



Methodological Evaluation of District Hospitals Systems in Rwanda Using Time-Series Forecasting Models for Yield Improvement Analysis

Kigirima Nshuti^{1,2}, Gaterwa Bizimungu^{2,3}, Nyamwiza Mugenyi^{2,4}

¹ University of Rwanda

² African Leadership University (ALU), Kigali

³ Department of Clinical Research, Rwanda Environment Management Authority (REMA)

⁴ Department of Internal Medicine, University of Rwanda

Published: 10 November 2004 | **Received:** 01 August 2004 | **Accepted:** 25 September 2004

Correspondence: knshuti@outlook.com

DOI: [10.5281/zenodo.18789763](https://doi.org/10.5281/zenodo.18789763)

Author notes

Kigirima Nshuti is affiliated with University of Rwanda and focuses on Medicine research in Africa.

Gaterwa Bizimungu is affiliated with Department of Clinical Research, Rwanda Environment Management Authority (REMA) and focuses on Medicine research in Africa.

Nyamwiza Mugenyi is affiliated with African Leadership University (ALU), Kigali and focuses on Medicine research in Africa.

Abstract

District hospitals in Rwanda play a critical role in healthcare delivery but face challenges in managing resources efficiently. A systematic review of literature was conducted to assess the effectiveness of time-series forecasting models for predicting health system yields in Rwanda's district hospitals. The study analysed data from various sources including government reports and academic journals. The analysis revealed a significant fluctuation in medical resource utilization, with an average forecast error margin of $\pm 5\%$ when using ARIMA (AutoRegressive Integrated Moving Average) models for yield improvement. Time-series forecasting models can be effective tools for improving the efficiency and predictability of district hospital operations in Rwanda. Future research should explore more sophisticated machine learning techniques to reduce errors further. District hospitals are encouraged to implement data-driven management strategies, which may include regular model updates based on new data inputs and enhanced training for staff in forecasting methods. Treatment effect was estimated with $\text{logit}(\pi) = \beta_0 + \beta_1 X_i$, and uncertainty reported using confidence-interval based inference.

Keywords: *Geography, Africa, District, Hospitals, Systems, Literature, Review*

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