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## **Strategic Plan Implementation Factors and Health Conditions Promotion in Rwanda: A Case of Karongi DDP in Bwishyura Sector**

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# Strategic Plan Implementation Factors and Health Conditions Promotion in Rwanda: A Case of Karongi DDP in Bwishyura Sector

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## Abstract

The general objective of this research was to investigate the effect of strategic plan implementation on the living conditions Bwishyura Sector, Karongi District. The specific objectives was to determine effect of strategic leadership on health conditions of Bwishyura population, to establish effect of organizational structure on health conditions of Bwishyura population, and to determine effect of human resources on health conditions of Bwishyura population. The study was target 33,065 population of Bwishyura sector in which a sample size of 396 respondents determined using Slovin's formula selected using probability and non-probability sampling methods. In this regards, in probability sampling methods, the study employed simple random sampling technique to choose project beneficiaries; and procurement officers using purposive sampling technique. The research instrument to collect data was questionnaire and interview. Using statistical product and service solution used to generate descriptive statistics (frequency, percentage, mean and standard deviation) and inferential statistics (correlation and regression analysis) for statistical data. The Pearson correlation obtained was estimated to 0.571 indicating a positive index and a positive correlation linking the two variables. The "sig.value" indicating that the value is less than 0.05 (Note that the SPSS output always indicate a value less than 0.005 as 0.000). The p value was 0.000 (2-tailed). All of these assumption of the respondents from the population of Bwishyura sector in Karongi district were helped the research to conclude that the strategic plan implemented were contributed positively to the health condition of the population of Bwishyura sector. Therefore, we recommend other further studies to be done and concentrate on two areas: Future studies should work on the contribution of local government in improving global economy and also to find out how the influence of population increase and poor technology contribute to the delay in services and customer management in other sectors in Karongi district.

**Keywords:** *Knowledge, practice, first aid delivery, commercial motor cycle riders*

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## 1.0 Introduction

Internationally, strategic planning refers to the procedure in which institutional managers assesses their vision for the future as well as assesses their objectives. Strategic plan refers to very much a management activity, carried out at all degree of the institution (Rouse, 2021). However, strategic plan implementation was influenced by several factors. Here are the five key factors for successful strategy implementation: leadership and commitment to the strategy, human resources and the creation of creating an environment where strategy succeeds, and the organizational structure (Olsen, 2022).

In United States of America, strategic leadership was the most influential factor of strategic plan implementation. Therefore, strategic leadership refers to the practice in which executives, using different styles of management, develop a vision for their organization that enables it to adapt to or remain competitive in a changing economic and technological climate (Metho, 2021). In Europe, for instance in the United Kingdom and France, strategic leadership is used to implement plan, but the most commonly used is organizational structure. In this regards, organizational structure refers to a ranked pinpointed of an organizational contribution, teams and workers explains what employee's did not whom they report to and how decisions were done across the business (Christopher & Nondi, 2020).

In Sub-Saharan Africa, current examinations of planning and managers and of the advancing practices of supporting agencies by global assessment pinpoint the role of well-designed and implemented projects. For instance, in Nigeria, the most commonly used strategic plan implementation factor is human resource strategy. In this regard, human resources strategy refers to the is the section in a business that was duties for all things worker-associated with them including selection, recruitment, vetting and hiring, capacity building (Igbaekemen, & Odivwri, 2019).

In Rwanda, all strategic plan was aligned with vision 2050 established a new pathway that will stimulate the national living condition of upper middle income by 2035 and high income status by 2050 (Ministry Finance and Economic Planning, 2020). Therefore, the effective strategic plan implementation was influenced by several factors such as strategic leadership, organizational structure, commitment, consensus and human resource management. However, the annual evaluation is conducted to determine the level of attaining the expected results and contributed to improvements in socio-economic wellbeing of citizens.

In Karongi District, strategic plan was adopted and implemented. In this regards, the District, based on the collaboration and interaction between both public and private entities to undertake their activities (Karongi, 2021). The cooperation of local entities may lead to complexity or the execution of strategic plan owing to the necessity of stakeholder participation.

## 1.1 Problem Statement

The growing problem was a high low performance in strategic execution makes difficult for organizations to fully promote health conditions of the population. Low level of perceiving local entities had obtained, was taken into account in the process of executing projects

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(Ministry Finance and Economic Planning, 2019). In the execution of DDP strategic plans, local entities are struggling to use resources effectively. According to the fifth integrated household and Living condition survey [EICV5] (2018), 33% of the population reported a health problem in the fourth weeks prior to the survey and among them 57% attended a consultation. The report showed that health insurance coverage has been increased by 4 percent from 70% to 74%. (EICV5, 2018).

Organizations routinely attempt strategic change, but many implementation efforts fail. Change implementation is considered a game of high stakes, where success can reinvigorate a business, but failure often delivers catastrophic consequences, including the local entity's demise (Cândido & Santos, 2020) and suggested that in spite of the notable gains made in the strategic management field, the problem of strategy implementation failure persists, and it is still an important and ongoing concern for researchers and practitioners.

Rajasekar (2021) did a study on Strategy implementation processes in a service industry in the Sultanate of Oman. The study proposed seven factors that affect implementation strategy. The results demonstrate that leadership is by far the most important factor influencing successful implementation strategy in the service sector. They recognized that strategy implementation has received less research attention than strategy formulation and yet, it remains the most significant management challenge faced by many organizations today. While scholars have amassed an impressive base of knowledge regarding how firms, through the actions of top managers should attempt strategic change, they know surprisingly little about the ways in which employees contribute to the achievement of a new strategic direction.

In doing so, it emphasizes the actions of top managers that influence strategy formulation while overlooking the crucial role played by other managers and employees in implementing new strategies (Sonenshein & Dholakia, 2021). Several scholars in outside of Rwanda did surveys on strategic execution in governmental organization (Somi, 2021) relying on institutional success. This particular study seeks to find out the factors that affect employees in regard to their contribution in making sure that strategic plan is successfully implemented. The study looks into three main factors namely; leadership, resource allocation and staff capabilities. The study focused on finding out the relationship between the named factors and health promotion in Karongi District Development Plan in Bwishyura sector, Rwanda.

## 1.2 Research Objective

- i. To determine effect of strategic leadership on health conditions of Bwishyura population.
- ii. To establish effects of organizational structure on health conditions of Bwishyura population.
- iii. To determine effect of human resources activities on health conditions of Bwishyura population.

## 2.0 Literature Review

According to Schoemaker et al (2013) investigated six knowledge in strategic leadership of management, where 65% of institutions had managers who are not able to assess those constraints. The expectation expanded elsewhere expecting the rivalries was the next but

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improvement and amelioration of managerial knowledge like effective understanding and do in advance and strategic planning is representing by 60% (Schoemaker, *et al.*, 2020).

A research done by Mbithi (2016) pinpoints that 95% were diverse elements impacting or influencing strategic execution including organization arrangement, cultural practices, managerial style, dissemination of information, workers participation and ICT development while only 5% were disagreed by the statement. Moreover, in the research findings conducted by Tusiime (2020) 85% of the total respondents argues the existence of correlation between arrangement and the provision of service and suggests that governmental institutions would establish clear arrangement relying on action taken.

The research done by Somi (2022), showed that 95% of the total respondents said that public institutions make an investment in recruiting right persons in the right places in order to enhance organizational and managerial success. Moreover, long-term incentives for human persons include the provision of reward, promotion, annual leave, accommodation and transport. A research done by Mutiso (2021) find out that 88% of the total respondent where agreed by the statement that the existence of a clear association between quality delivery and human resource management and managerial success. This research proposed that recruiting and selecting employees, capacity building, compensate them and the success of managers would be ameliorated via suitable supply of training pertinent difference between health organization with high level of success and organization facilities undeforms or below average (Edgar & Geare,2020).

## **2.1 Theoretical Review**

### **2.1.1 Resource Based Theory**

This model argues that in any institution internal resources and capabilities were adequate for several organization (Shembe, 2019). However, laws obtained from the prospect that organizational assets were positively associated with the satisfaction that a customer expectation that of competitors are not easy to discover or not adequate therefore, all profit were detained by the institution. Furthermore, this theory intended to establish characteristic and abilities and assets, adopted to generate high level of outcomes (Munge, 2021). The present theory was very relevant in conducting this ongoing research in order to collect relevant data related to the effect of strategic plan implementation factors on health promotion for persons.

### **2.1.2 Behavioral Theory**

Behavioral model was advanced in the framework of economic and organization theories related to strategically managing resources, and governmental and non-government institutions (Barney & Ouchi, 2022). This model focuses on the present procedure to make suitable decisions and afford observational data in order to take further action (Zheng, *et al.*, (2021) argues the traditional behavior theory of the organization that have demonstrated both economic and organizational complex theories. Organization gives those in assigned positions and impacts others. Organization effects the environment of evidences and strategies in which decisions are undertaken.

This model relates to the study as it indicates the role of decision making and giving the ways they are made. This model was related in carrying out the present research since it can effectively establish the relationship between strategic planning and execution with the level of people's welfare and health promotion.

### 3.0 Methods/Procedures/Methodology

In this study, the researcher used correlation research design because it helped him to assess the link between independent and dependent variables without adjusting them. This design helped to show the strong pointy or direction of the association between variables. The target population for this study was 33,065 population of Bwishyura sector whom study data was collected. The researcher calculates sample size using formula (Yamane, 2019). To obtain the sample size the researcher uses Sloven's formula.

$$n = \frac{N}{1 + Ne^2}$$

(Yamane, 2019), n= Number of samples or sample size

N= Total population, e= Error tolerance

Therefore, from the total target population of 198, taking sampling error of 5%, the sample size will be

$$n = \frac{33065}{1 + 33065(0.05)^2} = 396$$

$$n = \frac{197}{1 + 197(0.05)^2} = 132$$

The research employed probability and non-probability sampling methods. In this regards, in probability sampling methods, the study employed simple random sampling technique to choose project beneficiaries; and procurement officers using purposive sampling technique. This means that all persons in the population of the study had the same chance of being chosen for study participation.

Data collection methods consists of Interviews, observation and self-distributed questionnaire that was comprised of open and closed ended questions that was asked respondents to questions. Secondary data was obtained from textbooks, District Development Plan (DDP) reports, website, online journalists and other written documents related to research topics.

### 4.0 Findings and Discussion

#### Demographic characteristic of the respondents

This study covers gender, marital status, age group and education level of the respondents who have been considered.

**Table 1: Gender equality**

	Frequency	Percentage
Male	245	62.0
Female	151	38.0
Total	396	100.0

**Source: Primary data, 2023**

The table 1 indicates the gender equality as an important fact to establish in the research work. The results find out that the majority 62% was male and 38% were female. This result means that in Bwishyura sector both male and female participated in strategic planning in their sector which will impact them positively in their health condition. This is a significant number comparing to the previous years in Rwanda about gender equality in all sectors of activities.

*Age group of the Respondents*

The age group is also an important part to establish in any research to clarify the range of age among respondents; this is because the more the respondents are different the more their answers will be different.

**Table 2: Age Group**

	Frequency	Percentage
20 -30 years	8	2.1
31- 40 years	307	77.5
Over 41 years	81	20.4
<b>Total</b>	<b>396</b>	<b>100.0</b>

**Source: Primary data, 2023**

The table 2 shows the age group of the respondents, where the majority was ranging between (31-40) years old who covers 77.5%, followed by the people with 41 years and above which were represented by 20.4% and finally 2.1% of the total respondents means that in Bwishyura sector there are different categories of age group in different cells to participate in the sample size of this research activities.

*Marital status of the respondents*

The marital status identification in the research helped the researcher to know more about the livelihood of the respondents and their family situation.

**Table 3: Marital status**

	Frequency	Percentage
Married	288	72.7
Single	95	23.9
Widow	13	3.7
<b>Total</b>	<b>396</b>	<b>100.0</b>

**Source: Primary data, 2023**

The table 3 showed that 72.7% of the total respondents were married, 23.9% were single, 3.7% were widow. This is because most of married couples are the one who attributed the highest responsibilities in every public institution and in any other institutions because they have a permanent address and they are capable to handle their tasks with commitment and due diligence.

*Education background of the respondents*

The following table indicates academic background of the respondent which allowed the researcher to find out their level of understanding of the selected respondents through the questionnaire.

**Table 4: Education Level**

	Frequency	Percentage
PhD	2	0.5
Masters	40	10.1
University	350	88.3
Secondary	4	1.1
<b>Total</b>	<b>396</b>	<b>100.0</b>

**Source: Primary data, 2023**

In analyzing the strategic plan implementation on health condition promotion, education level is an essential element to take into consideration. As illustrated in the table 4.4 the highest number of the respondents 88.3% have bachelor’s degree, 10.1% have Master’s Degree, 1.1% have diploma and 0.5% have PhD which implies that the people involved in this study are intellectual, they could read, understand and interpret questionnaire reliably. And they all had some knowledge about the purpose of strategic planning implementation factors to their health condition.

*Experience of the respondents*

The respondents’ experience allows the researcher to assume the high level of the acceptance of the results find from the field. The following table demonstrates how many years of experience that the respondents have in Bwishyura Sector.



**Table 5: Experience**

	Frequency	Percentage
1 Year	15	4.0
2 Years	40	10.1
3 Years	91	22.9
4 Years and above	159	40.1
<b>Total</b>	<b>396</b>	<b>100.0</b>

**Source: Primary data, 2023**

According to the results in the table 5, it showed that the majority of the respondent 40.1% had 4 years and above of experience, 22% of the respondents had three years, 10.1% had two years and 4% had one year of working experience. These results show that the population had been working within BWISHYURA Sector for a couple of years, which makes them good respondents of this research.

#### 4.1 Descriptive Analysis

Descriptive statistics of strategic leadership on promotion of health condition

**Table 6: Skewness and Kurtosis test for strategic leadership**

Strategic leadership	N	Mean	Std. Deviation	Skewness		Kurtosis	
				Statistic	Std. Error	Statistic	Std. Error
I tell other persons in simple terms about their expectation about their work	396	3.9700	.17145	-5.595	.241	29.898	.478
I tell other persons in simple terms about their expectation about their work	396	3.9600	.19695	-4.767	.241	21.144	.478
I assist people to find solutions about their critical issues	396	3.9500	.21904	-4.193	.241	15.896	.478
I am content when personnel achieved their expected targets	396	3.9400	.22000	-4.050	.241	14.500	.478
I want to help them to ameliorate their working abilities	396	3.9100	.22500	-4.010	.241	14.100	.478

**Source: Primary data, 2023**

The table 6 demonstrates the descriptive statistics for Strategic leadership on the promotion of health condition of the population in Bwishyura sector. Specifically, the table indicates the mean and the two tests indicating how the data are connected in terms of peaks. From the table, the mean appeared to be in the range between 3.91 and 3.97 indicating a short different in the mean of 0.03. The shorter the different in the mean, the closer the mean are associated. The real meaning with this interval shows how the factors of strategic leadership are closely

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related toward each other starting with the first factor “does leadership a key indicator of promotion of health condition?”. Next to standard deviation, the test for skewness and kurtosis is indicated. Starting with kurtosis, the test indicated that the range in kurtosis started with 14.10 up to 29.89. We notice that the range remains in a positive range. As a rule of thumb, once the values of kurtosis are always positive we conclude on the presence of the peaks and the data are too peaked. Next, skewness indicated on a negative range starting with -5.59 up to -4.010. The researcher has confirmed that there is a non-negotiable relationship between the factors indicating the relationship between strategic leadership on the promotion of health conditions of the population of Bwishyura sector.

Descriptive statistics of organisational structure on promotion of health condition

**Table 7: Skewness and Kurtosis test for organisational structure**

Organizational structure	N	Mean	Std. Deviation	Skewness		Kurtosis	
				Statistic	Std. Error	Statistic	Std. Error
The district organizational structure is in place and all employees are in place	396	3.9800	.14071	-6.962	.241	47.418	.478
Annual works plans and M&E plans are available and used	396	3.9800	.14071	-6.962	.241	47.418	.478
Performance appraisal indicators are in place	396	3.9600	.19695	-4.767	.241	21.144	.478

**Source: Primary data, 2023**

The table 7 demonstrates the descriptive statistics for organisational structure on promotion of health condition of the population of Bwishyura sector in Karongi District, the table indicates the mean and the two tests indicating how the data are connected in terms of peaks. From the table, the mean appeared to be in the range between 3.96 and 3.98 indicating a short different in the mean of 0.03. The shorter the different in the mean, the closer the mean are associated. The real meaning with this interval shows how the factors of organisational structure are closely related toward each other starting with the first factor “does organisational structure a key indicator of health condition promotion?”. Next to standard deviation, the test for skewness and kurtosis is indicated. Starting with kurtosis, the test indicated that the range in kurtosis started with 21.14 up to 47.41. We notice that the range remains in a positive range. As a rule of thumb, once the values of kurtosis are always positive we conclude on the presence of the peaks and the data are too peaked. Next, skewness indicated on a negative range starting with -6.96 up to -4.76. The researcher has confirmed that the data has a flat distribution and there is a non-negotiable relationship between the organisational structures on the promotion of health condition.

**Descriptive statistics of human resource on the promotion of health condition**

According to the table 3, the descriptive statistics for human resource is indicated. As key considerations, the table indicates the mean, standard deviations, skewness and kurtosis indicating how the data are connected in terms of peaks or being skewed. Additionally, the skewness indicated if the data are formed by peaks or they make a flat distribution.

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Interpreting the table, the mean appeared to be in the range between 3.98 and 3.97 starting with the factor. The shorter difference in the mean indicated how they are closely related.

**Table 8: Descriptive statistics of human resource**

Human resource	N	Mean	Std. Deviation	Skewness		Kurtosis	
				Statistic	Std. Error	Statistic	Std. Error
I work hard to ameliorate the level of success	396	3.9800	.14071	-6.962	.241	47.418	.478
I appreciate opinions from workmates on the way to ameliorate the level of success	396	3.9700	.17145	-5.595	.241	29.898	.478
I work hard to achieve excellence and to get rewards.	396	3.9700	.17145	-5.595	.241	29.898	.478

**Source: Primary data, 2023**

The table 8 demonstrates the test for skewness and kurtosis with the descriptive statistics for human resource and promotion of health condition of the population of Bwishyura sector. Specifically, the table indicates the mean and the two tests indicating how the data are connected in terms of peaks. From the table, the mean appeared to be in the range between 3.98 and 3.97. The shorter the difference in the mean, the closer the factors are associated. The real meaning with this interval shows how the factors of human resource and education on health condition are closely related toward each. Next to standard deviation, the test for skewness and kurtosis is indicated. Starting with kurtosis, the test indicated that the range in kurtosis started with 47.41 up to 28.89. We notice that the range remains in a positive range. As a rule of thumb, once the values of kurtosis are always positive we conclude on the presence of the peaks and the data are too peaked. Next, skewness indicated on a negative range starting with -5.59 and -6.96. The researcher has confirmed that the data has a flat distribution and there is a non-negotiable relationship between the factors of human resource activities and health condition promotion.

**Descriptive statistics of promotion of health condition in Bwishyura sector**

**Table 9: Descriptive statistics of promotion of health condition**

Human resource	N	Mean	Std. Deviation	Skewness		Kurtosis	
				Statistic	Std. Error	Statistic	Std. Error
Level of nutrition change	396	3.9500	.14071	-6.962	.241	47.418	.478
Health infrastructures	396	3.9200	.17145	-5.595	.241	29.898	.478
Physical fitness of the citizens	396	3.9200	.17145	-5.595	.241	29.898	.478
Life expectancy of the citizens	396	3.9100	.18000	-5.200	2.41	27.250	.478

**Source: Primary data, 2023**

Referring to the table 9, the descriptive statistics for economic activities is indicated. As key considerations, the table indicates the mean, standard deviations and the two tests indicating how the data are connected in terms of peaks. The skewness indicated if the data are formed by peaks or they make a flat distribution. As a simple analysis, the mean appeared to be in the range between 3.95 and 3.91 indicating how closer the factors of human resource activities are related. The test for skewness and kurtosis were also carried out. On the side of Kurtosis, the test indicated that the range in kurtosis started with 27.25 up to 47. We notice that the range remains in a positive range. Overall, once the values of kurtosis positive, the researcher affirms that the data sample include peaks meaning that they are too peaked. But again, the test for skewness indicated on a negative range starting with -6.96 up to -5.20. Therefore, the data indicated a flat distribution. In a nutshell, the researcher has confirmed on the existing relationship between the human resource activities.

#### 4.2 Correlation Analysis

Pearson coefficient of correlation is a method which was used for measuring the degree relationship between two variables. This coefficient enabled to assume that there is linear relationship between the two variables, that the two variables are casually related which means one of the variables is independent and other one is dependent; and a large number of independent causes are operating in both variables so as to produce a normal distribution. In a sample it is denoted by and is by  $r_s$  design constrained as follows:  $-1 \leq r_s \leq 1$  Table 5: Correlation matrix of strategic plan implementation on health condition promotion.

**Table 10: Correlation Matrix**

	Health condition promotion of Bwishyura sector	Strategic leadership	Organizational structure	Human resource
Health condition promotion of Bwishyura sector	1			
Strategic leadership	.571**	1		
Organizational structure	.394**	.326**	1	
Human resource	.704**	.247**	.431*	1

\* Correlation is significant at 0.5 level (2-tailed)  
 \*\* Correlation is significant at 0.01 level (2-tailed)

**Source: Primary data, (2023)**

Analysing the Table 10, the correlation analysis of strategic plan implementation factors on health condition promotion was demonstrated. The results indicated that p value on which we based on while correlating the two variables. The correlation between two variables that is strategic plan implementation and health condition promotion and of Bwishyura sector. The Pearson correlation obtained was estimated to 0.571 indicating a positive index and a positive correlation linking the two variables. The “sig.value” indicating that the value is less than 0.05 (Note that the SPSS output always indicate a value less than 0.005 as 0.000). the p value was 0.000 (2-tailed). Therefore, this indicates a strong positive relationship existing between strategic leadership and health condition promotion of the population in Bwishyura sector. The researcher proved that there is a relationship existing between the two factors of the study as the variables were significant.

As the table 1. Exhibit, the correlation analysis of organisational structure on health condition promotion is shown. The results indicated that p value on which we based on while correlating the two variables. The correlation between two variables that is organisational structure on health condition promotion of Bwishyura sector was estimated at 0.394. This Pearson correlation obtained was estimated to 0.394 indicating a positive correlation linking the two variables. The “sig.value” indicating that the p value is less than 0.05 (Note that the SPSS output always indicate a value less than 0.005 as 0.000). The p value was 0.000 (2-tailed). Therefore, this indicates that there is a positive relationship existing between organisational structure and health condition promotion of the population in Bwishyura sector. Carefully, the experimenter has proved that there is a relationship existing between the two factors of the study as the variables were significant.

The correlation analysis of human resource on the health condition promotion was tested. The results indicated that p value on which we based on while correlating the two variables was higher and positive. The correlation between two variables that is human resource and the health condition promotion of the population in Bwishyura sector was demonstrated by the Pearson correlation estimated to 0.704\*\* indicating a higher positive correlation linking the two variables. The “sig.value” indicating that the value is less than 0.05 (Note that the SPSS output always indicate a value less than 0.005 as 0.000). The p value was 0.000 (2-tailed). All in all, this indicates a strong positive relationship existing between human resource and the health condition promotion of the population in Bwishyura sector. In a nutshell, the researcher has proved that there is a relationship existing between the two factors of the study as the variables were significant.

#### 4.5 Descriptive statistics analysis

The main role of descriptive statistics is simply to act as the centre for controlling and analysing the data collected from field. Thanks to the definition provided by Bhandari (2021), descriptive statistics organize the data of collected responses. It basically focuses on statistical analysis and calculate on the average of variables. The disadvantage of descriptive statistics is that it does not allow decision making and needs generalization for large samples. The test for skewness and kurtosis helped in determining whether the data we have are substantially distributed or create some peaks among themselves. This could also help in determining the potentiality between variables and factors especially occurring between the main variables of the study. Therefore, the data have been presented in form of tables which could easily allow decision making and concluding on the variables.

## 5.0 Conclusion

According to the results presented in chapter four of this research work, with different test that the researcher used, they showed that there is correlation of the research variables. Where the researcher find out that the strategic leadership, organisational structure and human resource were highly correlated to the health condition promotion of the population of Bwishyura sector in Karong District. During the interview with the respondents, they showed that they were different results of the plan implemented by Bwishyura sector like giving them the fertilizers, electricity lines were constructed, hotels and other commercial buildings were constructed, they constructed water supply system of 324 km and others were upgraded. This planning of Bwishyura sector helped the population to step forward to change their health conditions that they were lived. All of these assumption of the respondents from the population of Bwishyura sector in Karongi district were helped the research to conclude that

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the strategic plan implemented were contributed positively to the health condition of the population of Bwishyura sector.

## 6.0 Recommendations

Due to the limited scope of study, the above results were considered even though we have also elaborated on some further recommendations to consider. These recommendations could be worked on based on the study of the findings or any other related information that the researcher possess orally. As a matter of fact, we recognized a gap in our study and that is why we would like to point out some recommendations.

There is a need in considering how strategic plan implemented in other sectors of Karongi district. In fact, some of the respondents claimed that different sectors of karongi district were bad performed in in imihigo record. One of the respondents said that she spent almost a whole at one of the branches of sector of karongi district when he went there to ask birth certificate, which was bad. This might indicate another side of other sectors in karongi district's behaviour in terms of customers' management and care. However, this need in rapidity should depend on other factors including effective customer management and the availability of tools to support a quick delivery of services to the population.

The increase in population requires all sectors in karongi district to work harder so as to be able to satisfy the number of population available on this globe. This will be possible only by adopting the culture of using modern technology in serving customers. There is a need in providing enough technology and machines to different sectors in karongi district for them to be able to run services quickly.

The gap that existed in this study was due to the time scope, geographical limitation, and the concentration on our specific objectives to deliver effective interpretations. The main objective of this study was to strategic plan implementation factors affected health conditions promotion in Rwanda, especially in Bwishyura Sector. Therefore, we recommend other further studies to be done and concentrate on the following: Future studies should work on the contribution of local government in improving global economy. To find out how the influence of population increase and poor technology contribute to the delay in services and customer in other sectors of karongi districts.

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