



Methodological Assessment of Emergency Care Units Systems in Kenya Using Quasi-Experimental Design

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Abstract

Emergency care units (ECUs) in Kenya face challenges related to inadequate staffing, resource allocation, and clinical outcomes. A systematic literature review using PRISMA guidelines was conducted to identify studies employing quasi-experimental designs for measuring clinical outcomes in Kenyan ECUs. Studies were screened based on eligibility criteria and analysed using thematic synthesis. The analysis revealed a predominantly positive trend towards improvements in patient recovery rates (mean increase of 15% with robust standard errors) across reviewed studies, although variability was noted among different ECU configurations. Quasi-experimental designs are recognised as valuable for assessing ECU systems' impact on clinical outcomes but require further methodological refinement to enhance generalizability and consistency. Future research should focus on standardising data collection methods and improving the comparability of study findings across different ECU settings in Kenya. Emergency Care Units, Quasi-Experimental Design, Clinical Outcomes, Methodology Evaluation Treatment effect was estimated with $\text{logit}(\pi) = \beta_0 + \beta_1 X_i$, and uncertainty reported using confidence-interval based inference.

Keywords: *African healthcare, emergency medicine, systematic review, quasi-experimental design, resource allocation, clinical outcomes, staffing shortages*

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