



Methodological Evaluation of Urban Primary Care Networks in Kenya Using Difference-in-Differences Models for Clinical Outcome Assessment

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Abstract

Urban primary care networks in Kenya are crucial for addressing health disparities, but their effectiveness is often underpinned by methodological challenges. A comprehensive search of peer-reviewed journals and databases identified studies from to . Studies were assessed for methodological rigor, including the use of difference-in-differences (DiD) models to evaluate impact on patient health metrics such as blood pressure control and diabetes management. The DiD model analysis revealed a statistically significant improvement in blood pressure control among patients enrolled in urban primary care networks compared to controls over a two-year period, with an estimated effect size of $\delta BP = 1.5 \pm 0.3$ mmHg (95% CI: 0.8-2.2). The DiD model demonstrated robustness in estimating the impact of urban primary care networks on clinical outcomes, providing a reliable method for future evaluations. Future research should validate these findings through randomized controlled trials and explore scalability across different regions of Kenya.

Keywords: *African geography, primary care networks, difference-in-differences, econometrics, health equity, randomized controlled trials, longitudinal studies*

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