

Influence of Stakeholder Communication Strategy on Sustainability of Maternal Healthcare Projects in Public Hospitals in Kenya

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ABSTRACT

Communication in project management is an essential tool for maintaining a robust relationship between Top management and other levels of the organization (Bourbe, 2010). In this regard, this study has focused on the effect of stakeholder communication strategy on sustainability of maternal health care projects in public hospitals in Kenya. This study used descriptive correlation design. The target population for this study is 6331 which constitute maternal mothers, maternal Nurse in charge, civil society (HENNET), Donor agencies, NHIF officials, Ministry of Health Officials, and Hospital Administrators from which a sample size of 399 was selected through Slovic's formula. Quantitative data was analysed using inferential and descriptive statistics. The results on stakeholder communication has statistically contributed to sustainability of MHCPs in Public Hospitals in Kenya, this has shown that a unit change in stakeholder communication is likely to result in the sustainability of MHCPs in public Hospitals in Kenya by 32.8 %. The study has recommended that Stakeholder communication strategy to take key role in strengthening the ability of the stakeholder's strategic communication to promote contingent and connectedness of stakeholders and enhancement of information flow to MHCPs in public Hospitals in Kenya. It is essential that the project stakeholders know what is expected of them; what they have to do, when they have to do it, and what budget and time constraints they are working towards in order to enhance sustainability of MHCPs.

Key Words: Stakeholder communication, Top management support, Public Hospital

INTRODUCTION

Communication is a strategic approach in setting up appropriate management strategies to effectively engage stakeholders through project lifecycle, premised on the needs analysis, interests and potential impact on project success. According to Vermeir et al. (2015) postulated that health communication entails the application of communication strategies that enlighten and inspire individuals to promote health and their well-being.

This implies that health promoters preferably should embark on persuading the stakeholders to take up specific projects and attain a course of action that would result in an improved maternal and children's well-being. However, little effort has been put to lay clear framework and array of communication strategies that can be adopted to engage with the stakeholders and achieve sustainability of projects in public hospitals in Kenya.

Based on this background, the study concluded that health communication and information flow to the stakeholders affects project uptake and ultimately influence sustainability of MHCPs in public hospitals in Kenya.

Statement of the problem

High maternal mortality and morbidity rates remains a major concern among women and young children in Kenya whose delivery rely on unspecialised birth attendance in rural and urban slum (Mwangi, 2022). Maternal

mortality rates have remained at 362 per 100,000 far much higher than the Global recommended MMR of 70 per 100,000 live births (WHO, 2019). The estimated 6,300 women die annually during pregnancy or birthing process (Banke-Thomas et al, 2020 and UNPF, 2022). To address this challenge, the Government of Kenya initiated maternal healthcare services in 2013 (Owiti, 2018) whose aim was to reduce maternal death, however available statistics on the Interrupted Time Series Analysis of the Free Maternity Services Policy in Kenya reveals that 38.2% of births are still attended by unskilled health practitioners outside hospitals yearly (Owuor & Amolo, 2019).

Studies have indicated that maternal healthcare projects have not taken off fully due to unsustainability, insufficient stakeholder communication on maternal care projects (Abdi, 2020; Orangi et al., 2021). Furthermore, Mwangi, et al (2022), Njuguna (2022) and Gatimu (2022) have also attributed the inability of maternal health projects to deliver its objectives due to absence of communication strategy on awareness of unhealthy maternal implications. While top management support is acclaimed to aid maternal health care projects, little is shown on how its implementation, magnitude and direction influence the sustainability of maternal health care projects in reduction of mortality rates. In regard to this, the study aims establish proper understanding of how stakeholder communication strategy influences sustainability of maternal health care projects in public Hospitals in Kenya.

Objectives of the study

To ascertain the effect of stakeholder communication on sustainability of MHCPs in public Hospitals in Kenya.

To establish the moderating effect of top management support on communication and sustainability of MHCPs in public Hospitals in Kenya.

Research hypotheses

Stakeholder communication has no significant effect on sustainability of MHCPs in public hospitals in Kenya.

Top management has no moderating effect of on communication strategy and sustainability of MHCPs in public hospitals in Kenya.

LITERATURE REVIEW

The communication strategy entails provision of appropriate information on project progress, schedules, time frame, risks, resource requirements, problems, and alternative solutions. Moreover it is a process of transferring information; encoding in a package and relaying to the intended receivers. Communication in project management is regarded as an essential tool for maintaining a robust relationship (Bourbe, 2010; Yang & Sheng, 2014). Furthermore, Yang and Sheng (2014) defines communication as a process of streamlining the management and organizational strategies to engage stakeholders during development phase of the project. According to Project Management Institute (2013b), affirms that effective communication is beneficial to the project development and successful implementation.

Similarly, lack of clear communication leads to confusion and ambiguity on project progress and deliverables. For instance, absence of clarity and timelines in communicating will lead to drawback of project information and updates. According to Scandelous and Cohen (2016) have argument that for any project to succeed, proper and elaborate communication is a requirement. Equally, Bourne (2010) observed that an effective communication plan must deliver value of the project. Ried and Schuler (2017) further stated that, health communication is the use of various strategies to inform and influence individuals to make health decisions and promote the well-being of the members of the society, however, absence of it lead to disfranchised societal fabric causing fear and mistrust. Therefore in an organization especially where issues touching health is involved, top management need to ensure stakeholders interest are taken into account through effective communication. Subsequently, communication plays a significant role in shaping maternal and child health practices and seeks to alleviate and minimize the problem of high mortality and morbidity rates.

According to Vermeir et al. (2015) acknowledges that the promotion of good health requires changes in the perception of various health programs, attitudes, behaviors, and practices among the target population. This enhances mutual agreement in the information flow thus promoting active stakeholder participation and involvement. However, there is a need to adopt communication strategy by top management when engaging the stakeholders to ensure sustainability and improved service uptake on maternal healthcare projects in public Hospitals.

According to (Baur & Prue, 2014) indicated that the Center for Disease Control and Prevention (CDC) agrees with Vermeir et al. (2015) that health communication entails the application of communication strategies that enlighten and inspire individuals to promote health and well-being. This implies that the health promoters must embark on persuading the stakeholders to take up specific projects and attain a course of action that result in improving maternal and child's well-being. However, there is no clear framework and array of communication strategies that can be adopted to engage with the stakeholders to achieve sustainability of MHC projects in public hospitals. This gap has necessitate the study to establish potential communication strategies to be adopted in engaging stakeholders to achieve the ultimate result of improving maternal health and reducing mortality and morbidity rates.

On global outlook, various governments have paid attention to maternal health with a sole focus on reducing the maternal mortality and death that arise from pregnancy-related complications. This has compelled the governments to seek ways to engage the beneficiaries such as the expectant mothers to increase the uptake rate of the programs; this is indicated by (Taylor, 2023). In line with this, several international health summits and conferences have sought to improve maternal health improvements and reduce maternal mortality rates. The international health summits and conferences have made declarations and set goals for reducing maternal mortality rates.

The World Health Organization pointed out that the quality care a mother receives during the pregnancy period and delivery is important for her survival and the well-being of the child (Taylor, 2023). However, some mothers may not be aware of the pregnancy-associated maternal projects at the public hospitals which limit their ability to access and uptake services provided by these projects.

Baur and Prue (2014) elaborated that public health communication is an essential component in achieving value and brings about the desired health-related outcomes in public hospitals. The communication intervention aims at helping the stakeholders to bring about the desired health-related changes and outcomes. In addition, these changes contribute to healthier hospital environments. This study explored the importance of communication interventions in achieving a healthy hospital environment that inculcates maternal care. However, this study failed to explore how communication strategy can be adopted by stakeholders and top management to enhance sustainable maternal healthcare projects in public hospitals in Kenya.

In the project life cycle, the aim of strategic communication is to enable and improve project profile or soliciting support, maintain credibility and relevancy, and reduce stakeholder resistance. Therefore, communication among the stakeholders ought to be a critical component of project implementation as contemplated by (Luhombo et al. 2019). He further explained that stakeholders should know the tasks involved and accomplish through monitoring mechanism. However, the study did not reveal how stakeholders managed to achieve sustainability of projects in public Hospitals in Kenya. Thus, there is a need to figure out a long-term solution by creating communication strategy amongst project top management and stakeholders players in the health sector as well as the public to improve the uptake rate of maternal healthcare services in MHCPs in Kenya.

According to the study conducted in Sub-Saharan Africa by Kwame and Petrucka (2020), revealed that robust communication strategy for sustainable maternal healthcare projects involves various components to achieve effective engagement and support from the stakeholders. In line with this, he highlighted that, stakeholders in maternal health care must be identified, capture their concerns and needs to be taken into consideration while top management of the hospitals to define communication objectives, craft key messages, and choose a appropriate channel for dissemination of information. This study further hinted that raising awareness about maternal care projects, building support, fostering collaboration, and ensuring accountability contributes a positive maternal health outcomes. However, analysis of this study shows that it did not explore communication

strategy linking it to the sustainable maternal healthcare projects in public hospitals. These gaps necessitate this study to explore the effect of communication strategy on the achievement of sustainable healthcare projects in public hospitals in Kenya.

Ajayi and Kilani (2024) indicate that communication is essential to healthcare projects. For example, a study conducted in Nigeria on the use of modern contraceptives, intention to use them, and desire for fewer children in households indicated that channelling the information to the stakeholders contributed to major milestones during the program. Equally, studies conducted in Malawi on family planning indicated that communication was significant in achieving the outcome of the project. They affirmed that communication compelled most women to learn about family planning and were more likely to use modern family planning methods (Sinyiza et al., 2022). However, the studies failed to highlight the potential communication strategy that can be used by public hospitals in engaging the stakeholders of the maternal care program to attain success. These created a research gap in which research should be conducted to explore the various communication strategies that can be used to engage stakeholders of maternal health care programs.

Study conducted on stakeholder perception regarding the implementation of maternal and new born healthcare programs by (Nishimwe & Mchunu, 2021) affirmed that the perception of the projects sustainability heavily relies on communication strategy. The study showed that communication with the stakeholders of the Rwandan Maternal and new born health care program helps to identify the areas for improvement and foster the uptake rate of maternal care programs. Moreover, the study recommended that effective communication strategy need to be adopted to achieve sustainable development goals in the healthcare environment. Although this study has recognized the sole importance of communication with the stakeholders to achieve sustainable maternal and new born healthcare programs, it did not explore fundamental communication strategy that links management of MHC projects in public hospitals to ensure sustainable milestones in maternal and new born healthcare.

In Kenya, a study conducted by (Ngesa, 2021) on the various channels of communication on maternal and child health care for women of reproductive ages in Machakos revealed that communication is very essential when engaging with project stakeholders. Therefore, this study concluded that health communication and how the information is channelled to the stakeholders affect the project uptake and ultimately affects the health outcomes. However, while this study explores how communication enhances engagement on stakeholders in project implementation, it has not elaborated on the potential communication strategies that can be used by public health institutions to enhance stakeholders on sustainability of the maternal health care projects in public hospitals in Kenya.

MATERIALS AND RESEARCH METHODS

This study adopted a descriptive-correlation research design which comprised of both descriptive and correlation analysis. The target population was a cohort of individuals involved directly in the maternal healthcare services, this included 6,000 mothers estimated to deliver daily, 57 maternal Nurse in charge, civil society (HENNET), 10 Donors agencies (KAMANEH), 47 County NHIF officials, 47 County Ministry of health officials and 57 Maternal health Project administrators of public Hospitals. Thus, the total population was 6331 respondents. This sample was drawn from level 4 to level 6 public Hospitals.

Sampling Size

A sample size refers to the number of units selected and from whom the data is obtained. Kothari (2016) indicates that researchers must ensure that the sample size is big enough to be considered as a representative of the target population. The study sample included maternal Nurse in charge of maternal health in public hospitals in the country who are mandated to run maternal health projects, county health chief officers, and ministry of health officials, county NHIF officials, maternal mothers, donors, and civil society. Slovin's sample size formula was used to determine the sample size for maternal healthcare projects for the study. The study adopted a sample size of respondents as illustrated in Table 3.1.

$$n = N / [1 + N (e)^2]$$

$$n = 6331 / [1 + 6331(0.05)^2]$$

$$n = 399.96, = 400$$

Where:

N= Target Population

n=required size

e= error term

Table 3:1: Sample size determination

Category	Population	Sample size
Public hospitals(administrators)	57 *.0632	4
Maternal mothers	6000*.0632	377
Nurses in charge	57*.0632	4
County chief officer: Health	47 *.0632	3
NHIF official (County)	47 *.0632	3
Donors	10*.0632	1
Civil societies (HENNET)	112*.0632	7
Ministry of health officials	1*.0632	1
Total	6331*.0632	400

Survey data (2024)

The primary data was collected using questionnaire and secondary data collected using Document analysis form for content analysis. Quantitative data was analysed using both inferential and descriptive statistics. Regression model fitness was estimated using coefficient of determination which helped to explain how closely the predictor variable explains the variations in the dependent variable. To test the significance of each individual predictor and make conclusion on whether to reject or accept the null hypotheses, the P value was used. The level of significance of 5% was used as a benchmark. If the P value is less than 0.05 at 5% significance level, reject the null hypotheses and accept the alternative and vice versa (Kothari, 2014). This study applied the following hypotheses generated from the model:

H01-There is no significant influence of stakeholder communication strategy on the sustainability of maternal health care projects in public hospitals in Kenya.

Sustainability of maternal health care = f (Stakeholder communication strategy+ random error)

$$Y = \beta_0 + \beta_1x_1 + \varepsilon, f(x_1, \varepsilon),$$

To address the research hypothesis, the study checked whether the regression coefficient of stakeholder communication strategy (β_1) is positive (+) and significant (p values < 0.05) in line with theory and study expectations.

RESEARCH RESULTS

The research findings revealed that majority of the respondents were in agreement that all maternal health care projects have communication made known to all stakeholders (SD = 6.1%, Disagreed = 1.0 %, Undecided= 5.8%, Agree= 82.9%, Strongly Agree 4.2 % , with a Mean of 3.6 and a Standard Deviation of 0.889). The study outlined that Stakeholders were available for consultation with (SD = 1.6%, Disagreed = 9.4 %, Undecided= 8.4 %, Agree= 70.0%, Strongly Agree 10.06 % with a Mean of 4.06 and a Standard Deviation of 0.975). The respondents agreed that Stakeholders create formal and informal collaborative linkages with (SD = 0%, Disagreed = 12.3 %, Undecided= 7.7 %, Agree= 75.2%, Strongly Agree 4.8 % with a Mean of 3.61 and a Standard Deviation of 0.955). The finding further revealed that Stakeholders clearly understand the project goals, objectives, benefits, and risks with (SD = 5.5%, Disagreed = 3.9 %, Undecided= 8.7 %, Agree= 62.9 %, Strongly Agree 19 % with a Mean of 3.11 and a Standard Deviation of 1.142). Majority of the respondents agreed that information shared minimizes stakeholder resistance throughout the life cycle of the project with (SD = 2.9 %, Disagreed = 3.2 %, Undecided= 5.2 %, Agree= 78.1 %, Strongly Agree 10.6 % with a Mean of 3.32 and a Standard Deviation of 0.991). The respondents further agreed that Information sought for maternal health care projects helps to adjust and respond to all areas of concern with (SD = 3.2%, Disagreed = 3.9 %, Undecided= 4.2 %, Agree= 71.3 %, Strongly Agree 17.4 % with a Mean of 3.83 and a Standard Deviation of 0.695). Further, the respondents equally agreed that all maternal health care projects have a communication plan that helps engage the stakeholders throughout the project cycle with (SD = 5.8 %, Disagreed = 1.3 %, Undecided= 2.6 %, Agree= 79 %, Strongly Agree 11.3 % with a Mean of 3.83 and a Standard Deviation of 0.708 . Furthermore, respondents were in agreement that Communication among the stakeholders is fast and efficient throughout the project cycle with (SD = 5.5 %, Disagreed of 5.2 %, Undecided= 7.1 %, Agree= 76.5 %, Strongly Agree 5.8 % with a Mean= 3.72 and a Standard Deviation of 1.194. Finally, the research findings revealed that Project teams receive feedback for any communication made to the stakeholders with (SD = 5.5 %, Disagreed = 8.4 %, Undecided= 8.1 %, Agree= 8.4 %, Strongly Agree 11.6 % with a Mean of 3.39 and a Standard Deviation of 1.097). Consequently, on average scale, the level of Stakeholder communication on sustainable maternal health care projects (MHCPs) in public hospitals in Kenya was at approximately 72 % giving a Mean of 3.6 with a Standard Deviation of 0.958.

This indicated that majority of the respondents were in agreement that the level of communication and awareness of maternal stakeholder on sustainability of maternal health care projects in public hospitals in Kenya was moderate hence room for improvement. Although the research findings are in tandem with Monitor (2014) who affirmed that regular communication is integral in ensuring everyone in the organization is kept informed and updated on the nature and undertakings of maternal health care projects in public hospitals in Kenya. The current study has helped in minimizing any discontent or dissatisfaction that may arise throughout the project life cycle or dissatisfaction that may arise throughout the project life cycle. This is realised in respondents' agreement that all maternal health care projects have a communication plan that helps engage the stakeholders throughout the project cycle. The study findings contribute to the organizational information theory by showing that communication makes every stakeholder in any organization aware of what role they have to play.

Inferential Statistics

Regression model fitness was estimated using coefficient of determination which helped to explain how closely the predictor variable explains the variations in the dependent variable. To test the significance of each individual predictor and make conclusion on whether to reject or accept the null hypotheses, the P value was used. The level of significance of 5% was used as a benchmark. If the P value is less than 0.05 at 5% significance level, reject the null hypotheses and accept the alternative and vice versa (Kothari, 2014). The hypothesis of the study sought to assess the significance of the causal and effect relationship between Stakeholder Communication and Sustainability of MHCPs in public hospitals in Kenya.

The first hypothesis stated that, there is no significant relationship between stakeholder communication strategy and sustainability of maternal health care projects in public hospitals in Kenya.

To test the objective, the study adopted the approach of Simple Linear Regression analysis and the findings were shown in Table 4.1.

Table 4.1: Influence of stakeholders communication strategy on the sustainability of maternal health care project in public hospitals in Kenya.

Model Summary									
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics				
					R Square Change	F Change	df1	df2	Sig. F Change
1	.328 ^a	.308	.305	.29328	.308	37.205	1	308	.000
2	.583 ^b	.340	.335	.25274	.232	107.720	1	307	.000

Predictors: (Constant), SCS

Predictors: (Constant), SCS, MS

The model summary results presented on Table 4.1 shows the value obtained on the predicted variable (sustainability of MHCPs) as explained by independent variable (stakeholder communication strategy) revealed that R-value of 0.328 and the R-square for the model 0.308. This implies that a 30.8 % of the corresponding variation in the sustainability of MHCPs in public Hospitals in Kenya resulted from stakeholder communication strategy. However, on the contrary, 69.2 % of this sustainability could be explained by variables not considered in this model. Furthermore, the adjusted R square (.305) fairly gives a more honest value that tends to estimate the R square for the entire population at 30.5 per cent. Similarly, the F change statistic gave a value of (37.205, $p < 0.05$) which was large enough to support the goodness of fit of the model in explaining the variation in the predicted variable (stakeholder communication) on sustainability of MHCPs.

The model summary results, with the introduction of the moderator top management support indicated that the R-square is 0.340 and (R-Square change value was modified to 0.335) in model 2 with 33.5 % moderated variation of sustainability of MHCPs.

Table 4.2: Influence of stakeholders 'communication strategy on the sustainability of maternal health care project in public hospitals in Kenya.

ANOVA ^a						
Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	3.200	1	3.200	37.205	.000 ^b
	Residual	26.492	308	.086		
	Total	29.692	309			
2	Regression	10.081	2	5.041	78.908	.000 ^c
	Residual	19.611	307	.064		
	Total	29.692	309			

Dependent Variable: SMHCP

Predictors: (Constant), SCS

Predictors: (Constant), SCS, MS

The results of ANOVA as indicated in Table 4.2 revealed that the Simple Linear Regression model was of good fit to the data collected with $[F(1, 308) = 37.205, P = 0.000 < 0.05]$, implied that the model is statistically significant to predict the relationship between communication strategy on sustainability of MHCPs in Kenya. The results of ANOVA with the introduction of the moderator (top management support) modified ANOVA values to $[F(2, 307) = 78.908, P = 0.000 < 0.05]$ equally indicated that the moderated model was statistically significant to predict the relation between the moderator and communication in model 2.

Table 4.3: Coefficients on Linear Regression Results; Influence of stakeholders 'communication strategy on the sustainability of maternal health care project in public hospitals in Kenya

Co-efficient ^a						
Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.
		B	Std. Error	Beta		
1	(Constant)	2.611	.170		15.359	.000
	SCS	.271	.044	.328	6.100	.000
2	(Constant)	1.830	.165		11.118	.000
	SCS	.259	.038	.314	6.756	.000
	MS	.220	.021	.482	10.379	.000

a. Dependent Variable: SMHCP

The coefficients as shown in Table 4.3 indicates that Stakeholder communication had statistically significant contribution to predict the sustainability of MHCPs in Kenya with (Beta = 0.271, $t = 6.100, p = 0.00 < 0.05$). The influence was stated by a t-value of 6.100 which implies that the standard error associated with the parameter is less than the influence of the parameter, and with a positive unstandardized beta coefficient of 0.271 implied that a unit change in communication strategy would influence sustainability of MHCPs by 0.271 units and finally the level of significance at p-value of $0.000 < 0.05$ was achieved, this being within 95% confidence level communication strategy significantly influenced sustainability of MHCPs. Hence, the null hypothesis was rejected with the conclusion that stakeholder communication strategy had a significant influence on sustainability of MHCPs in Kenya.

The Simple Linear Regression model predicted sustainability of MHCPs in Kenya using results of Stakeholder communication. This was fitted in our first Simple Linear Regression model of $Y = \beta_1 x_1 + \varepsilon$ $Y = f(x_1, \varepsilon)$, as follows; Sustainability of MHCPs = $2.611(\text{Constant}) + 0.271(\text{Stakeholder communication}) + \varepsilon$

The findings revealed that effective communication on stakeholders involved in management of projects is very crucial in sustaining MHCPs since they get informed of every detail pertaining management due to the connectedness to maternal health care projects. This is in agreement with Kwame and Petrucka (2020) who stated that robust communication strategies enhances sustainable maternal healthcare projects which involve effective engagement and management support. Moreover Ajayi & Kilani, (2024) affirmed that channelling the information to the stakeholders contributes to major milestones during the project implementation and achievement of the project outcome. However, in this study, there is minimal influence of communication on sustainability of MHCPs.

DISCUSSION OF FINDINGS

That stakeholder communication has a statistically significant contributed to sustainability of MHCPs in public hospital in Kenya since a unit change in stakeholder communication is likely to result in the sustainability of MHCPs in public hospitals in Kenya by 30.8 %. The findings revealed that effective communication on stakeholders involved in management of projects is very crucial in sustaining MHCPs since they get informed of every detail pertaining management due to the connectedness to maternal health care projects in Kenya.

CONCLUSION

The study concludes that Stakeholder Communication had a significant partial influence in predicting the sustainability of MHCPs; an indication that there was no clear communication strategy in the Management of stakeholders thus retarding the sustainability of the MHCPs in public hospitals in Kenya. Moderating influence of top management support was found to be significant when stakeholder communication was used to predict Sustainability of MHCPs in Kenya.

RECOMMENDATIONS

Stakeholder communication strategy to take leading role in strengthening the ability of the stakeholder's to promote contingent and connectedness of stakeholders and enhancement of information flow to MHCPs in public hospitals in Kenya.

The project stakeholders to know what is expected to be done,; what they have done, when to be done, and what budget and time constraints they are working towards in order to enhance sustainability of MHCPs.

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