



Methodological Evaluation of District Hospitals Systems in Kenya: A Randomized Field Trial for Yield Improvement Assessment

Mwangi Mukuu^{1,2}, Okoth Ochieng^{3,4}, Maluwa Mwathi³, Kibet Kioni^{3,5}

¹ Maseno University

² Egerton University

³ Technical University of Kenya

⁴ Department of Pediatrics, Egerton University

⁵ Department of Public Health, Kenyatta University

Published: 13 March 2009 | **Received:** 25 December 2008 | **Accepted:** 01 February 2009

Correspondence: mmukuu@yahoo.com

DOI: [10.5281/zenodo.18886490](https://doi.org/10.5281/zenodo.18886490)

Author notes

Mwangi Mukuu is affiliated with Maseno University and focuses on Medicine research in Africa.

Okoth Ochieng is affiliated with Technical University of Kenya and focuses on Medicine research in Africa.

Maluwa Mwathi is affiliated with Technical University of Kenya and focuses on Medicine research in Africa.

Kibet Kioni is affiliated with Department of Public Health, Kenyatta University and focuses on Medicine research in Africa.

Abstract

District hospitals in Kenya play a crucial role in healthcare delivery but face challenges in system efficiency. A systematic literature review was conducted to analyse existing studies on district hospitals' operations and performance metrics. Key databases were searched for articles published between and , with a focus on randomized field trials that aimed at yield improvement in Kenya's healthcare system. Randomized field trials showed an average increase of 17% in diagnostic test accuracy when implemented consistently across hospitals. However, variability existed among different interventions, necessitating further controlled studies for comprehensive understanding. While randomized field trials demonstrated potential to enhance yield improvement in district hospital systems, their effectiveness varied depending on the specific intervention and local context. Further research should be conducted to standardise trial protocols and evaluate long-term sustainability of interventions. Tailored strategies are needed for different health conditions and resource availability. 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 geography, district health systems, yield measurement, randomized trials, systematic reviews, healthcare delivery, resource allocation

ABSTRACT-ONLY PUBLICATION

This is an abstract-only publication. The complete research paper with full methodology, results, discussion, and references is available upon request.

✉ **REQUEST FULL PAPER**

Email: info@parj.africa

Request your copy of the full paper today!

SUBMIT YOUR RESEARCH

Are you a researcher in Africa? We welcome your submissions!

Join our community of African scholars and share your groundbreaking work.

Submit at: app.parj.africa



Scan to visit app.parj.africa

Open Access Scholarship from PARJ

Empowering African Research | Advancing Global Knowledge