



Implementation and Sustainability of Mobile Health Clinics in Kigali, Rwanda: A Meta-Analysis

Kabuye Huchu¹, Nyamwanga Rugamba^{1,2}

¹ Rwanda Environment Management Authority (REMA)

² Department of Clinical Research, University of Rwanda

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Correspondence: khuchu@hotmail.com

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Author notes

Kabuye Huchu is affiliated with Rwanda Environment Management Authority (REMA) and focuses on Medicine research in Africa.

Nyamwanga Rugamba is affiliated with Rwanda Environment Management Authority (REMA) and focuses on Medicine research in Africa.

Abstract

Mobile health clinics have been implemented in Rwanda to serve marginalized communities, addressing healthcare access barriers. A systematic review approach was employed using electronic databases for studies conducted. Studies were selected based on predefined inclusion criteria including sample size, study design, and outcome measures relevant to implementation and sustainability. Mobile health clinics reported a significant improvement in healthcare utilization among marginalized populations ($p < 0.05$), with an estimated effect size of 1.2 for increased clinic attendance over traditional settings. The findings suggest that mobile health clinics are effective in enhancing access to healthcare services, particularly for underserved communities. Future research should explore long-term sustainability strategies and the scalability of mobile health models across different contexts. Mobile Health Clinics, Marginalized Communities, Implementation Effectiveness, Sustainability Analysis Treatment effect was estimated with $\text{text}\{logit\}(\pi) = \beta_0 + \beta^{-1} p X_i$, and uncertainty reported using confidence-interval based inference.

Keywords: *African health systems, mobile clinics, implementation science, sustainability analysis, marginalized populations, randomized controlled trials, qualitative synthesis*

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