# Wellness Centres Data Analysis Report

# 1. Dataset Description

#### 1.1 Source

Public dataset from Data.gov.in – City-wise List of Wellness Centres. Contains structured data of wellness centres operating across various Indian cities under different categories such as AYUSH, Urban Wellness Units, and Community Health Centres.

#### 1.2 Columns

- citycode Unique identifier for each city
- wellnesscentercode Unique code for each wellness centre
- category Type of wellness centre (e.g., AYUSH, Urban, Rural)
- doctorcount Number of doctors assigned to each centre
- latitude Centre's latitude coordinate
- longitude Centre's longitude coordinate
- wellnesscentrename Official name of the wellness centre
- cityname City where the centre is located
- wellnesscenternumber Administrative number used for identification
- wellnesscenteraddress Address or location of the centre

#### 1.3 Data Overview

- Rows (Records): ~500 wellness centre entries
- Columns (Attributes): 10
- Data Type Mix: Categorical (City, Category, Centre Name) + Numerical (Doctor Count, Latitude, Longitude)

## 1.4 Data Quality

Few missing or invalid values observed in doctorcount column (e.g., non-numeric entries). Latitude and longitude values mostly valid for Indian regions. Overall, the dataset is clean, consistent, and suitable for PySpark-based analytics and visualization.

# 2. Operations Performed

## 2.1 Data Cleaning & Exploration

Loaded dataset into PySpark DataFrame (df\_spark). Verified schema, data types, and null entries. Cleaned doctorcount column using regex to remove invalid (non-numeric) entries and converted it to integer. Checked unique values in category and cityname, and computed record and column counts.

## 2.2 Descriptive Analytics

- Category Distribution: Counted the number of wellness centres under each category.
- City-wise Distribution: Aggregated total centres per city.
- Doctor Availability: Summed doctor counts city-wise and category-wise.
- Missing Data Check: Identified centres lacking doctor data.

#### 2.3 Visualization

Generated visualizations including:

- Pie Chart: Top 5 categories of wellness centres
- Bar Chart: City-wise distribution of centres
- Scatter Plot: Relationship between total centres and doctor availability
- Box Plot: Doctor count spread across categories
- Optional: Geographic map of centres using Folium

#### 2.4 Advanced Analysis

Grouped and aggregated city-wise doctor statistics. Ranked cities by number of centres and doctors. Filtered centres with more than 5 doctors. Exported cleaned dataset and visual insights to CSV and PDF.

# 3. Key Insights

#### 3.1 Category Insights

AYUSH Centres and Urban Wellness Units account for more than 60% of total wellness centres. Some rare categories exist with minimal records, showing specialized wellness facilities.

## 3.2 City-wise Distribution

Metro cities like Delhi, Mumbai, Bangalore, and Hyderabad have higher concentrations of wellness centres. Smaller cities show fewer centres, reflecting potential gaps in healthcare access.

#### 3.3 Doctor Availability

Doctor count varies widely by city and category. Some centres have missing doctor data. Urban regions generally show higher average doctor availability per centre.

## **3.4 Data Quality Observations**

Around 5–10% of doctorcount entries were invalid. After cleaning, numeric consistency improved. No major duplication or structural inconsistencies found.

#### 3.5 Geographical Spread

Most centres are located in northern and southern India, with dense clusters in urbanized states. Central and north-eastern regions show sparse coverage.

# 4. Recommendations

## **4.1** Resource Allocation

Increase establishment of centres in underserved regions and balance doctor deployment between urban and rural areas.

#### **4.2 Data Management**

Standardize data entry fields and introduce validation checks to prevent invalid values and ensure accuracy.

#### **4.3 Infrastructure Planning**

Use city-level insights to plan future wellness expansion and infrastructure investment.

#### 4.4 Analytical Extension

Combine with population data for better context and create predictive models for future resource needs.