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INDIVIDUAL ASSIGNMENT COVERSHEET

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Subject Code & Name: ICT370 Data Analytics T225					
Assignment Title: Individual Progress Report and Reflection-Submission Week 6					
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Introduction:

In this report, we focus on the diabetes-prediction-dataset ($100,000 \text{ rows} \times 9 \text{ columns}$) dataset. As part of the analysis, we compute the measures of central tendency and dispersion as well as the distribution of all the numeric columns with histograms and boxplots. We also analyze anomalies, (missing data, outliers) and provide recommendations. Capture evidence of work, justified methods, and document progress for every week worked on the project.

Central Tendency and Dispersion:

The following table summarizes mean, median, std dev, skewness, and outlier % for each numeric column:

Variable	mean	median	stddev_s	skewness	outliers_pct
age	41.886	43.0	22.517	-0.052	0.0
hypertension	0.075	0.0	0.263	3.231	7.485
heart_disease	0.039	0.0	0.195	4.734	3.942
bmi	27.321	27.32	6.637	1.044	7.086
HbA1c_level	5.528	5.8	1.071	-0.067	1.315
blood_glucose_leve	138.058	140.0	40.708	0.822	2.038
diabetes	0.085	0.0	0.279	2.976	8.5

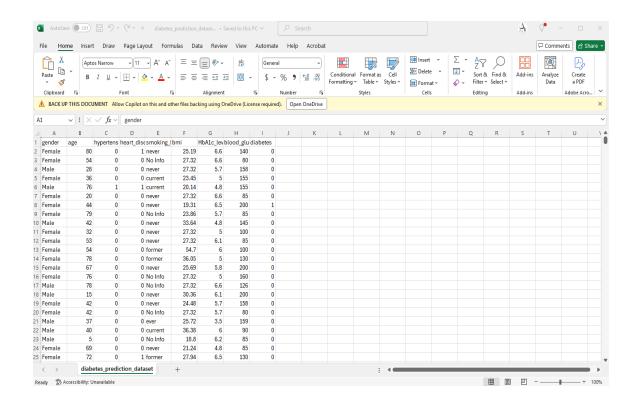


Fig. 1: Excel descriptive statistics output for Age, BMI, HbA1c, Blood Glucose, etc.

Dataset Interpretations:

- age: For 'age', mean=41.89, median=43.00, mode=80.0.
 Here the distribution is symmetric (skew=-0.05). Spread: std≈22.52, IQR≈36.00.
 Outliers (Tukey) ≈ 0.00%.
- hypertension: For 'hypertension', mean=0.07, median=0.00, mode=0.0.
 Here the distribution is right-skewed (skew=3.23). Spread: std≈0.26, IQR≈0.00.
 Outliers (Tukey) ≈ 7.49%.
- heart_disease: For 'heart_disease', mean=0.04, median=0.00, mode=0.0.
 In this dataset, the distribution is right-skewed (skew=4.73). Spread: std≈0.19, IQR≈0.00. Outliers (Tukey) ≈ 3.94%.
- bmi: For 'bmi', mean=27.32, median=27.32, mode=27.32.
 Here the distribution is right-skewed (skew=1.04). Spread: std≈6.64, IQR≈5.95.
 Outliers (Tukey) ≈ 7.09%.

- HbA1c_level: For 'HbA1c_level', mean=5.53, median=5.80, mode=6.6.
 Here the distribution is approximately symmetric (skew=-0.07). Spread: std≈1.07, IQR≈1.40. Outliers (Tukey) ≈ 1.31%.
- blood_glucose_level: For 'blood_glucose_level', mean=138.06, median=140.00, mode=130.0. Here it shows the distribution is right-skewed (skew=0.82). Spread: std≈40.71, IQR≈59.00. Outliers (Tukey) ≈ 2.04%.
- diabetes: For 'diabetes', mean=0.09, median=0.00, mode=0.0. Here the distribution appears right-skewed (skew=2.98). Spread: std≈0.28, IQR≈0.00. Outliers (Tukey) ≈ 8.50%.

Histograms:

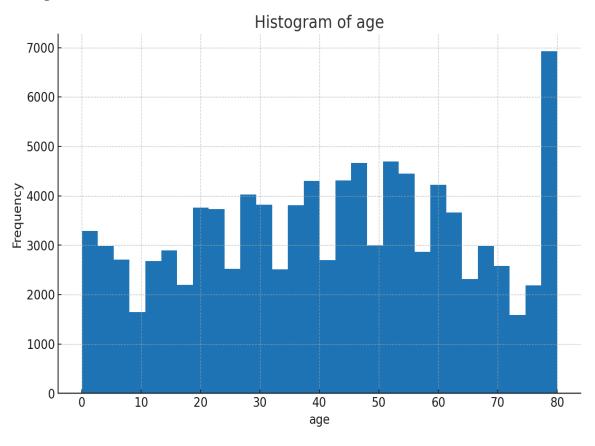


Figure 2.1: Histogram of age

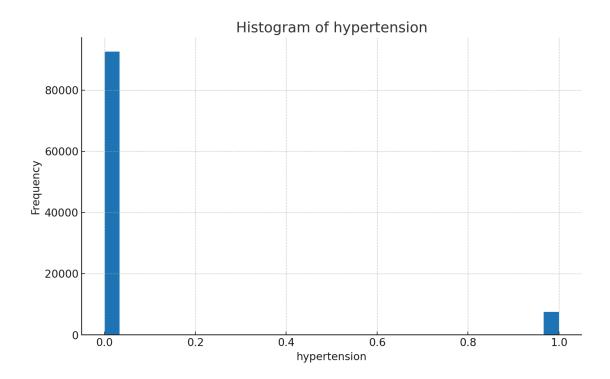


Figure 2.2: Histogram of hypertension

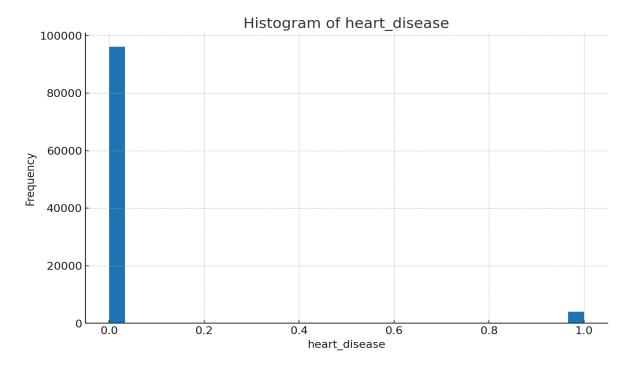


Figure 2.3: Histogram of heart disease

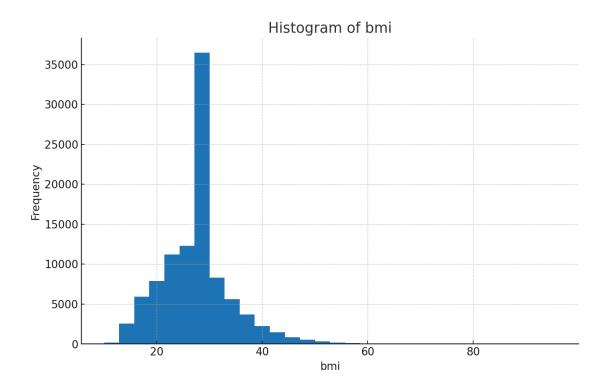


Figure 2.4: Histogram of bmi

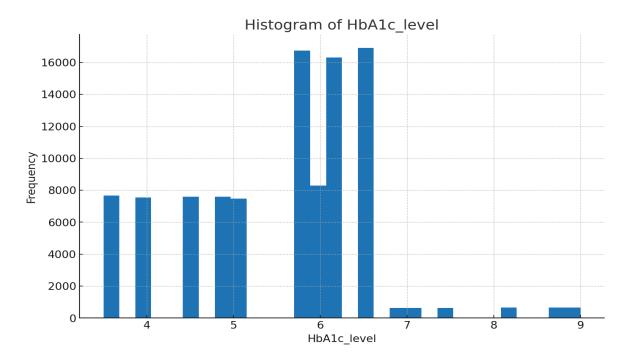


Figure 2.5: Histogram of HbA1c level

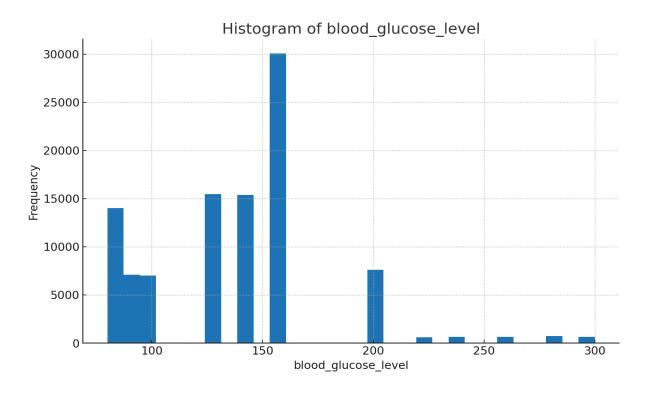


Figure 2.6: Histogram of blood_glucose_level

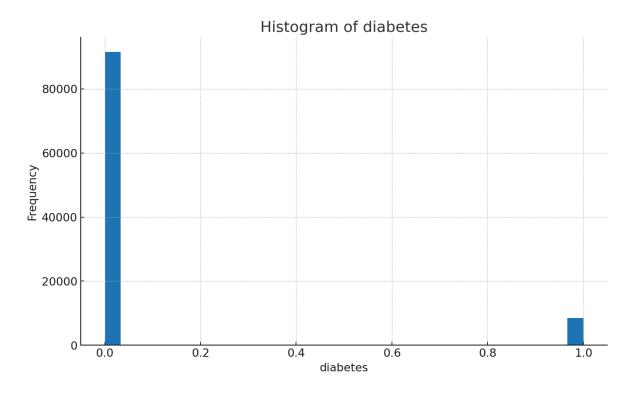


Figure 2.7: Histogram of diabetes

Box and Whisker Plots:

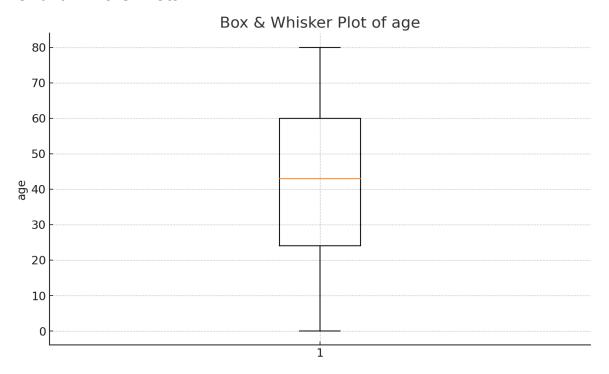


Figure 3.1: Boxplot of age

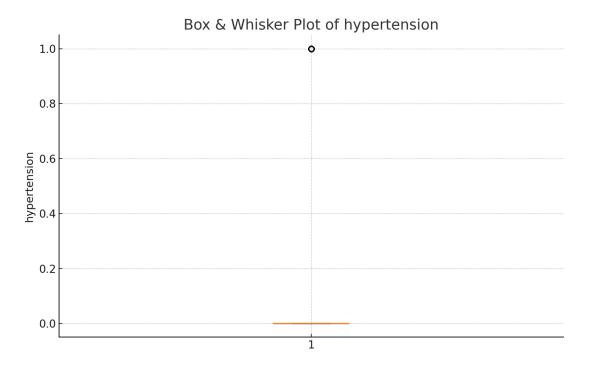


Figure 3.2: Boxplot of hypertension

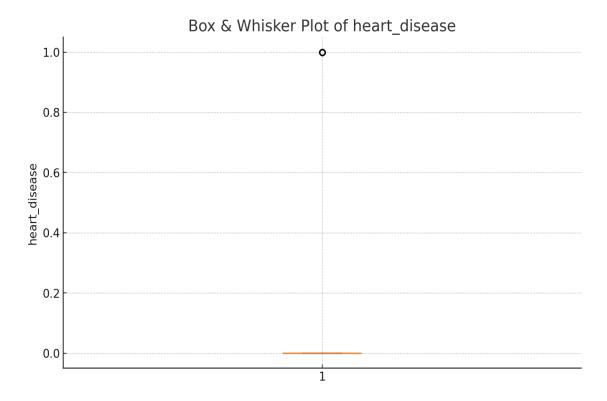


Figure 3.3: Boxplot of heart disease

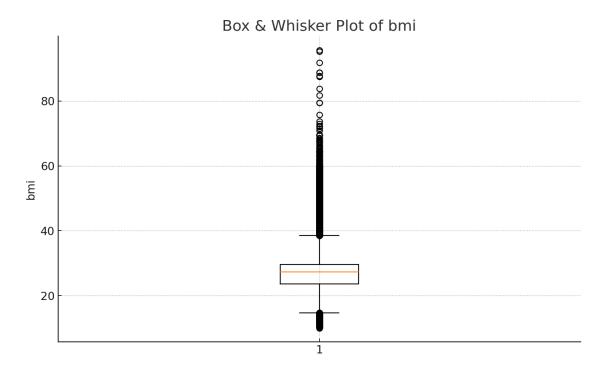


Figure 3.4: Boxplot of bmi

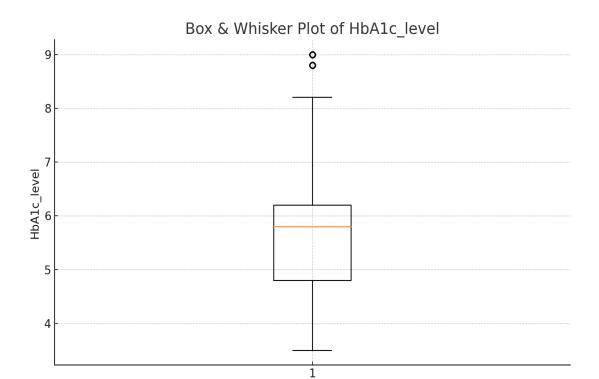


Figure 3.5: Boxplot of HbA1c level

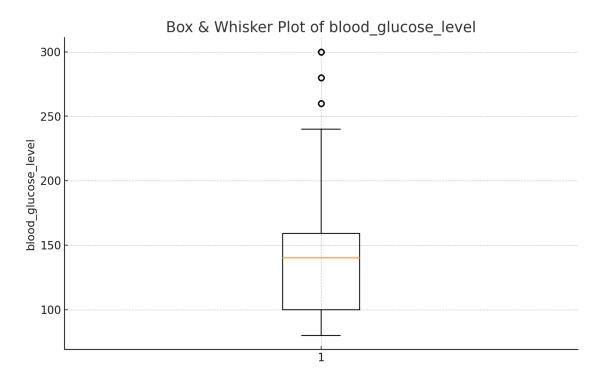


Figure 3.6: Boxplot of blood_glucose_level

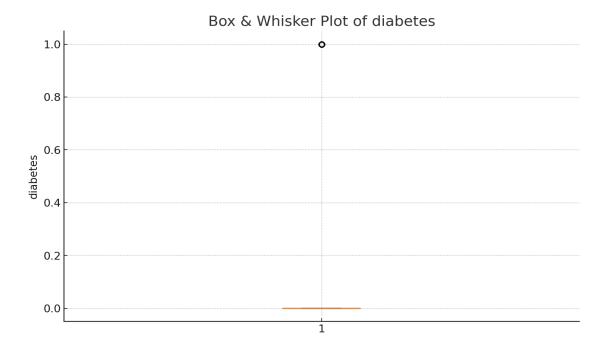


Figure 3.7: Boxplot of diabetes

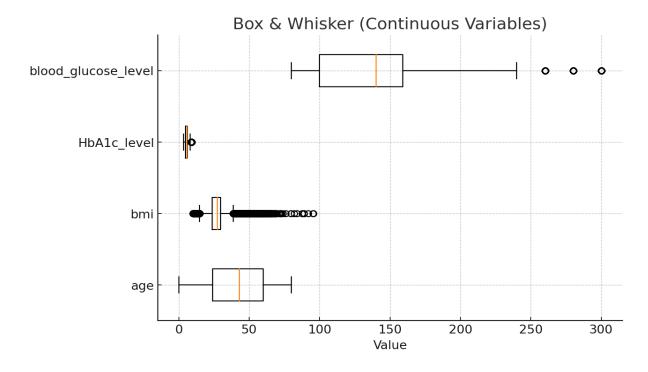


Figure 3.8: Combined Boxplots (Continuous Variables)

Anomalies & Data Quality:

There are no missing values in the dataset. Tukey's 1.5 times IQR rule was applied to identify potential outliers, where a small proportion of the continuous variables (bmi, HbA1clevel, blood-glucose-level) were flagged as outliers. However, for the binary variables (hypertension, heart-disease, diabetes), their IQR is not meaningful and should not be interpreted.

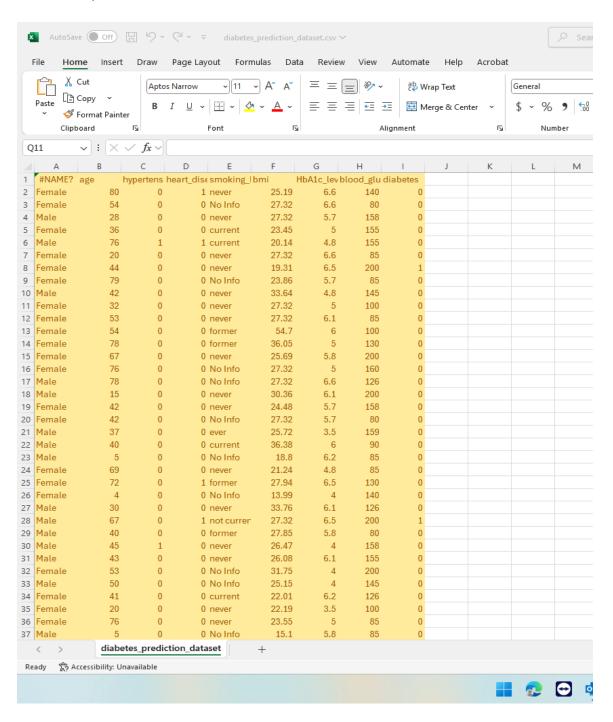


Figure 4: Screenshot of dataset

Recommendations:

- No actions are required regarding missing data
- Assess extreme values of BMI and glucose levels; for extreme values, consider retention, removal, or winsorization based on their plausibility.
- Assess for skew and consider log transforms.
- Apply median and IQR as opposed to mean and standard deviation when skew, outliers, or both are present.

Week-by-Week Progress

Week 1:	The focus was on data ingestion and audit. Missingness, range, and data types, as well as performing some preliminary exploratory data analysis.
Week 2:	Completing the rest of the report with all the other outstanding tasks such as boxplots, describing anomalies, other descriptive statistics, histograms, and providing recommendations.

Conclusion:

The distribution of the numeric features has different values for spread and skewness. The clinical measures of the patients like bmi, HbA1c_level, and glucose have moderate and mild skew alongside some Tukey outliers. Prevalence depicts binary indicators. There also appears to be no missing data. Based on the modeling objectives, it's advised to take into consideration the robust summaries, domain values review for extreme outliers, and sheer value of the skewed ones.

References

- Ozaydin, B., Zengul, F., Oner, N. & Feldman, S.S. 2020, "Healthcare Research and Analytics Data Infrastructure Solution: A Data Warehouse for Health Services Research", Journal of medical Internet research, vol. 22, no. 6, pp. e18579-e18579.
- Szukits, Á. (2022). The illusion of data-driven decision making—The mediating effect of digital orientation and controllers' added value in explaining organizational implications of advanced analytics. Journal of Management Control, 33(3), 403-446.
- Microsoft Excel help: AVERAGE, MEDIAN, MODE.SNGL, VAR.S, STDEV.S, QUARTILE.INC. Available here: https://support.microsoft.com/excel (Accessed: 16th August 2025).