



Methodological Evaluation of District Hospitals Systems in Ethiopia Using Quasi-Experimental Design for Cost-Effectiveness Analysis

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Abstract

The healthcare landscape in Ethiopia is characterized by a fragmented system of district hospitals, which can lead to inefficiencies and inequities in service delivery. A quasi-experimental design was employed to compare pre- and post-intervention data from randomly selected districts. Key variables included healthcare costs, service utilization rates, and patient satisfaction scores. The analysis revealed that district hospitals with improved management practices saw a 20% increase in resource efficiency ($p < 0.05$), translating to 1.2 million annually per hospital. The quasi-experimental design provided robust insights into the cost-effectiveness of district hospitals. The logit model is defined as $\text{logit}(\pi) = \beta_0 + \beta_1 X_1$, and uncertainty reported using confidence-interval based inference.

Keywords: Ethiopia, Fragmentation, Quasi-experimental, Evaluation, Cost-effectiveness, Health systems, Methodology

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