1. How many healthcare facilities are registered in each county in Kenya?
2. What is the distribution of healthcare facilities across different types of owners (e.g. private, public, faith-based)?
3. What is the distribution of facility types (e.g. hospital, clinic) in each county?
4. How many beds and cots are available in healthcare facilities across different counties in Kenya?
5. What is the distribution of KEPH levels (Kenya Essential Package of Health Services) across different facilities?
6. How many facilities are open 24 hours a day, on public holidays, on weekends, or late at night?
7. What is the distribution of regulatory bodies overseeing the operation of healthcare facilities in Kenya?
8. How many facilities provide specific services (e.g. maternity care, surgery)?
9. What is the distribution of operational status (open, closed) of healthcare facilities across different counties?
10. How many facilities are approved and publicly visible in Kenya?

TOPICS

1. "Healthcare Hubs: A County-by-County Look at Kenya's Registered Facilities"
2. "Who's Who in Kenyan Healthcare: A Breakdown of Ownership Types"
3. "Caring for the Community: The Distribution of Facility Types Across Kenya"
4. "Beds and Cots: A Nationwide Assessment of Healthcare Capacity in Kenya"
5. "Providing Quality Care: Kenya's KEPH Level Breakdown"
6. "Round-the-Clock Care: The Availability of 24-Hour Healthcare in Kenya"
7. "Regulated and Responsive: An Overview of Healthcare Regulatory Bodies in Kenya"
8. "Specialized Services: A Look at Healthcare Provisions in Kenya"
9. "Open for Business: A County-by-County Assessment of Healthcare Operations in Kenya"
10. "Approved and Accessible: A Nationwide Look at Kenyan Healthcare Visibility"

Calculated columns

1. To answer the question of how many healthcare facilities are registered in each county, you could create a calculated column that sums up the number of facilities in each county.
2. To answer the question of the distribution of healthcare facilities across different types of owners, you could create a calculated column that counts the number of facilities per owner type.
3. To answer the question of the distribution of facility types in each county, you could create a calculated column that counts the number of facilities per facility type and another calculated column that groups the data by county.
4. To answer the question of the number of beds and cots available in healthcare facilities across different counties, you could create a calculated column that sums up the number of beds and cots in each facility, and another calculated column that groups the data by county.
5. To answer the question of the distribution of KEPH levels across different facilities, you could create a calculated column that counts the number of facilities per KEPH level.
6. To answer the question of the availability of 24-hour healthcare in Kenya, you could create a calculated column that sums up the number of facilities that are open 24 hours a day, on public holidays, on weekends, or late at night.
7. To answer the question of the distribution of regulatory bodies overseeing the operation of healthcare facilities, you could create a calculated column that counts the number of facilities per regulatory body.
8. To answer the question of the distribution of specific services provided by healthcare facilities, you could create a calculated column that counts the number of facilities providing each service.
9. To answer the question of the distribution of operational status of healthcare facilities across different counties, you could create a calculated column that counts the number of open and closed facilities in each county.
10. To answer the question of the number of approved and publicly visible facilities in Kenya, you could create a calculated column that sums up the number of facilities that are both approved and publicly visible.

COMBINED TOPICS

1. Healthcare Capacity: This could focus on questions 4 and 5, examining the number of beds and cots available in healthcare facilities across different counties and the distribution of KEPH levels across different facilities.
2. Ownership and Regulation: This could focus on questions 2 and 7, exploring the distribution of healthcare facilities across different types of owners and the distribution of regulatory bodies overseeing the operation of healthcare facilities.
3. Service Availability: This could focus on questions 6 and 8, examining the availability of 24-hour healthcare in Kenya and the distribution of specific services provided by healthcare facilities.
4. Healthcare Accessibility: This could focus on questions 9 and 10, exploring the distribution of operational status of healthcare facilities across different counties and the number of approved and publicly visible facilities in Kenya.

DESIGN

As a data analyst, I would design the five dashboards as follows:

1. Cover Page: On the cover page, I would provide a high-level overview of the purpose of the dashboards and the insights they are meant to provide. I would also include a brief introduction to the data source and the key metrics being used in the analysis.
2. Healthcare Capacity: On this dashboard, I would focus on questions 4 and 5, examining the number of beds and cots available in healthcare facilities across different counties and the distribution of KEPH levels across different facilities. To do this, I would use a combination of visualizations such as bar charts, maps, and pie charts to provide an easy-to-understand representation of the data.
3. Ownership and Regulation: On this dashboard, I would focus on questions 2 and 7, exploring the distribution of healthcare facilities across different types of owners and the distribution of regulatory bodies overseeing the operation of healthcare facilities. To do this, I would use visualizations such as bar charts, stacked bar charts, and pie charts to show the distribution of facilities across the different categories.
4. Service Availability: On this dashboard, I would focus on questions 6 and 8, examining the availability of 24-hour healthcare in Kenya and the distribution of specific services provided by healthcare facilities. To do this, I would use visualizations such as bar charts, maps, and pie charts to show the distribution of facilities providing specific services and the availability of 24-hour care across different counties.
5. Healthcare Accessibility: On this dashboard, I would focus on questions 9 and 10, exploring the distribution of operational status of healthcare facilities across different counties and the number of approved and publicly visible facilities in Kenya. To do this, I would use visualizations such as bar charts, maps, and pie charts to show the distribution of open and closed facilities across different counties and the number of approved and publicly visible facilities.
6. Conclusion: On the conclusion dashboard, I would summarize the key insights from the previous dashboards and provide recommendations for future action. I would also provide a summary of the data source, any limitations or limitations of the analysis, and any future directions for the project.

Throughout the dashboards, I would ensure that the visualizations are clear and easy to understand, and that the data is presented in a meaningful way. I would also include interactive elements, such as drill-down and drill-up functionality, to allow the users to explore the data in more detail.

**Dashboard design with questions**

As a data analyst, I would design the five dashboards as follows:

1. Cover Page: On the cover page, I would provide a high-level overview of the purpose of the dashboards and the insights they are meant to provide. I would also include a brief introduction to the data source and the key metrics being used in the analysis, along with the target audience (investors).
2. Healthcare Capacity: On this dashboard, I would focus on questions 4 and 5, examining the number of beds and cots available in healthcare facilities across different counties and the distribution of KEPH levels across different facilities. To do this, I would use a combination of visualizations such as bar charts, maps, and pie charts to provide an easy-to-understand representation of the data. This information would be relevant for investors as it would provide a snapshot of the capacity of the healthcare system in Kenya.
3. Ownership and Regulation: On this dashboard, I would focus on questions 2 and 7, exploring the distribution of healthcare facilities across different types of owners and the distribution of regulatory bodies overseeing the operation of healthcare facilities. To do this, I would use visualizations such as bar charts, stacked bar charts, and pie charts to show the distribution of facilities across the different categories. This information would be relevant for investors as it would give an overview of the structure of the healthcare system and the organizations responsible for its regulation and oversight.
4. Service Availability: On this dashboard, I would focus on questions 6 and 8, examining the availability of 24-hour healthcare in Kenya and the distribution of specific services provided by healthcare facilities. To do this, I would use visualizations such as bar charts, maps, and pie charts to show the distribution of facilities providing specific services and the availability of 24-hour care across different counties. This information would be relevant for investors as it would give an understanding of the types of services available in the healthcare system and their distribution across the country.
5. Healthcare Accessibility: On this dashboard, I would focus on questions 9 and 10, exploring the distribution of operational status of healthcare facilities across different counties and the number of approved and publicly visible facilities in Kenya. To do this, I would use visualizations such as bar charts, maps, and pie charts to show the distribution of open and closed facilities across different counties and the number of approved and publicly visible facilities. This information would be relevant for investors as it would provide a snapshot of the accessibility of healthcare services in Kenya.
6. Conclusion: On the conclusion dashboard, I would summarize the key insights from the previous dashboards and provide recommendations for future investment. I would also provide a summary of the data source, any limitations or limitations of the analysis, and any future directions for the project. This information would be relevant for investors as it would give them a comprehensive understanding of the Kenyan healthcare system and the opportunities and challenges they may face when investing in the country.

Throughout the dashboards, I would ensure that the visualizations are clear and easy to understand, and that the data is presented in a meaningful way. I would also include interactive elements, such as drill-down and drill-up functionality, to allow the users to explore the data in more detail. The goal of these dashboards would be to provide investors with a comprehensive understanding of the Kenyan healthcare system and help them make informed investment decisions.

**Dashboard with grouped question and calculated column**

1. Cover Page: "Healthcare in Kenya: A Comprehensive Overview" On this page, I would introduce the purpose of the dashboards and the insights they will provide. I would also highlight the key metrics being used in the analysis and the target audience.
2. Healthcare Capacity: "Bed Counts and KEPH Levels: The Pulse of Healthcare Capacity in Kenya" On this dashboard, I would focus on questions 4 and 5, examining the number of beds and cots available in healthcare facilities across different counties and the distribution of KEPH levels across different facilities. I would use visualizations such as bar charts, maps, and pie charts to provide an easy-to-understand representation of the data. The calculated column "Beds and Cots" would also be used to show the combined capacity of healthcare facilities.
3. Ownership and Regulation: "Who's in Charge? Understanding Healthcare Ownership and Regulation in Kenya" On this dashboard, I would focus on questions 2 and 7, exploring the distribution of healthcare facilities across different types of owners and the distribution of regulatory bodies overseeing the operation of healthcare facilities. I would use visualizations such as bar charts, stacked bar charts, and pie charts to show the distribution of facilities across the different categories.
4. Service Availability: "Round-the-Clock Care: Examining Healthcare Service Availability in Kenya" On this dashboard, I would focus on questions 6 and 8, examining the availability of 24-hour healthcare in Kenya and the distribution of specific services provided by healthcare facilities. To do this, I would use visualizations such as bar charts, maps, and pie charts to show the distribution of facilities providing specific services and the availability of 24-hour care across different counties.
5. Healthcare Accessibility: "Open for Business: The Availability of Healthcare Services in Kenya" On this dashboard, I would focus on questions 9 and 10, exploring the distribution of operational status of healthcare facilities across different counties and the number of approved and publicly visible facilities in Kenya. I would use visualizations such as bar charts, maps, and pie charts to show the distribution of open and closed facilities across different counties and the number of approved and publicly visible facilities.
6. Conclusion: "Investing in Healthcare: A Summary of Insights and Recommendations" On the conclusion dashboard, I would summarize the key insights from the previous dashboards and provide recommendations for future investment. I would also provide a summary of the data source, any limitations or limitations of the analysis, and any future directions for the project.

Throughout the dashboards, I would use interactive elements, such as drill-down and drill-up functionality, to allow the users to explore the data in more detail. The goal of these dashboards would be to provide investors with a comprehensive understanding of the Kenyan healthcare system and help them make informed investment decisions.

**Dashboard with county and population by age group**

1. Cover Page: "Healthcare in Kenya: A Comprehensive Overview" On this page, I would introduce the purpose of the dashboards and the insights they will provide. I would also highlight the key metrics being used in the analysis and the target audience, including the addition of population by county with age distribution.
2. Healthcare Capacity: "Bed Counts and KEPH Levels: The Pulse of Healthcare Capacity in Kenya" On this dashboard, I would focus on questions 4 and 5, examining the number of beds and cots available in healthcare facilities across different counties and the distribution of KEPH levels across different facilities. I would use visualizations such as bar charts, maps, and pie charts to provide an easy-to-understand representation of the data. The calculated column "Beds and Cots" would also be used to show the combined capacity of healthcare facilities. Additionally, I would include a map showing the distribution of population by county with age distribution to help understand the demand for healthcare services in different areas.
3. Ownership and Regulation: "Who's in Charge? Understanding Healthcare Ownership and Regulation in Kenya" On this dashboard, I would focus on questions 2 and 7, exploring the distribution of healthcare facilities across different types of owners and the distribution of regulatory bodies overseeing the operation of healthcare facilities. I would use visualizations such as bar charts, stacked bar charts, and pie charts to show the distribution of facilities across the different categories. Additionally, I would include a map showing the distribution of population by county with age distribution to help understand the potential demand for healthcare services in different areas.
4. Service Availability: "Round-the-Clock Care: Examining Healthcare Service Availability in Kenya" On this dashboard, I would focus on questions 6 and 8, examining the availability of 24-hour healthcare in Kenya and the distribution of specific services provided by healthcare facilities. To do this, I would use visualizations such as bar charts, maps, and pie charts to show the distribution of facilities providing specific services and the availability of 24-hour care across different counties. Additionally, I would include a map showing the distribution of population by county with age distribution to help understand the demand for different healthcare services in different areas.
5. Healthcare Accessibility: "Open for Business: The Availability of Healthcare Services in Kenya" On this dashboard, I would focus on questions 9 and 10, exploring the distribution of operational status of healthcare facilities across different counties and the number of approved and publicly visible facilities in Kenya. I would use visualizations such as bar charts, maps, and pie charts to show the distribution of open and closed facilities across different counties and the number of approved and publicly visible facilities. Additionally, I would include a map showing the distribution of population by county with age distribution to help understand the demand for healthcare services in different areas.
6. Conclusion: "Investing in Healthcare: A Summary of Insights and Recommendations" On the conclusion dashboard, I would summarize the key insights from the previous dashboards and provide recommendations for future investment. I would also provide a summary of the data source, any limitations or limitations of the analysis, and any future directions for the project.

Throughout the dashboards, I would use interactive elements, such as drill-down and drill-up functionality, to allow the users to explore the data in more detail. The goal of these dashboards would be to provide investors with a comprehensive understanding of the Kenyan healthcare system and help them make informed investment decisions, taking into account both the availability of healthcare services and the demand for them based on population by county and age distribution.

The analysis reveals that there is a significant disparity in the distribution of healthcare facilities across counties in Kenya, with some counties having a higher concentration of facilities than others. This finding suggests that the availability of healthcare facilities in Kenya is unevenly distributed among the counties, which could lead to challenges in providing adequate healthcare services to populations in areas with fewer healthcare facilities. The Demographic Score falling between 2.94 and 3.31 further emphasizes the vulnerability of certain age groups in these counties to negative health outcomes during a pandemic. This information can be used to identify areas that may require additional resources and support to ensure that vulnerable populations receive the necessary healthcare services during a pandemic. Moreover, the Total Population of 19,530,802 across these counties with only 4,333 healthcare facilities indicates the existing healthcare infrastructure may not be sufficient to meet the healthcare needs of the population. Notably, 22 of these counties are situated in marginalized arid and semi-arid regions of the country, which emphasizes the need to prioritize these areas for additional support and resources to improve their healthcare infrastructure and pandemic preparedness.

Finding: There is a significant disparity in healthcare facility distribution across counties in Kenya, with some counties having significantly more facilities than others. Explanation: The finding suggests that the availability of healthcare facilities in Kenya is unevenly distributed among the counties, with some counties having a higher concentration of facilities compared to others. This could lead to challenges in providing adequate healthcare services to populations in areas with fewer healthcare facilities. This finding highlights the need for policymakers to take measures to address the disparities in healthcare facility distribution and ensure that all Kenyan citizens have access to quality healthcare services. Finding: Demographic Score falls between 2.94 and 3.31, making certain age groups in these counties more vulnerable to negative health outcomes during a pandemic. Explanation: The Demographic Score is a measure of the vulnerability of different age groups to negative health outcomes during a pandemic. This finding suggests that certain age groups in the counties with a Demographic Score falling between 2.94 and 3.31 are more vulnerable to negative health outcomes. This information can be used to identify areas that may require additional resources and support to ensure that vulnerable populations receive the necessary healthcare services during a pandemic. Finding: The Total Population in these counties is 19,530,802, with a total of 4,333 healthcare facilities. Notably, 22 of these counties are situated in marginalized arid and semi-arid regions of the country. Explanation: This finding provides information about the population size and healthcare facility density in the counties with a Demographic Score falling between 2.94 and 3.31. The Total Population of 19,530,802 suggests that a significant number of people in Kenya may be vulnerable to negative health outcomes during a pandemic. Additionally, the presence of only 4,333 healthcare facilities across these counties suggests that the existing healthcare infrastructure may not be sufficient to meet the healthcare needs of the population. The fact that 22 of these counties are located in marginalized arid and semi-arid regions of the country highlights the need to prioritize these areas for additional support and resources to improve their healthcare infrastructure and pandemic preparedness.