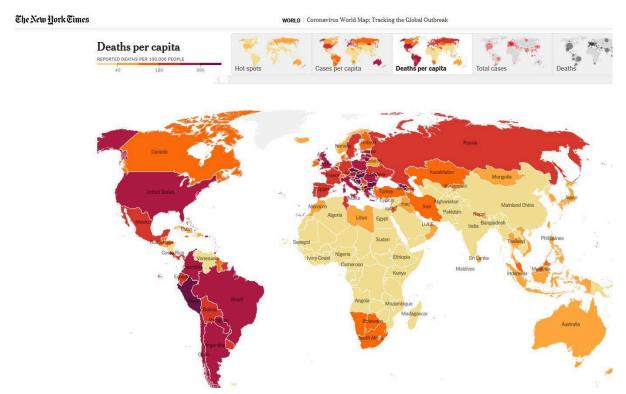
Project Requirements



Though the public health emergency from the COVID-19 pandemic has ended, one question has not been adequately answered - why did countries have widely different rates of death from COVID? Only a small proportion of COVID cases lead to death, typically after a few weeks. However, the daily number of deaths in a country does not depend only on the number of cases. It also varies with several other factors including the extent of vaccination, the level of development (e.g., countries with more hospitals should see fewer deaths), age demographics (countries with a larger proportion of older people should see more deaths), pre-existing differences in medical conditions such as diabetes. The goal of this project is to use linear modeling to **predict two weeks ahead** the number of daily COVID deaths in different countries using a range of factors.

Datasets

1. Data on COVID-19 from Our World in Data

Their complete dataset contains a lot of information including the number of deaths, cases, vaccinations, hospitalizations, and several other country-specific pieces of information relevant to understanding the effects of COVID. Note that you can read the "raw" CSV file from a URL directly, like so:

read_csv("https://raw.githubusercontent.com/owid/covid-19-data/
master/public/data/owid-covid-data.csv")

2. Population estimates from The World Bank's DataBank

Use the above web page to

- a. Select all countries
- b. Select a few Series (variables) that you think will be relevant to predicting death from COVID. For example, populations in certain age groups, mortality rates, and expected lifetime. At the very least, select *Population ages 80 and above, female* and *Population ages 80 and above, male*.
- c. Select time: Only 2023
- d. Download your selection as a CSV file (you get a .zip file, which contains the .csv file; delete the last few lines of the csv file which has the license information)

Approach

There are three steps in this project:

- 1) Data wrangling to get all the data into one table that can be used for linear modeling
 - a) read the two data files using read_csv()
 - b) Keep only country-level data by removing all rows where the country_code is not exactly 3 letters (these represent larger regions like continents). Hint: nchar(string) returns the number of characters.
 - c) Remove countries whose total population is less than 1 million.
 - d) Add a new column new_deaths_smoothed_2wk that has the same values as new_deaths_smoothed but two weeks ahead (will be used for linear modeling as described later). R has a Date type that enables calculations with dates like mutate(date= date - 14) and filter(date >= as.Date("2023-01-01")).
 - e) tidy tables, as needed. (Hint: only the population data is not tidy.)
 - f) Merge the tables (Hint: join using the 3-letter ISO code)

```
#Load Required Libraries
library(tidyverse)
library(modelr)
library(ggplot2)

#Start of Part 1: Data Wrangling
#Load and wrangle the Covid Data data table
CovidData <-
read csv("https://raw.githubusercontent.com/owid/covid-19-data/master/public/da
ta/owid-covid-data.csv") %>%
filter(nchar(iso code) == 3) %>%
mutate(date = as.Date(date)) %>%
group by(`iso code`) %>%
mutate(new deaths smoothed 2wk = lead(new deaths smoothed, 14)) %>%
filter(date >= as.Date("2022-01-01") & date <= as.Date("2023-12-31"))

#Load and wrangle the Series Info data table
SeriesInfo <- read csv("covid2.csv") %>%
pivot wider(names from = `Series Name`, values from = `2023 [YR20231`) %>%
```

```
mutate(`Population ages 80 and above, female` = as.integer(`Population ages
80 and above, female`)) %>%
 mutate(`Population ages 80 and above, male` = as.integer(`Population ages 80
                           `Country Code`) %>% summarize(across(1:last col(), ~
first(na.omit(.x)))) %>% mutate('Total Population' = `Population ages 80 and
above, female` + `Population ages 80 and above, male`) %>%
 filter(`Total Population` >= 1000000) %>%
 rename('iso code' = 'Country Code')
#Joining the two data tables together
CombinedData <- CovidData %>%
 left join(SeriesInfo %>% select(iso code, `Population ages 80 and above,
 filter(date >= as.Date("2022-01-01") & date <= as.Date("2023-12-31"))
View(CombinedData)
View(CovidData)
View(SeriesInfo)
#End of Part 1: Data Wrangling
```

At the end of these steps, the data should be in one table, ready for linear regression (only a small sample of the data is shown below):

		de	pendent variabl	e Predictor variables (many more)						
			•							
iso_code	location	date	new_deaths_smoothed_2wk	new_cases	new_cases_smoothed	total_vaccinations	SRDYNLESO.IN	SRURB.TOTL :	SRPORTOTL "	SPFORBOURSE
FG	Afghanistan	2022-12-18	0.571	72	63.000	A/A	63.37700	8535606	34413603	48311
FG	Afghanistan	2022-12-19	0.429	51	82.000	A/A	65.37700	8535606	34413603	48319
FG	Afghanistan	2022-12-20	0.429	73	58.286	ALK.	63.37700	8535606	34413603	48319
FG	Afghanistan	2022-12-21	0.571	39	58,000	Al4	63.37700	8535606	34413603	48319
FG	Afghanistan	2022-12-22	0.671	65	58.057	12449970	63.37700	8535606	34413603	48310
FG	Afghanistan	2022-12-23	0.429	25	51,429	NA.	63.37700	8535606	34413603	48319
					49.714		49.37700	8535606	34413603	48319
FG	Afghanistan	2022-12-24	0.143	23		NA	63,37700	8535606	34413803	48319
PG	Afghanistan	2022-12-25	0.266	60	48,000	A/A	43.37700	8535606	34413633	48319
FG	Afghanistan	2022-12-26	0.429	90	\$3.571	A)A	63.37700	8535606	34413803	48319
FG	Afghanistan	2022-12-27	0.714	26	46.857	ALA.	49.37700	8535606	34413603	48310
FG	Afghanistan	2022-12-28	0.571	32	45.057	AIA.	63.37700	8535606	34413803	48319
FG	Afghanistan	2022-12-29	0.571	23	39.057	N/A	63.37700	8535606	34413609	48310
FG	Afghanistan	2022-12-30	0.714	18	38.857	A)A	65.37700	8535808	34415803	48310
ra	Afghanistan	2022-12-31	0.714	42	41.714	ALA	78.69024	261953748	320742673	7400961
5A	United States	2022-01-01	1977,714	584647	354503,286	521579175	78.69024	281953748	320742873	7400961
SA.	United States	2022-01-02	2054.296	471965	387434.000	522079475	78.69024	261953748	320742673	740096
							78.69024	261953748	320742873	7400961
SA	United States		2127.298	302957	414167.286	\$23331200	78.69024	261953748	320742673	740096
SA	United States	2022-01-04	2152.143	390858	439820.714	524757059	78.69024	261953748	320742873	7400981
SA	United States	2022-01-05	2079.429	902391	502377.286	526221050	78.69024	261953748	320742673	7400961

2) Linear modeling

The goal is to predict new_deaths_smoothed *two weeks in the future*. Hint: this is the dependent variable.

a) Make a list of all predictor variables that are available. The challenge is to identify which combination of these predictors will give the best predictive model.

Gdp_per_capita
Hospital_beds_per_thousand

Total_vaccinations_per_hundred People_fully_vaccinated_per_hundred `Population ages 80 and above, female` `Population ages 80 and above, male`

stringency_index

b) Generate some (at least 3) transformed variables. E.g., these could combine variables (e.g., cardiovasc_deaths= cardiovasc_death_rate*population).

```
# 2b. 3 Transformed Variables
CombinedData <- CombinedData %>%
   mutate(
      gdp vaccination interaction = gdp per capita *
people fully vaccinated per hundred,
      beds stringency interaction = hospital beds per thousand *
stringency index,
      total population 80 above = `Population ages 80 and above,
female` + `Population ages 80 and above, male`,
      elderly vaccination interaction = total population 80 above *
total vaccinations per hundred)
```

c) Split your dataset into train and test subsets: only data from 2022 should be used for building/training the linear models in lm(). (Data from 2023 will be used for evaluation as described later). Note: **each day** is one data point.

```
# 2c. Split Test and Train Data
train data <- filter(CombinedData, date < as.Date("2023-01-01"))
test data <- filter(CombinedData, date >= as.Date("2023-01-01"))
%>%
filter(date >= as.Date("2023-01-01") & date <=
as.Date("2023-06-30"))</pre>
```

d) Run linear regression with at least 5 different combinations of predictor variables. Hint: each model will look like:

new_deaths_smoothed_2wk~new_cases_smoothed+gdp_per_capita+diabete
s_prevalence+icu_patients+SP.URB.TOTL

```
# 2d. Model Creation for Linear Regression
     model1 <- lm(new deaths smoothed 2wk ~
beds stringency interaction + gdp vaccination interaction, data
= train data)
     model2 <- lm(new deaths smoothed 2wk ~
beds stringency interaction + gdp vaccination interaction +
total population 80 above, data = train data)
     model3 <- lm(new deaths smoothed 2wk ~
elderly vaccination interaction +
people fully vaccinated per hundred, data = train data)
     model4 <- lm(new deaths smoothed 2wk ~ new cases smoothed
+ beds stringency interaction + elderly vaccination interaction
+ hospital beds per thousand, data = train data)
     model5 <- lm(new deaths smoothed 2wk \sim
gdp vaccination interaction + total population 80 above +
gdp per capita + aged 65 older, data = train data)
```

```
View(test_data)
View(train_data)
#End of Part 2: Linear Modeling
```

3) Evaluating the linear models

You should evaluate each of your linear models by predicting the number of daily deaths in each day in January-June 2023 (the test data) and comparing it with the actual number of deaths on those days. Specifically:

a) For each of your models, calculate the Root Mean Squared Error (RMSE) over all days in January-June 2023 and all countries. Hint: use rmse() in library(modelr).

```
#Start of Part 3: Evaluating the Linear Models
#3a.
rmse model1 <- rmse(model1, test data)
rmse model2 <- rmse(model2, test data)</pre>
rmse model3 <- rmse(model3, test data)</pre>
rmse model4 <- rmse(model4, test data)</pre>
rmse model5 <- rmse(model5, test data)</pre>
rmse data <- tibble(
 rmse = c(rmse model1, rmse model2, rmse model3, rmse model4,
rmse model5))
test data <- ungroup(test data) %>%
 mutate(
   pred model3 = predict(model3, newdata = .),
   pred model5 = predict(model5, newdata
daily summary <- test data %>%
select(date, iso code, new deaths smoothed 2wk, pred model1,
pred model2, pred model3, pred model4, pred model5) %>%
pivot longer(
    cols = starts with("pred"),
   values to = "predicted deaths",
   names prefix = "pred ") %>%
mutate(
   error = predicted deaths - new deaths smoothed 2wk)
rmse per country model <- daily summary %>%
group by (iso code, model) %>%
```

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```
summarise(
    daily rmse = sqrt(mean(error^2, na.rm = TRUE)),
    .groups = 'drop')
daily summary <- na.omit(daily summary) %>% filter(error >= 0)
View(daily summary)
```

b) For only your best model, calculate the Root Mean Squared Error for **every country**. Hint: use group_by() and summarise(rmse(model= my_best_model, data=cur_data())). cur_data() gives the data in each group.

```
#3b. Model 5 seems to be the best
test data <- test data %>%
   mutate(pred_model5 = predict(model5, newdata = .))

# Calculate RMSE by country for model5
rmse by country model5 <- test data %>%
   group by(iso code) %>%
   summarise(
        actual = new deaths smoothed 2wk,
        predicted = pred model5,
        rmse = sqrt(mean((actual - predicted)^2, na.rm = TRUE)),
        .groups = 'drop')
rmse by country model5 <- na.omit(rmse by country model5)
View(rmse by country model5)

#End of Part 3: Evaluating the Linear Models</pre>
```

Group work

You may work in groups of 1-3. Include all group member names in the PDF reports.

Stage 2 (Final submission) Due: Friday, May 3

To submit:

1. A short report describing your work. Specifically, your report should include:

brief description of only the important data wrangling steps

In order to complete this assignment, we began by loading the necessary libraries. The tidyverse library is indispensable for data cleaning and transformation, enabling us to shape our data into a usable format for visualization, summarization, and modeling. Additionally, we utilized the modelr library, primarily for its capability to calculate the root mean squared error (RMSE) for our models. This is crucial for evaluating the predictive performance of our models accurately. Lastly, the ggplot2 library was used to create insightful visualizations of our data, aiding in the exploration and communication of trends and patterns.

Moving forward, we proceeded with loading and wrangling the Covid Data and Series Info data tables. The Covid Data, sourced from an online repository, contained information regarding COVID-19 cases and related metrics. Through a series of transformations including filtering, date conversion, and calculation of a 2-week smoothed average of new deaths, we prepared the data for further analysis. Similarly, the Series Info data, obtained from a local CSV file, provided additional demographic insights such as the population aged 80 and above. After consolidating and refining these datasets, we culminated the data wrangling process by joining the two tables together based on the ISO code, ensuring a comprehensive dataset for our analysis.

In conclusion, the data wrangling phase laid the foundation for our analysis by ensuring that our data is clean, relevant, and structured appropriately.

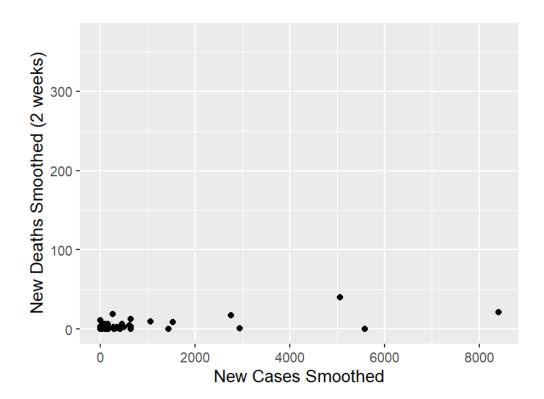
 List of the variables ("series") that you selected from the Population estimates webpage,

Population ages 80 and above, female Population ages 80 and above, male

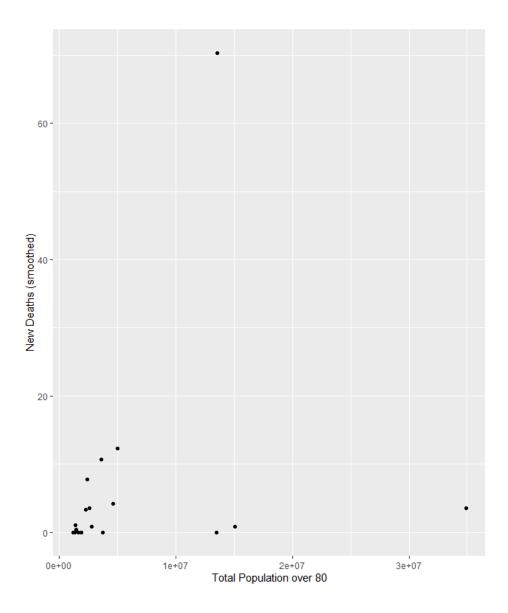
 a scatterplot of only the most recent new deaths per day two weeks ahead (new_deaths_smoothed_2wk) in the test dataset (i.e., 2023-06-30) and the corresponding new cases per day (new_cases_smoothed) for every country (i.e., one point per country), like so:

```
250 - May 2000 - May 2
```

```
recent_data <- CombinedData %>%
    group by(iso code) %>%
    slice max(order_by = date) %>%
    ungroup()
```



 a scatterplot of only the most recent new deaths (new_deaths_smoothed) in the test dataset (i.e., 2023-06-30) and the total (female+male) population over 80 for every country (i.e., one point per country), like so:



- descriptions of variable transforms,
- o list of the different combinations of predictor variables in your models,

Model 1:

- Dependent variable: `new_deaths_smoothed_2wk`
- Independent variables: `beds_stringency_interaction`,`gdp_vaccination_interaction`
- R code:

```
model1 <- Im(new_deaths_smoothed_2wk ~ beds_stringency_interaction + gdp_vaccination_interaction, data = train_data)
```

Model 2:

- Dependent variable: `new_deaths_smoothed_2wk`
- Independent variables: `beds_stringency_interaction`,
 `gdp_vaccination_interaction`, `total_population_80_above`
 - R code:

```
model2 <- Im(new_deaths_smoothed_2wk ~ beds_stringency_interaction + gdp_vaccination_interaction + total_population_80_above, data = train_data)
```

Model 3:

- Dependent variable: `new_deaths_smoothed_2wk`
- Independent variables: `elderly_vaccination_interaction`,`people_fully_vaccinated_per_hundred`
- R code:

```
model3 <- Im(new_deaths_smoothed_2wk ~ elderly_vaccination_interaction + people_fully_vaccinated_per_hundred, data = train_data)
```

Model 4:

- Dependent variable: `new_deaths_smoothed_2wk`
- Independent variables: `new_cases_smoothed`,`beds_stringency_interaction`, `elderly_vaccination_interaction`,`hospital_beds_per_thousand`
 - R code:

```
model4 <- Im(new_deaths_smoothed_2wk ~ new_cases_smoothed + beds_stringency_interaction + elderly_vaccination_interaction + hospital_beds_per_thousand, data = train_data)
```

Model 5:

- Dependent variable: `new_deaths_smoothed_2wk`
- Independent variables:

```
`gdp_vaccination_interaction`,`total_population_80_above`, `gdp_per_capita`, `aged_65_older`
```

- R code:

```
model5 <- Im(new_deaths_smoothed_2wk ~ gdp_vaccination_interaction + total_population_80_above + gdp_per_capita + aged_65_older, data = train_data)
```

 brief reasons for why you chose these predictor variables (e.g., your prior knowledge, or a plot showed a trend),

GDP per Capita: Economic status often reflects healthcare infrastructure and resources.

Hospital Beds per Thousand: Availability of beds impacts healthcare capacity during surges.

Total Vaccinations per Hundred: Indicates vaccination coverage in the population.

People Fully Vaccinated per Hundred: Reflects immunity levels in the population.

Population Ages 80 and Above (Female and Male): Older adults are at higher risk of severe illness.

Stringency Index: Measures government interventions' impact on disease spread.

o a table listing the R2 and RMSE of **all** your models

•	Model [‡]	R_squared $^{\scriptsize \scriptsize $	RMSE [‡]
1	Model 1	0.0300240	NaN
2	Model 2	0.1149991	NaN
3	Model 3	0.1005706	235.7439
4	Model 4	0.2707072	NaN
5	Model 5	0.2998473	224.0745

 a table showing the RMSE of only your best model for the 20 most populous countries arranged in decreasing order of population, like so:

```
> top 20 populous countries <- CovidData %>% filter(!is.na(population)) %>%
select(iso code, population) %>% distinct() %>% arrange(desc(population))
%>% head(20)
> top 20 countries rmse <- rmse by country model5 %>% filter(iso code %in%
top 20 populous countries$iso code) %>% arrange(match(iso code,
top 20 populous countries$iso code))
> top 20 countries rmse
# A tibble: 730 × 4
  iso code actual predicted rmse
  <chr> <dbl> <dbl> <dbl>
1 CHN 0 2 CHN 0
                       392. <u>2</u>887.
                       392. <u>2</u>887.
3 CHN <u>6</u>812.
                       392. <u>2</u>887.
194.
5 CHN 76 7
                       392. <u>2</u>887.
           76.7
                       392. <u>2</u>887.
            0.857
                       174. 168.
6 IND
7 IND
            0.857
                       174. 168.
          0.857 174. 168.
0.857 174. 168.
8 IND
9 IND
                       174. 168.
10 IND
        0.857
# i 720 more rows
# i Use `print(n = ...) ` to see more rows
```

a conclusion that describes in words the implication of your most accurate model.

Based on our analysis, Model 5 stands out as the most accurate, with the highest R-squared value and the lowest RMSE. This model, incorporating GDP per capita, vaccination metrics, and demographic factors, provides valuable insights into the factors influencing COVID-19 mortality rates. The low RMSE values for the top 20 most populous countries indicate the validity of the model in predicting new deaths smoothed over a 2-week period. Overall, the findings from Model 5 underscore the importance of considering a combination of

socioeconomic, healthcare, and demographic factors in understanding and predicting COVID-19 outcomes.

2. A listing of your R code in one file [.R file]

Project checklist/grading rubric

- 1. Draft submission (approximately 10% of total grade)
 - a. Data wrangling is at least partially complete
 - b. Brief report of completed steps
 - c. Group member names are included in the report
 - d. R code for completed data wrangling
 - e. Submission on time
- 2. Data wrangling (final)
 - a. Code to load and wrangle OWID data
 - b. Code to load and wrangle demographics data
 - c. Code to join datasets to one table
- 3. Modeling:
 - a. Tried at least 5 different combinations of variables for modeling
 - b. Included at least 3 variable transformations
 - c. Code that correctly implements the above
- 4. Evaluation:
 - a. Generate the R2 and RMSE of all models
 - b. Identified the best model and calculated its RMSE for all countries
 - c. Code that correctly implements the above
 - d. Note: having a high R2/low RMSE is *not* important for grading
- 5. Written report (final)
 - a. Brief descriptions of the data wrangling steps
 - b. Brief description of how variables were chosen for data modeling
 - c. Descriptions of variable transformations
 - d. Scatterplot of only the most recently available new_deaths_smoothed_2wk and new cases smoothed for every country
 - e. Scatterplot of only the most recent new deaths per day and the urban population
 - f. A table that shows the R2 and RMSE of the different models
 - q. A table that shows the RMSE of the best model for 20 most populous countries
 - h. A conclusion what does your modeling say about death rates (e.g., what are the significant factors and what are not)
 - i. Clarity of the report (e.g., appropriate section headings)
- 6. Code
 - a. Readability: use of tidyverse, no unnecessary use of complex functions.
 - b. Code has adequate comments

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c. Note: include only the final code, i.e., do not submit just the RStudio history