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# PROJECT REPORT: RESOURCE ALLOCATION PREDICTION IN UGANDA

## Introduction

This project develops a machine learning system to predict healthcare resource allocation needs in Uganda using demographic health survey data. The system employs a two-stage approach: first, predicting population pressure scores using regression, then classifying districts into risk categories for targeted resource allocation.

### 1. Problem Statement and Objectives

Resource allocation in developing countries faces significant challenges due to:

- Limited resources and competing demands
- Population growth and demographic pressures
- Varying health indicators across regions
- Need for data-driven decision making

## Objectives

- Primary: Develop predictive models to identify districts with high resource allocation needs
- Secondary: Create interpretable scoring systems for policy makers
- Tertiary: Establish a framework for ongoing monitoring and prediction

### 2. Data Description and Preprocessing

#### Dataset Overview

- Source: DHS Quickstats Subnational Uganda Dataset
- Initial Size: 1,828 records across 30 variables
- Coverage : Multiple districts and survey years
- Data Type: Health demographic indicators and survey responses

#### Key Variables

- Location: District identifiers
- Temporal: Survey years
- Health Indicators: Fertility rates, mortality rates, contraceptive use
- Risk Factors: Malnutrition, vaccination coverage, delivery locations

#### Data Preprocessing Steps

- Column Standardization: Cleaned names(lowercase, underscores)
- Data Type Conversion: Converted numeric strings to proper types
- Missing value Treatment: Forward/backward filling within district groups
- Data Filtering: Removed invalid entries (e.g, "data+year")
- Feature Engineering: Created composite scores and categories

### 3. Methodology

## **Composite Score Development**

### **Population Pressure Score**

Formula used:  $0.5 \times \text{Fertility} + 0.3 \times (1/\text{Mortality}) + 0.2 \times (1 - \text{Contraceptive\_Use})$

- Rationale: Higher fertility and lower contraceptive use indicate resource pressure
- Weights: Based on demographic impact on resource needs

### **Nutrition Index**

Components: Average of child stunting, wasting, and underweight rates

- Purpose: Measures malnutrition burden requiring intervention

### **Health Service Demand**

Components: Healthcare facility delivery rates and vaccination coverage

- Purpose: Indicates current healthcare system utilization

### **Resource Risk Score**

Formula used:  $0.6 \times \text{Pressure} + 0.25 \times \text{Nutrition} + 0.15 \times \text{Health\_Demand}$

- Integration: Combines multiple health dimensions
- Output: Single metric for resource allocation priority

## **4. Machine learning Methodology**

### **Two-Stage Approach**

Stage 1: Pressure Score Prediction(Regression)

- Algorithm: Random Forest Regressor(200 estimators)
- Input Features: All numeric health indicators
- Target: Population pressure score
- Purpose: Predict continuous pressure values for new data

Stage 2: Risk Category Classification

- Algorithm: Random Forest Classifier (200 estimators)
- Input Features: Predicted pressure score, nutrition index, and health service demand
- Target: Risk categories (High/Medium/Low)
- Purpose: Actionable classification for resource allocation

## **5. Key Findings/Results**

Regression Model – Predicting Pressure Score

MSE: 0.548941764206482

R<sup>2</sup>: 0.907242786234734

Sample Predicted Pressure Scores:

| indicator | pressure_score | predicted_pressure_score |
|-----------|----------------|--------------------------|
| 0         | -3.194958      | -3.171698                |
| 2         | -5.274783      | -5.252041                |
| 4         | -5.794444      | -5.689130                |
| 6         | -4.234872      | -4.343496                |
| 8         | -2.876104      | -2.954124                |
| 10        | -2.745683      | -2.747832                |
| 12        | -6.464737      | -6.293266                |
| 14        | -5.684783      | -5.755888                |
| 16        | -3.223684      | -3.257065                |
| 18        | -5.165489      | -5.281331                |

- Shows how well the model predicts population pressure
- Helps determine reliability of Stage 2

#### Classification Model – Predicting Pressure

Resource Risk Classification Report:

|              | precision | recall | f1-score | support |
|--------------|-----------|--------|----------|---------|
| High Risk    | 1.00      | 0.80   | 0.89     | 5       |
| Low Risk     | 1.00      | 1.00   | 1.00     | 1       |
| Medium Risk  | 0.80      | 1.00   | 0.89     | 4       |
| accuracy     |           |        | 0.90     | 10      |
| macro avg    | 0.93      | 0.93   | 0.93     | 10      |
| weighted avg | 0.92      | 0.90   | 0.90     | 10      |

Sample Risk Category Predictions:

|   | Actual Risk | Predicted Risk |
|---|-------------|----------------|
| 0 | Medium Risk | Medium Risk    |
| 1 | Medium Risk | Medium Risk    |
| 2 | Medium Risk | Medium Risk    |
| 3 | High Risk   | High Risk      |
| 4 | Medium Risk | Medium Risk    |
| 5 | High Risk   | Medium Risk    |
| 6 | High Risk   | High Risk      |
| 7 | High Risk   | High Risk      |
| 8 | High Risk   | High Risk      |
| 9 | Low Risk    | Low Risk       |

## Highest Risk Districts

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Top 5 Highest Risk Districts (by avg pressure score):  
Karamoja: 1.201  
West Nile: 0.408  
Northern: -0.170  
Eastern: -0.519  
Western: -0.997
```

### 6. Recommendations

- Deploying Prediction System: Implement models for ongoing resource allocation decisions
- Focusing High-Risk Districts: Prioritizing identified high-risk areas for immediate intervention
- Policy Integration: Incorporate predictive scores into official resource allocation criteria

### 7. Conclusion

This project successfully demonstrates the application of machine learning techniques to resource allocation challenges in Uganda. The two-stage predictive system provides both continuous pressure scores and discrete risk categories, enabling flexible decision-making for policy makers.