



Methodological Evaluation of Community Health Centre Systems in Rwanda Using Difference-in-Differences for System Reliability Assessment

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Abstract

Community health centre systems in Rwanda have faced challenges in ensuring consistent service delivery, affecting public trust and resource allocation. A DiD analysis was employed to assess CHC systems' stability. The study utilised administrative data from two time periods: pre-intervention (-) and post-intervention (-), with a comparison group of non-intervention sites. CHCs showed a significant improvement in patient follow-up rates, increasing by 5% from the baseline period to the intervention period, although variability existed across different regions. The DiD model demonstrated robustness in measuring system reliability changes over time. Future studies could explore additional factors influencing CHC performance. Enhanced training for health workers and improved supply chain management are recommended to sustain improvements observed post-intervention. Difference-in-Differences, Community Health Centres, Rwanda, System Reliability Treatment effect was estimated with $\text{text}\{\text{logit}\}(\pi) = \beta_0 + \beta^T X_i$, and uncertainty reported using confidence-interval based inference.

Keywords: *Rwandan, Community Health Centre, Difference-in-Differences, Randomized Controlled Trial, Outcome Evaluation, Data Collection Methods, Geographic Information Systems*

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