

Building capacity for plant clinic performance monitoring

SOLVEIG DANIELSEN*¹, FLORENCE CHEGE§ and JAMES WANJOHI†

**CABI, Leusden, The Netherlands; §CABI, Nairobi, Kenya; †Ministry of Agriculture, Livestock and Fisheries, Nairobi, Kenya*

Background and purpose

Performance monitoring of agricultural extension is weak in many developing countries. Monitoring is often done haphazardly and mostly for accountability purposes, less so for learning and decision-making. Extension providers tend to regard monitoring as something done by ‘others’ for bosses and donors. Yet, ability to monitor own performance is a key element of institutional capacity (Simister and Smith, 2010). Plant clinics are currently being implemented in 34 countries across Africa, Asia and Latin America with the support from CABI’s Plantwise programme. The purpose of Plantwise is to improve plant health extension and to strengthen the links between other key actors in plant health. As part of its institutional strengthening strategy, Plantwise aims to build capacity of extension agencies to monitor performance of their own plant clinics. One component of this effort is a 3-day training course for extension agents where plant doctors (extension agents) and their supervisors learn principles of supportive and self-critical monitoring as a means to improve learning, accountability and decision-making at different levels. The purpose of this case study is to assess the trainees’ perception of the course and the preliminary effects on organisational practices.

Case description

The course Monitoring Plant Clinic Performance (MPCP) is largely based on discovery learning and a simple and intuitive sequence of: plan – do – reflect – act (Danielsen and Kelly, 2010). Simple tools for plant clinic observation, data analysis and plant doctor self-assessment are practiced. At the end of the course monitoring plans are outlined for future implementation. The course was implemented in Uganda, Kenya, India, Cambodia, Trinidad and Sri Lanka in 2014-15, including a total of 164 trainees, mainly plant doctors and their supervisors. A post-course evaluation questionnaire was administered to assess relevance, perceived value and applicability of the acquired knowledge and skills. Part of the questionnaire used a scale from 1 (low) to 5 (high) to quantify responses and another part captured a qualitative assessment. A preliminary follow-up survey was carried out with 26 Kenyan trainees 6 months after the course to assess to what degree new monitoring practices have been implemented and to identify factors affecting uptake.

¹ *Correspondent author:* Solveig Danielsen CABI Kastanjelaan 5, 3833 AN Leusden, The Netherlands; s.danielsen@cabi.org

Results and discussion

The quantitative post-course evaluation questions received high average scores varying from 3.9 to 4.6 on a 1 – 5 scale² (Table 1). The trainees (106 respondents) mentioned several eye-opening aspects of the course, including the logic sequence introduced and the opportunity to practice simple methods in a systemic and focused way. The course helped de-mystifying monitoring and many trainees acknowledged the value of critical self-assessment for improved performance and decision-making. Having both field staff and their supervisors on board revealed that they all have a role to play in performance monitoring.

Table 1. Post-course evaluation of the Monitoring Plant Clinic Performance course. Average scores from Kenya, India, Cambodia, Trinidad and Sri Lanka (n=106).

Evaluation question	Av. score
1. I learned new knowledge/skills from the course	4.6
2. I am confident in my ability to use the knowledge/skills learned from the course	4.4
3. The course was relevant to my work	4.6
4. To what extent will you apply the knowledge/skills learned during the course?	4.2
5. How will the knowledge/skills learned influence your job performance?	4.3
6. How critical is the use of the content of this course to the success of your job?	3.9

^a Scale from 5 (strongly agree/high extent/very critical) to 1 (strongly disagree/low extent/very critical)

Despite the positive feedback, around 27% of the respondents declared that ‘systems and processes will not support application’ and 15% mentioned that ‘insufficient knowledge and understanding’ would prevent them from using the knowledge/ skills learned. Insufficient resources were mentioned by 11% as a key obstacle to application of knowledge (Table 2).

Table 2. Predicted obstacles to uptake as perceived by trainees. Post-course evaluation of the Monitoring Plant Clinic Performance course carried out in six countries (n=106).

Predicted obstacle	% respondents
Systems and processes will not support application	27
Insufficient knowledge and understanding	15
Insufficient resources	11
No opportunity to use the skills	10

² 5 = strongly agree/high extent/very critical; 1 = strongly disagree/low extent/very critical

The rapid follow-up survey carried out among Kenyan trainees 6 months after the course gave a mixed, but mainly positive, picture about the implementation of new monitoring practices. The positive perception of the methods and principles persisted to a large extent (Table 3). The monitoring plans were being implemented in more than half of the sub-counties (58%). The majority reported that the tools and methods were easy to use and that the monitoring was helping to improve performance and decision-making (72 and 84%, respectively) as well as self-awareness (see Box 1). Although the results presented here are preliminary and based on a small sample, they show positive trends in terms of commitment and ownership among the Kenyan plant clinic implementers. A sign of ownership is that some of the tools taught at the course have been adjusted to better fit the local context and Kenyan priorities.

Box 1. Good monitoring can help improve responsiveness

A sub-county coordinator from Kajiado North told that she became aware of a locust problem in the area through the plant clinic monitoring activities. She contacted Kenya Agricultural and Livestock Research Organisation (KALRO) for help. KALRO in turn contacted Plant Protection Service Division of the Ministry of Agriculture which quickly helped to identify the pest and gave the county possible management options.

On the other hand, lack of funds to carry out monitoring was by far the most frequently mentioned obstacle (76%) to implementation. Lack of staff/ skills and mismatch with normal work routines were each mentioned by 25% of the respondents.

Table 3. Results (% of responses) of rapid survey with Kenyan trainees 6 months after the MPCP course (n=26)

Topic	Disagree	Neutral/ not sure	Agree
Monitoring plan			
The monitoring plan prepared at the course is being implemented	24	16	60
The plan has been endorsed by our senior managers	27	27	46
The roles in plant clinic monitoring are clear	4	4	92
It is clear how the information will be used	4	15	81
Monitoring tools and methods			
We are using all the monitoring methods we learned at the course	19	15	65
All the monitoring methods and tools are easy to use	4	16	80
The working context			
We have the necessary staff and skills to do the monitoring	25	4	71
We have the necessary funds to do the monitoring	76	20	4
The plant clinic monitoring fits well with our normal routines	24	20	56
Outcomes			
Monitoring is helping to improve our plant clinic performance	4	12	84
Monitoring is helping to improve decision making	8	20	72
We are much more aware of how we are working now	4	13	83

Additional comments highlighted that lack of incentives and limited interest from senior managers (10%, data not shown) added to the difficulties of embedding performance monitoring into the organisational routines. Kenya is facing a particular challenge at the moment due to the ongoing decentralisation reform. Staff is frequently rotated between sub-counties and positions and it is still not clear how agricultural extension will be managed and financed in the future. Another issue that requires attention is the general risk that development interventions create parallel monitoring and information management systems to meet the needs of individual donors (Braa et al., 2012).

Implications

Breaking deep-rooted perceptions and institutional practices around monitoring is a challenge. Monitoring is frequently understood as ‘policing’ carried out for managers or donors by external ‘experts’. The MPCP course is a first step in breaking this notion by broadening the scope and nature of monitoring. Despite positive preliminary results in terms of attitude and changed practices, the Kenyan experience also revealed significant hurdles such as staff instability, insufficient funding and uncertainty about future management structures. What additional steps are needed to establish better monitoring practices of extension agencies in different country contexts will require further exploration and close attention to contextual factors such as the policy and institutional environment as well as the influence of donor funded programmes.

References

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