality of monitoring and evaluation in health NGOs in Kenya.

The broad objective of the study was to assess the extent to which knowledge management factors influence quality of monitoring and evaluation processes in Health NGOs. The specific objectives of the study were:

- 1) To establish knowledge management practices that influence the quality of monitoring and evaluation of health programs in Kenya
- 2) To assess organizational factors that influence the quality of monitoring and evaluation of health programs in Kenya
- 3) To assess the project factors that influence the quality of monitoring and evaluation in health NGOs in Kenya
- 4) To establish donor factors that influence the quality of monitoring and evaluation of health programmes in Kenya

Knowledge management and learning is critical in the current world which is likened to a global village. Service delivery and accountability are important components of development and effective monitoring & evaluation and knowledge management system will ensure improved internal processes and results delivery and underpin accountability at various levels. The study is particularly of importance to the community beneficiaries, NGOs, donors and academic/research institutions.

The study was carried out on selected Non-Governmental Organizations (NGOs) working in health sector and implementing programs/projects in Kenya. Within such organizations, interviews were conducted with technical and management staff and where possible board members. It focused on knowledge management factors that influence quality of monitoring and evaluation, particularly looking at knowledge management practices, organizational factors, project factors and donor factors.

## 2. Research Methodology and Design

This was a cross-sectional descriptive study involving both quantitative and qualitative methodologies. The study was conducted in two phases. Phase1: Review of relevant literature to inform the indicators and variables influencing monitoring & evaluation globally, in the continent as well as Kenya and gaps that exist in monitoring & evaluation and knowledge management to be considered during the implementation study. Phase2: Field visit to conduct face to face interviews in quantitative and qualitative methods using structured and semi-structured questionnaires and guides for data collection. The study involved developing of research proposal with full complement of data collection tools, discussion with key stakeholders, data collection, entry, analysis, interpretation and reporting. This was followed by presentation of final research report.

In this study, selection of NGOs was done through simple random sampling. At the NGO level, respondents were purposively sampled considering their role in the various NGOs. Sampling of NGOs was distributed in six counties; Kisumu, Nakuru, Nairobi, Kakamega, Machakos and Mombasa. Considering the number of health NGOs registered with NGO Coordination Board which is 2149, the study considered 78 NGOs drawn from selected regions in Kenya. This acted as sample frame for the health NGOs. At organizational level, a board member, management and staff were interviewed. It was expected that 5 staff members were

to be interviewed per organization and this implies that there were 390 which is statistically significant at 95 percent confidence level. Key Informant Interviews were conducted with representatives from NGOs Coordination Board and Health NGOs Network.

Desk review involved review of existing documents at various levels; NGOs Coordination Board, Health NGOs Network (HENNET) and at NGO level. This provided secondary information to back up primary data. Individual questionnaires contained a set of relevant questions to be administered to individual staff members at NGO level. Key Informant Interviews (KIIs) were administered board members and management and they will provide qualitative data. The data captured constitute both quantitative and qualitative data; quantitative data was analysed using SPSS 18 to generate frequencies, cross tabulations, chi-square tests, correlation and regression. Qualitative data was transcribed and summarized along themes and sub-themes to back up quantitative data.

## 3. Results and Analysis

During the exercise, a total of 388 staff members were interviewed. This represents ninety-nine percent of the expected 390 respondents, and still meets the expected sample size. The 388 respondents were drawn from 78 NGOs across six counties; Kisumu, Kakamega, Nakuru, Nairobi, Machakos and Mombasa. Among the respondents interviewed, 328 (84.5 percent) were from National/local NGOs while 60 (15.5 percent) were from International NGOs. Among the 388 staff members interviewed from the selected NGOs, 20.1 percent were at senior level management, 50.3 percent were programme staff in middle level management, 28.6 percent were field staff while one percent were support staff. This is illustrated in table 1.1.

**Table 1.1:** Position of staff members interviewed

<i>Level/position</i>	<i>Percentage frequency (%)</i>
Senior Management	20.1%
Middle Management/Program staff	50.3%
Field staff	28.6%
Support staff	1%
<b>Total</b>	<b>100%</b>

### 3.1 Knowledge Management Practices

According to OECD [6], knowledge management practices have been grouped into four categories in OECD research; communication, training and mentorship, policies and strategies, and knowledge capturing and acquisition. While this study might have not adopted the practices adopted by OECD research, there were a lot of similarities that can provide basis of comparison of the key findings despite the fact that the two studies focused on different areas. Bozbura used the above categories to look at knowledge management practices (KMP) in Turkish Small and Medium Enterprises (SMEs)[7]. A vast majority of the SMEs in Turkey is family business. They even do not hire professionals for the key positions. For the success of SMEs in Turkey, senior managers believe that the knowledge flow and sharing is not important. By doing so, they want to prevent outflow of

knowledge from the company. This is in contradiction to the findings of this study that indicates high level participation employees in knowledge sharing in order to improve organizational learning.

The survey focused on various aspects of knowledge management practices that are embraced by health NGOs in Kenya. These included; knowledge identification, knowledge creation, knowledge storage, knowledge conversion, knowledge dissemination, and talent management and development. Mosoti and Masheka in their study in NGOs in Nairobi on the same components of knowledge management practices as the ones adopted for this study found out that there is minimal uptake of various knowledge management practices [8]. This is in line with the findings of this study that indicates little has been done by health organizations NGOs in Kenya to effectively adopt knowledge management practices. There is an opportunity for this since majority (60.5 percent) of top management knows the benefits of KMP. This study focused on a number of variables under the following KMP; Knowledge identification, creation, storage, conversion, innovation, dissemination and talent management and development. Similar to the findings by Mosoti and Masheka[8] most of the challenges faced by organizations in Kenya are how to create and implement KMP as part of organizational culture, organizational strategy and organizational leadership. Though most organizations said that they use Technology (web, internet, telephone) there is need for a synergy with other enabling factors (organizational culture, organizational strategy and organizational leadership).

### 3.2 Organization Factors

According to Mosoti and Masheka [8] there is evidence that organizational culture hobbles the effectiveness of KMP in organizations in Nairobi. While the study focused on NGOs in Nairobi, the findings were not different from this study that focused on health NGOs in Kenya. In terms of culture, 71.7 percent of the respondents interviewed mentioned that there are high levels of participation expected in sharing knowledge and 65.2% mentioned that benefits of sharing knowledge outweigh the cost. This emphasises the fact that organizational culture promotes effective implementation of KMP.

Health NGOs in Kenya also promote involvement of employees in decision making through regular employee survey aimed at assessing their attitude towards job, staff appraisal and regular meetings. They also need to strengthen managers' engagement with staff members and also allocate some funds to support staff in participating in technical seminars and conferences. This should be able to enhance their involvement and hence promote organizational learning. Other key areas that need much focus in order to improve organizational processes are; management support and employee motivation as alluded to by Britton [9].

### 3.3 Project Factors

The majority of evaluation resources continue to be devoted to monitoring project implementation and to the production

of immediate outputs. In contrast, very little attention and few resources are devoted to the systematic assessment of whether policies, programmes, or projects achieve their intended impacts and benefits for the target populations. This is equally true for official multilateral and bilateral development agencies, governments, and NGOs. One consequence is that much of the discussion about the impacts of development policies, programs, and projects is based on limited evidence. In some cases generalisations are made from local-level, and not necessarily representative, case studies. In others, observed changes over time are imputed to be caused by certain policies or programmes, usually with very little comparative data from control populations not affected by the programs [10].

This should be addressed by putting in place project design and management processes right from problem identification to monitoring and evaluation. According to this study, seventy-two percent of those interviewed mentioned that their projects have clearly identified/defined targeted beneficiaries and fifty percent of the projects have developed monitoring and evaluation plans with all success indicators that are linked to outputs, outcomes and impacts of the programs.

Inadequate information management and confidential dissemination systems have restricted access to information developing countries Kenya included. Broad public access to information derived from results-based M&E systems is important in aiding economic development both within and between countries. Access to information is an essential component of a successful development strategy. *"If we are serious about reducing global poverty, we must liberate the access to information and improve its quality"*[11]. A monitoring and evaluation framework that generates knowledge, promotes learning and guides action is, in its own right, an important means of capacity development and sustainability of national results. This study revealed that forty-five percent of the organizations provide M&E training and refresher training for program/project and M&E staff. There is also a documented data management process that helps reporting requirements to be met i.e. establishing responsibilities and timelines for data capture.

### 3.4 Donor Factors

In many developing countries, donor agencies continue to be the main sponsors of evaluation. Consequently, donors' information priorities and evaluation methodologies continue to exert considerable influence on how evaluation is practiced and used [10]. Findings from this study have indicated that donors are involved in design, implementation, monitoring and evaluation of policies that guide their engagement with CSOs but time constraints and administrative capacity impact donor policies toward CSO engagement.

In terms of donor reporting, those interviewed mentioned that reports to donors are produced according to donor requirements, with quality information that demonstrates program progress and are submitted as per deadlines. Additionally, program/project reports are also shared with other external stakeholders, for example the National

Coordinating Authorities. In terms of partnership, there is donor and government interaction that encourages CSO engagement in national Development Strategy.

In an attempt to streamline aid policies and increase the effectiveness of development projects, donors signed the Paris Declaration in 2005, which defines aid effectiveness as encompassing national ownership, aligning with country systems, harmonizing donor activities, managing for results, and encouraging mutual accountability. In recognition of the unique abilities of CSOs to enhance national ownership and mutual accountability, donors reinforced their efforts in CSO engagement with a variety of policies attempting to engage civil society in leveraging aid effectiveness. The range of policies reflects the differing development philosophies and missions held by donors and their implementing partners. As a result, an exact determinant or common metric for measuring aid effectiveness does not exist [12].

Donors have a wide array of policies and initiatives targeting civil society engagement in general, especially for coordinating pro-poor development efforts, promoting democracy, advocating good governance, and fighting corruption. Many donors have special administrative units dedicated to CSO engagement, such as the Civil Society Group at the World Bank, the NGO and Civil Society Center at the Asian Development Bank (ADB), and the Department for Cooperation with NGO, Humanitarian Assistance and Conflict Management at the Swedish International Development Cooperation Agency (SIDA).

#### **4. Conclusion and Recommendations**

Health NGOs in Kenya appreciate the benefits of knowledge management practices but a few of them have effectively adopted KMP. This is due to the fact that there are weak systems to support adoption of various components of knowledge management. Organizations that have embraced monitoring and evaluation and knowledge management have improved their ability to improve overall organizational effectiveness as well as ability to adapt quickly to unanticipated changes. This emphasises the need for health organizations to effectively adopt knowledge management practices.

According to the study, there are organizational factors that influence quality of monitoring and evaluation in health NGOs, these include organizational culture, involvement of employees in decision making, management support, and employee motivation. Health NGOs in Kenya have to a larger extent strengthened organizational culture and employee involvement, however, much needs to be done to strengthen management support as well as employee motivation in order to promote organizational learning.

Project design and management and data management are key project factors that influence quality of monitoring and evaluation. This ensures that projects have clearly identified targeted beneficiaries by conducting needs assessments involving affected communities at local level before program design and planning. In most organizations, data and

information is captured and recorded when and where an activity is implemented, particularly for process/output indicators.

Furthermore, donor agencies continue to focus on monitoring and evaluation of health programs in order to improve programming and realize the value for their money, they have their specific indicators that implementing organizations have to report on and hence they still control most of the health NGOs in Kenya. This may hinder organization-specific indicators, especially those that measure progress towards achieving their strategic target. Due to pressure to meet donor demands, organizations take a lot of time implementing and reporting with no time to step back and reflect on what went well and what did not go well and why. This influences quality of monitoring and evaluation.

Based on the results and analysis of findings from this study, the following are recommendations for improvement:

- 1) There is need to put in place structures and systems in order to effectively adopt knowledge management practices within organizations
- 2) Health organizations in Kenya should put in place effective management support in order provide the staff with required support in the process monitoring and evaluation and knowledge management.
- 3) There should be a documented data management process that helps reporting requirements to be met by establishing responsibilities and timelines for data capture.
- 4) There should also be strengthened partnership between donor agencies and government ministries as well as implementing organizations to have standardized M&E processes.

Further research needs to be done on how effective monitoring and evaluation and knowledge management systems contribute to organizational effectiveness including internal and external learning, such a research should also consider at what level should organizations put in place such systems. In addition, more research should focus on the role of management support and employee motivation in improving monitoring and evaluation and knowledge management and to what extent this is happening in health and other NGOs as well as for-profit organizations.

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- workshops and conferences that he has attended. Additionally, he has hands-on experience working with multi-donor funded programs, as well as working in partnership with government ministries within the region. He is a member of; Society of Educational Research and Education in Kenya (SEREK), The South Africa Institute of Health Care Managers (The SAIHCM), The International Society for Organization Development and Change (The ISODC), Evaluation Society of Kenya (ESK), and Africa Community of Practice on Managing for Development Results (CoP-MfDR-Africa).

## Author Profile



**Otieno Stephen Odiwuor** holds Bachelor of Science (B.Sc.) from Egerton University, Executive Master of Science in Organizational Development (EMOD) from United States International University, Master of Arts in Project Planning and Management from the University of Nairobi, Advanced Health Management Programme from Foundation for Professional Development/Yale School of Public Health, and Master of Science in Development Management from the Open University – United Kingdom. Currently he is pursuing PhD in Development Studies at Jomo Kenyatta University of Agriculture and Technology. He has undergone various professional courses through which he has acquired key skills and knowledge in development issues. He has over 12 years' hands-on experience working with local and international NGOs focusing on Health and HIV & AIDS; Livelihoods and Food Sovereignty; Environmental Management; Social Protection; Emergency and Humanitarian Response; Governance and Human Rights; Gender & Women Empowerment and Peace-building & Conflict Transformation. He has worked with AMREF International, Women in the Fishing Industry Programme (WIFIP) Education and Development, Mildmay International – Kenya, and HelpAge International – Africa Regional Development Centre. Currently he is working with Agency for Cooperation and Research in Development (ACORD) as Monitoring & Evaluation and Knowledge Management Coordinator. Stephen has also provided various training, research and development consultancies to a number of clients in Kenya and the region; he is currently part-time lecturer of Development Studies at Jomo Kenyatta University of Agriculture and Technology (JKUAT). His work experience in design and management of development programs as well as advocacy and policy influence is augmented with various seminars,