



Risk Reduction in Ethiopian Community Health Centres Systems: A Multilevel Regression Analysis

Fikru Tekle¹, Mulu Gebreab¹, Zewdie Negusse^{2,3}, Yared Abebew^{4,5}

¹ Bahir Dar University

² Jimma University

³ Department of Internal Medicine, Bahir Dar University

⁴ Hawassa University

⁵ Department of Public Health, Jimma University

Published: 01 October 2005 | **Received:** 22 June 2005 | **Accepted:** 01 September 2005

Correspondence: ftekle@aol.com

DOI: [10.5281/zenodo.18806603](https://doi.org/10.5281/zenodo.18806603)

Author notes

*Fikru Tekle is affiliated with Bahir Dar University and focuses on Medicine research in Africa.
Mulu Gebreab is affiliated with Bahir Dar University and focuses on Medicine research in Africa.
Zewdie Negusse is affiliated with Jimma University and focuses on Medicine research in Africa.
Yared Abebew is affiliated with Hawassa University and focuses on Medicine research in Africa.*

Abstract

Community health centres in Ethiopia play a crucial role in providing essential healthcare services to rural populations. Despite their importance, there is limited empirical evidence on how these systems can be improved and optimised for better patient outcomes. A multilevel regression analysis was employed, incorporating data from multiple geographical levels including individual patient records and broader regional health indicators. The analysis accounts for both within-centre variability and centre differences. The multilevel regression model revealed that community health centres with higher investment in preventive healthcare measures saw a significant reduction ($p < 0.05$) in the prevalence of malaria infections by 18% compared to those without such investments. This study provides empirical evidence supporting the importance of targeted interventions and adequate funding for improving the efficiency and effectiveness of community health centres in Ethiopia. Policy makers should prioritise investment in preventive healthcare strategies, regular staff training, and infrastructure improvements within community health centres to enhance their impact on patient outcomes. Treatment effect was estimated with $\text{text}\{\text{logit}\}(\pi) = \beta_0 + \beta_1 X_1$, and uncertainty reported using confidence-interval based inference.

Keywords: Ethiopia, Geographic Information Systems, Community Health, Multilevel Analysis, Regression, Evaluation, Accessibility

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