

Question 1 – Bash

- a) Using “echo”, print your student number to the terminal. Additionally, print out your username from the operating system. Take a screenshot and include it in your submission

```
joshlegrice@Josh-MacBook-Pro-2 ~ % echo "Student Number: 720017170"
echo "Username: $(whoami)"
Student Number: 720017170
Username: joshlegrice
```

- b) Move inside the directory DATE_FILES, which was provided along with unit 2 of the course, which you should store somewhere on your computer.

```
joshlegrice@Josh-MacBook-Pro-2 ~ % cd /Users/joshlegrice/Desktop/University/3rd\ Year/Data\ Science\ in\ Economics/DATE_FILES
joshlegrice@Josh-MacBook-Pro-2 DATE_FILES %
```

cd = changes the current working directory to the file path given

- c) Count the number of files in this directory.

ls -l = Lists all files in the directory, one per line

| allows the output of the command before to be used as the input to the next command

wc -l = Counts the number of lines in the output of ls -l

\$ = allow the code inside the brackets to be executed and not just echoed, like Python f string

```
joshlegrice@Josh-MacBook-Pro-2 DATE_FILES % echo "Number of files: $(ls -l | wc -l)"
Number of files:      3289
```

- d) Print the names of the first 8 files in this directory, along with information about their ownership, date, and size.

```
joshlegrice@Josh-MacBook-Pro-2 DATE_FILES % ls -lh | head -n 8
total 26312
-rw-rw-r--@ 1 joshlegrice  staff   110B 25 Jan  2024 2015_01_01.txt
-rw-rw-r--@ 1 joshlegrice  staff   110B 25 Jan  2024 2015_01_02.txt
-rw-rw-r--@ 1 joshlegrice  staff   110B 25 Jan  2024 2015_01_03.txt
-rw-rw-r--@ 1 joshlegrice  staff   110B 25 Jan  2024 2015_01_04.txt
-rw-rw-r--@ 1 joshlegrice  staff   110B 25 Jan  2024 2015_01_05.txt
-rw-rw-r--@ 1 joshlegrice  staff   110B 25 Jan  2024 2015_01_06.txt
-rw-rw-r--@ 1 joshlegrice  staff   110B 25 Jan  2024 2015_01_07.txt
```

ls -lh = lists the contents of the directory in long (l) format and human-readable (h).

| allows the output of the command before to be used as the input to the next command

head -n 8 = only displays the first 8 lines of the output

- e) Move to the parent directory of this folder

```
joshlegrice@Josh-MacBook-Pro-2 DATE_FILES % cd ..
```

cd = change directory to the file path given

.. = indicates the parent directory of the current file

- f) Create a new directory there, named second_10_days

```
joshlegrice@Josh-MacBook-Pro-2 Data Science in Economics % mkdir -p second_10_days
```

mkdir = command to make a new directory

-p = ensures parent directories exist

second_10_days = the name of the new directory

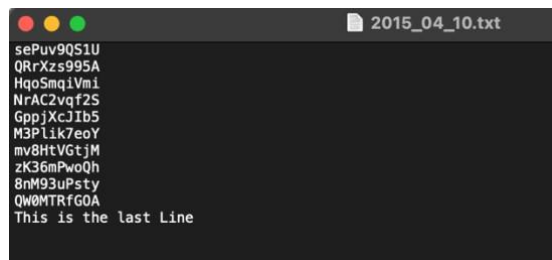
- g) Copy from the DATE_FILES directory the files that are related to the days 10-19 of every month to the newly created directory.

```
joshlegrice@Josh-MacBook-Pro-2 Data Science in Economics % ls DATE_FILES | awk '/_[1][0-9]/ {print "DATE_FILES/"$0}' | xargs -I {} cp {} second_10_days/
```

```
# ls DATE_FILES = prints the contents of the directory DATE_FILES
# awk '/_[1][0-9]/ {print "DATE_FILES/" $0}'
    # /_[1][0-9]/ = Regular expression to find dates that have _10 to _19
    # {print "DATE_FILES/" $0} = prints out the entire file path of the selected files
# xargs -l {} cp {} second_10_days/
    # xargs = processes each file one by one
    # -l {} = allows {} to be replaced with filename
    # cp {} second_10_days/ = copies selected file to second_10_days
```

- h) Move inside second_10_days directory, and append the line “This is the last Line” to the end of file 2015_04_10**

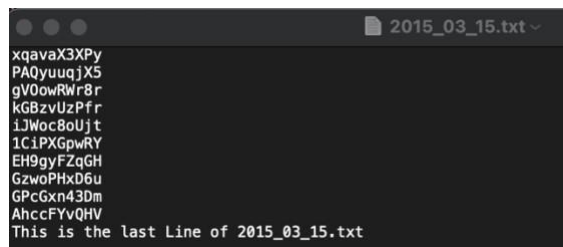
```
joshlegrice@Josh-MacBook-Pro-2 second_10_days % cd /Users/joshlegrice/Desktop/University/3rd\ Year/Data\ Science\ in\ Economics/second_10_days
joshlegrice@Josh-MacBook-Pro-2 second_10_days % echo "This is the last Line" >> 2015_04_10.txt
```



```
# cd ..... = moves to the file path shown
# echo "This is the last Line" = outputs the text This is the last Line
# >> 2015_04_10.txt = appends the echoed text into the file 2015_04_10.txt
```

- i) Write a one-line command to append the line “This is the last Line of X”, where X is the name of the file, to the end of every file in the directory second_10_days**

```
joshlegrice@Josh-MacBook-Pro-2 second_10_days % find . -type f -exec bash -c 'echo "This is the last Line of $(basename "$1")" >> "$1" _ {} \;
```



```
# find . = recursively searches the current directory
# -type f = only searches files not directories
# -exec bash -c = runs a bash command for each file found
# echo "This is the last Line of $(basename "$1")" = outputs 'This is the last Line of (only the name of the file)'
# >> "$1" _ {} \; = appends the output of the echo into the file.
```

- j) Using Bash: create a bash file Q1.sh. Write your code from (i) to it. Run the file Q1.sh including a screenshot showing how this runs on your system. Please explain any steps needed to run this file.**

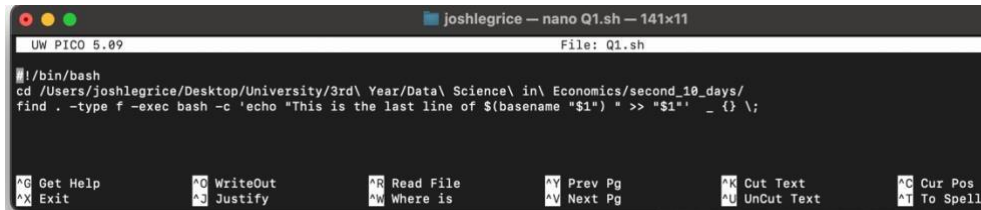
Had to place the .sh file into another directory as if placed in the second_10_days directory, it would write into the Q1.sh file with 'this is the last Line of Q1.sh'

First step = Open an .sh file

```
joshlegrice@Josh-MacBook-Pro-2 ~ % nano Q1.sh
```

Second step = Write code in

.sh file

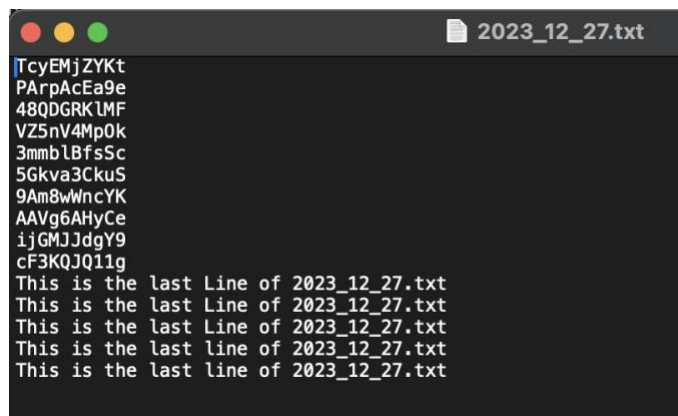


```
UW PICO 5.09 File: Q1.sh
#!/bin/bash
cd /Users/joshlegrice/Desktop/University/3rd\ Year/Data\ Science\ in\ Economics/second_10_days/
find . -type f -exec bash -c 'echo "This is the last line of $(basename "$1")" >> "$1" _ {} \;
```

Final Step = Run .sh file

```
Last login: Thu Feb 20 11:29:33 on console
joshlegrice@Josh-MacBook-Pro-2 ~ % ./Q1.sh
joshlegrice@Josh-MacBook-Pro-2 ~ %
```

Output in an
lot to make sure



```
2023_12_27.txt
TcyEMjZYkt
PArpAcEa9e
48QDGRKLMF
VZ5nV4Mp0k
3mmbLBfsSc
5Gkva3CkuS
9Am8wWncYK
AAVg6AHyCe
ijGMJJdgY9
cF3KQJQ11g
This is the last Line of 2023_12_27.txt
This is the last Line of 2023_12_27.txt
This is the last Line of 2023_12_27.txt
This is the last line of 2023_12_27.txt
This is the last line of 2023_12_27.txt
```

example file – I ran it a
it worked

Question 2 – SQL

- a) Create a new database in SQLite named Q2.db

```
joshlegrice@Josh-MacBook-Pro-2 Assignment % sqlite3 Q2.db
SQLite version 3.43.2 2023-10-10 13:08:14
Enter ".help" for usage hints.
sqlite>
```

- b) Create two tables named US_Code and US_Pop with column headings that match these two data frames

```
CREATE TABLE US_Code (
  CountryCode VARCHAR(5),
  ZipCode VARCHAR(10) PRIMARY KEY,
  City VARCHAR(100),
  StateFull VARCHAR(50),
  State2 VARCHAR(5),
  CountyFull VARCHAR(100),
  FIPSCountyCode VARCHAR(10),
  MunicipalityFull VARCHAR(100),
  MunicipalityCode VARCHAR(10),
  Latitude REAL,
  Longitude REAL,
  Accuracy INTEGER
);
```

```
CREATE TABLE US_Pop (
  ID INTEGER PRIMARY KEY AUTOINCREMENT,
  Geo_ID VARCHAR(20),
  Zip VARCHAR(10),
  Gender VARCHAR(10),
  AgeRange VARCHAR(20),
  Population INTEGER,
  FOREIGN KEY (Zip) REFERENCES US_Code(ZipCode)
);
```

- c) Insert the data from the two files into the two tables. Make sure you don't insert the column heading from the file US_population.csv. Explain how you did this.

```
sqlite> .mode tabs
sqlite> .import US_codes.txt US_Code
US_codes.txt:41098: INSERT failed: UNIQUE constraint failed: US_Code.ZipCode
US_codes.txt:41439: INSERT failed: UNIQUE constraint failed: US_Code.ZipCode
US_codes.txt:41440: INSERT failed: UNIQUE constraint failed: US_Code.ZipCode
```

Had to remove duplicates before loading in the US_Code data due to the above error

```
joshlegrice@Josh-MacBook-Pro-2 Assignment % awk -F'\t' '{print $2}' US_codes.txt | sort | uniq -d
09464
96860
96863
joshlegrice@Josh-MacBook-Pro-2 Assignment % awk -F'\t' '!seen[$2]++' US_codes.txt > US_codes_cleaned.txt
```

awk -F'\t' '{print \$2}' US_codes.txt = Extracts the second column from the .txt file which is ZipCode

sort = sorts the values within the column

uniq -d = identifies and prints only the duplicate values = Used to visualise all duplicate values

awk -F'\t' '!seen[\$2]++' US_codes.txt = collects all the non-duplicates in the column into an array

> US_codes_cleaned.txt = saves the contents of the previous output into a new file

```
sqlite> .mode tabs
sqlite> .import US_codes_cleaned.txt US_Code
sqlite> select * from US_Code Limit 5;
```

```
sqlite> .mode box
sqlite> Select * from US_Code limit 5;
```

CountryCode	ZipCode	City	StateFull	State2	CountyFull	FIPSCountyCode	MunicipalityFull	MunicipalityCode	Latitude	Longitude	Accuracy
US	99553	Akutan	Alaska	AK	Aleutians East	013			54.143	-165.7854	1
US	99571	Cold Bay	Alaska	AK	Aleutians East	013			55.1858	-162.7211	1
US	99583	False Pass	Alaska	AK	Aleutians East	013			54.841	-163.4368	1
US	99612	King Cove	Alaska	AK	Aleutians East	013			55.0628	-162.3056	1
US	99661	Sand Point	Alaska	AK	Aleutians East	013			55.3192	-160.4914	1

.mode tabs to set the delimiter to tabs to distinguish columns

Remove headers from the US_populations.csv

```
joshlegrice@Josh-MacBook-Pro-2 Assignment % tail -n +2 US_population.csv > US_population_cleaned.csv
joshlegrice@Josh-MacBook-Pro-2 Assignment %
```

tail -n +2 = starts at line 2 and collects all rows

> US_population_cleaned.csv = moves the new data into the new file

I had trouble with importing the data straight into the US_Pop table due to this error

```
[sqlite> .mode csv
sqlite> .import US_Pop_Clean.csv US_Pop
```

```
US_Pop_Clean.csv:125718: expected 6 columns but found 5 - filling the rest with NULL
US_Pop_Clean.csv:125718: INSERT failed: datatype mismatch
US_Pop_Clean.csv:125719: expected 6 columns but found 5 - filling the rest with NULL
US_Pop_Clean.csv:125719: INSERT failed: datatype mismatch
```

So, I imported the data into a temporary table and then copied the data into US_Pop

```
CREATE TABLE temp_US_Pop (
  Geo_ID VARCHAR(20),
  Zip VARCHAR(10),
  Gender VARCHAR(10),
  AgeRange VARCHAR(20),
  Population INTEGER
);
```

```
sqlite> .mode csv
sqlite> .import US_population_cleaned.csv temp_US_Pop
sqlite> .mode box
sqlite> Select * from temp_US_Pop limit 5;
```

Geo_ID	Zip	Gender	AgeRange	Population
8600000US61747	61747	female	30--34	50
8600000US64120	64120	male	85--	5
8600000US95117	95117	male	30--34	1389
8600000US74074	74074	female	60--61	231
8600000US58042	58042	female	0--4	56

Inserting data from temp table to US_Pop

```
sqlite> INSERT INTO US_Pop (Geo_ID, Zip, Gender, AgeRange, Population)
...> SELECT Geo_ID, Zip, Gender, AgeRange, Population FROM temp_US_Pop;
sqlite> Select * from US_Pop Limit 5;
```

ID	Geo_ID	Zip	Gender	AgeRange	Population
1	8600000US61747	61747	female	30--34	50
2	8600000US64120	64120	male	85--	5
3	8600000US95117	95117	male	30--34	1389
4	8600000US74074	74074	female	60--61	231
5	8600000US58042	58042	female	0--4	56

- d) Write an SQL query to print the total population per gender (using the US_Pop table only)

```
[sqlite> Select Gender, Sum(Population) as total
...> From US_Pop
...> GROUP BY Gender;
```

Gender	total
female	158893428
male	153550999

- e) Write an SQL query to print the total population per gender but join the two tables. If you see any difference in your results between this question and part (d), explain why this occurs.

```
sqlite> SELECT Gender, SUM(Population) AS Total_Population
...> FROM US_Pop
...> INNER JOIN US_Code ON US_Code.ZipCode = US_Pop.Zip
...> GROUP BY Gender;
```

Gender	Total_Population
female	145020753
male	140467081

The difference is because INNER JOIN only includes records where zip codes exist in both US_Pop and US_Code, excluding unmatched zip codes from US_Pop. This results in a lower total population in part (e) compared to part (d).

- f) Write an SQL query to print the total population per age group (use the US_Pop table only).

```
[sqlite> Select AgeRange, SUM(Population) as total
...> From US_Pop
...> Group by AgeRange;
```

AgeRange	total
0--4	20424753
10--14	20944112
15--17	13122942
18--19	9199406
20--20	4576820
21--21	4406896
22--24	12860695
25--29	21343672
30--34	20208179
35--39	20419129
40--44	21131371
45--49	22954730
5--9	20587220
50--54	22536142
55--59	19886767
60--61	7200563
62--64	9834008
65--66	5394788
67--69	7214846
70--74	9413691
75--79	7418022
80--84	5809980
85--	5555695

- g) Write an SQL query to print the Top 10 largest states (full name) in terms of population size

```
---- error here
sqlite> SELECT c.StateFull, SUM(p.Population) AS Total_Population
...> FROM US_Pop p
...> JOIN US_Code c ON p.Zip = c.ZipCode
...> GROUP BY c.StateFull
...> ORDER BY Total_Population DESC
...> LIMIT 10;
```

StateFull	Total_Population
California	37249464
Texas	25144800
New York	19377841
Florida	18801226
Illinois	12830581
Pennsylvania	12702102
Ohio	11535123
Michigan	9883612
Georgia	9687711
North Carolina	9535477

- h) Write an SQL query to print the number of existing counties (not countries) in the database

```
sqlite> SELECT COUNT(DISTINCT CountyFull) AS Total_Counties  
...> FROM US_Code;
```

Total_Counties
1853

- i) Write an SQL query to print the total population per gender and age group for any counties containing “Middlesex” in their name.

```
sqlite> SELECT p.Gender, p.AgeRange, SUM(p.Population) AS Total_Population  
...> FROM US_Pop p  
...> JOIN US_Code c ON p.Zip = c.ZipCode  
...> WHERE c.CountyFull LIKE '%Middlesex%'  
...> GROUP BY p.Gender, p.AgeRange  
...> ORDER BY p.Gender, p.AgeRange;
```

Gender	AgeRange	Total_Population
female	0--4	226
female	10--14	278
female	15--17	212
female	18--19	125
female	20--20	65
female	21--21	47
female	22--24	137
female	25--29	264
female	30--34	227
female	35--39	271
female	40--44	357
female	45--49	509
female	5--9	304
female	50--54	572
female	55--59	563
female	60--61	206
female	62--64	357
female	65--66	215
female	67--69	287
female	70--74	359
female	75--79	262
female	80--84	200
female	85--	228
male	0--4	300
male	10--14	296
male	15--17	214
male	18--19	153
male	20--20	68
male	21--21	67
male	22--24	169
male	25--29	313
male	30--34	247
male	35--39	295
male	40--44	374
male	45--49	483
male	5--9	270
male	50--54	555
male	55--59	499
male	60--61	187
male	62--64	331
male	65--66	224
male	67--69	303
male	70--74	352
male	75--79	241
male	80--84	191
male	85--	106

Question 3 + 4

720017170

Question 3 - See .qmd for all code

(a) Import each dataset into memory as a separate data frame, keeping all countries as your sample.

```
plt.rcParams.update({'font.size': 14})

# Loading in the Data
Health_Data = pd.read_csv('Data/Health.csv', index_col=None)
Infant_Data = pd.read_csv("Data/Infant.csv", index_col=None)

# Replace .. with NA
Health_Data.replace("..", pd.NA, inplace=True)
Infant_Data.replace("..", pd.NA, inplace=True)

# Removing unnecessary columns
Health_Data = Health_Data.drop(columns=['Series Name', 'Series Code'])
Infant_Data = Infant_Data.drop(columns=['Series Name', 'Series Code'])

# Remove names in []
Health_Data.columns = Health_Data.columns.str.replace(r'\[.*\]', '', regex=True)
Infant_Data.columns = Infant_Data.columns.str.replace(r'\[.*\]', '', regex=True)

print(Infant_Data.head())
print(Health_Data.head())
```

	Country Name	Country Code	2000	2001	2002	2003	2004	2005	2006	\
0	Afghanistan	AFG	92	89.3	86.6	83.7	80.9	78	75.1	
1	Albania	ALB	24	22.9	21.6	20.4	19.1	17.8	16.5	
2	Algeria	DZA	35.6	34.3	33	31.6	30.3	29	27.8	
3	American Samoa	ASM	<NA>	<NA>	<NA>	<NA>	<NA>	<NA>	<NA>	

4	Andorra	AND	6.5	6.3	6	5.8	5.6	5.3	5.1
---	---------	-----	-----	-----	---	-----	-----	-----	-----

	2007	...	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
0	72.3	...	56.2	54.6	53	51.5	50.1	48.8	47.4	46.1	44.8	<NA>
1	15.3	...	8.8	8.5	8.4	8.3	8.3	8.3	8.4	8.4	8.4	<NA>
2	26.6	...	22	21.7	21.4	21	20.6	20.1	19.7	19.2	18.7	<NA>
3	<NA>	...	<NA>	<NA>	<NA>	<NA>	<NA>	<NA>	<NA>	<NA>	<NA>	<NA>
4	4.9	...	3.5	3.4	3.2	3.1	3	2.9	2.8	2.7	2.6	<NA>

[5 rows x 26 columns]

	Country Name	Country Code	2000	2001	2002	\
0	Afghanistan	AFG	<NA>	<NA>	17.00758553	
1	Albania	ALB	65.1501236	73.78884125	78.99478149	
2	Algeria	DZA	62.11769485	67.33850098	66.94760132	
3	American Samoa	ASM	<NA>	<NA>	<NA>	
4	Andorra	AND	1287.00280762	1336.21142578	1486.171875	

	2003	2004	2005	2006	2007	\
0	17.81492424	21.42946434	25.10707283	28.91982269	32.71720505	
1	106.29218292	138.11340332	152.12762451	166.81382751	212.61096191	
2	76.23547363	93.02433014	101.30373383	117.43313599	151.77920532	
3	<NA>	<NA>	<NA>	<NA>	<NA>	
4	1772.71337891	1990.0748291	2214.64697266	2139.27539063	2489.43115234	

	...	2014	2015	2016	2017	\
0	...	60.18957901	60.05854034	61.48645782	66.90921783	
1	...	295.12359619	255.35635376	277.04321289	297.4619751	
2	...	361.15942383	292.275177	261.40023804	265.83843994	
3	...	<NA>	<NA>	<NA>	<NA>	
4	...	3089.84301758	2688.20629883	2755.44848633	2873.29614258	

	2018	2019	2020	2021	2022	2023
0	71.33430481	74.23410797	80.28805542	81.31976318	<NA>	<NA>
1	351.3012085	367.75839233	396.88024902	464.74285889	<NA>	<NA>
2	266.46469116	235.99041748	206.03512573	204.56661987	<NA>	<NA>
3	<NA>	<NA>	<NA>	<NA>	<NA>	<NA>
4	3164.38842773	3026.59741211	3269.29736328	3505.99145508	<NA>	<NA>

[5 rows x 26 columns]

(b) If data are not already stored in this way, please reshape data so that they consist of a single line of data for each country and year.

```
# Pivoting the Data into a long format
Health_Data_long = pd.melt(Health_Data,
    id_vars=['Country Name', 'Country Code'],
    var_name='Year',
    value_name='Heathcare Expenditure (USD)')
Infant_Data_long = pd.melt(Infant_Data,
    id_vars=['Country Name', 'Country Code'],
    var_name='Year',
    value_name='Infant Mortality Rates (per 1,000 live births)')
```

	Country Name	Country Code	Year	Heathcare Expenditure (USD)
0	Afghanistan	AFG	2000	<NA>
1	Albania	ALB	2000	65.1501236
2	Algeria	DZA	2000	62.11769485
3	American Samoa	ASM	2000	<NA>
4	Andorra	AND	2000	1287.00280762

	Country Name	Country Code	Year	Infant Mortality Rates (per 1,000 live births)
0	Afghanistan	AFG	2000	92
1	Albania	ALB	2000	24
2	Algeria	DZA	2000	35.6
3	American Samoa	ASM	2000	<NA>
4	Andorra	AND	2000	6.5

(c) Calculate the total number of countries observed in each data frame Calculate the total number of years observed in each data frame.

```
# Counts the number of unique contries
num_countries_FDI = Health_Data_long["Country Name"].nunique()

# Outputs the number of unique countries using an f string
print(f"Total number of unique countries in Health_Data: {num_countries_FDI}")

num_years_FDI = Health_Data_long["Year"].nunique() # Counts the number of unique years
print(f"Total number of unique years observed in Health_Data: {num_years_FDI}")
```

```

num_countries_GDP = Infant_Data_long["Country Name"].nunique()
print(f"Total number of unique countries in Infant_Data: {num_countries_GDP}")

num_years_GDP = Infant_Data_long["Year"].nunique()
print(f"Total number of unique years observed in Infant_Data: {num_years_GDP}")

```

```

Total number of unique countries in Health_Data: 217
Total number of unique years observed in Health_Data: 24
Total number of unique countries in Infant_Data: 217
Total number of unique years observed in Infant_Data: 24

```

(d) Calculate the number of observations for which data is missing

```

# Sums the number of missing values in each dataset
missing_values_Health = Health_Data_long.isna().sum().sum()
print(f"Total missing observations in Health_Data: {missing_values_Health}")

missing_values_Infant = Infant_Data_long.isna().sum().sum()
print(f"Total missing observations in Infant_Data: {missing_values_Infant}")

```

```

Total missing observations in Health_Data: 1099
Total missing observations in Infant_Data: 700

```

(e) Join the two files by country and year so that you have single dataframe containing both variables. Explain clearly what type of join this is, and carefully check that the number of observations resulting from the join makes sense.

```

# Merge the data on Country Name, Country code and Year
merged_data = pd.merge(Health_Data_long, Infant_Data_long, on=['Country Name',
'Country Code', 'Year'])
print(merged_data.head())

# Print the number of rows in the DataFrame
num_rows = merged_data.shape[0]
print(f"Number of rows in the DataFrame: {num_rows}")

```

	Country Name	Country Code	Year	Healthcare Expenditure (USD)	\
0	Afghanistan	AFG	2000	<NA>	
1	Albania	ALB	2000	65.1501236	
2	Algeria	DZA	2000	62.11769485	

3	American Samoa	ASM	2000	<NA>
4	Andorra	AND	2000	1287.00280762

Infant Mortality Rates (per 1,000 live births)

0	92
1	24
2	35.6
3	<NA>
4	6.5

Number of rows in the DataFrame: 5208

The join completed in the above code chunk is an inner join and only keeps rows that exist in both `Health_Data_long` and `Infant_Data_long`. If a country or year exists in one dataset but not the other, it will be dropped.

Question 4 - Investigating the Relationship Between Current Healthcare Expenditure per Capita and Infant Mortality Rates from 2000 - 2022

Missing Data

Table 1: Missing Observations of Variables

Variable	Total Missing Observations	Percentage of Missing Observations
Health Expenditure	1099	21.1
Infant Mortality Rate	700	13.4

Both datasets contained a large amount of missing data, illustrated in Table 1. Potentially due to countries not collecting the data or collecting the data at different year intervals. Missing data can have an impact on data analysis if not handled properly and can lead to incorrect conclusions. The year 2023 contained no data; therefore, this column was dropped. To deal with the other missing data, I decided to drop all rows containing missing data, sometimes, this could result in a significant reduction of sample size; however, in this case with observational data, 1099 observations were removed (21.1% of the dataset) and only 27 countries were dropped, indicating this was an effective method to handling missing data as there were still 4109 observations. An alternative approach would've been mean, multiple or regression imputation if dropping rows with missing data caused a significant decrease in sample size.

Summary Statistics

Table 2: Summary Statistics of Variables

Variable	N	Mean	Median	SD	Min	Max
Healthcare Expenditure (USD)	4109.0	956.0	256.7	1685.7	4.0	12473.8
Infant Mortality Rates (per 1,000 live births)	4109.0	26.9	17.7	25.0	1.4	138.3

Table 2 displays the summary statistics for healthcare expenditure (USD) and infant mortality rates (per 1,000 live births) across 4109 observations, revealing significant differences between countries.

Healthcare expenditure per Capita showed a mean of \$956.0 but a lower median of \$256.7, indicating a positively skewed distribution where only few countries spend more. The large standard deviation (\$1,685.7) and range (\$4.0–\$12,473.8) highlight large global and temporal differences in healthcare investment.

Infant mortality rates show similar variation, with a mean of 26.9 deaths per 1,000 live births and a median of 17.7. The high standard deviation (25.0) and range (1.4–138.3) may be attributed to major differences in healthcare investment and quality.

Distribution Analysis

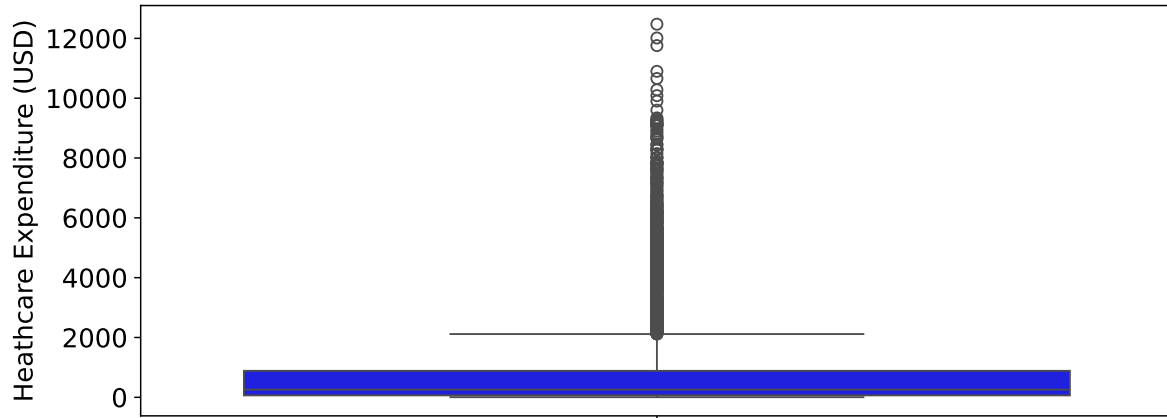


Figure 1: Box Plot of Healthcare expenditure Per Capita (USD)

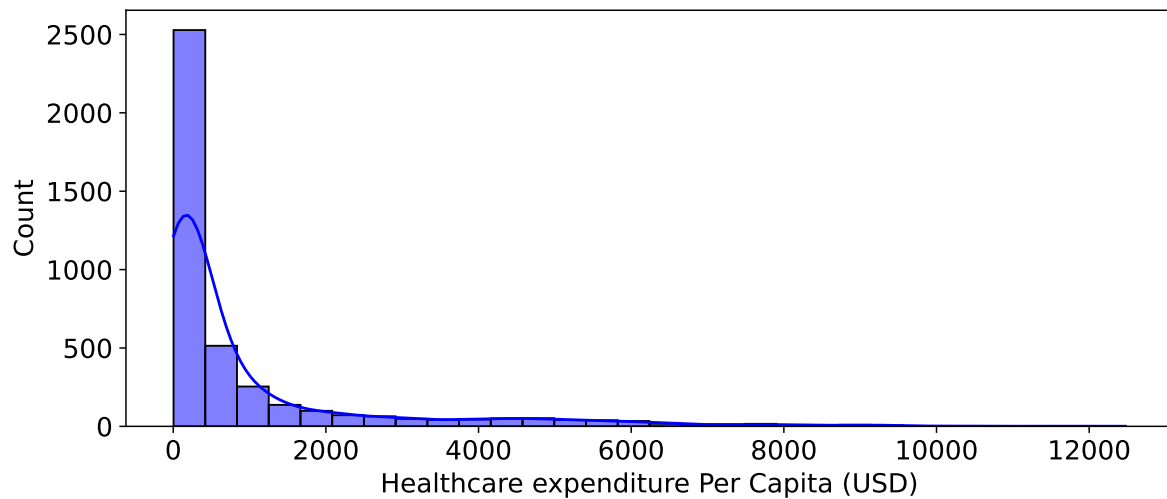


Figure 2: Histogram with Density of Healthcare expenditure Per Capita (USD)

Figures 1 and 2 show the distribution of healthcare expenditure per capita. Figure 1 shows that healthcare expenditure is highly positively skewed, supporting the analysis from the summary statistics. The median expenditure is toward the lower quartile, indicating that most countries have relatively little expenditure, while a few have significantly higher spending. The whiskers of the box plot are short, suggesting that a large proportion of the data is concentrated within a lower range, while the numerous outliers highlight extreme expenditure levels in some countries.

Figure 2 reiterates the positive skew of the data. Most countries have low healthcare expenditure, grouped toward the left of the axis, with just a handful having exceptionally high expenditures. The density curve (smooth blue line) shows the exponential drop in frequency as expenditure increases, emphasising that high-spending countries are exceptions rather than the rule.

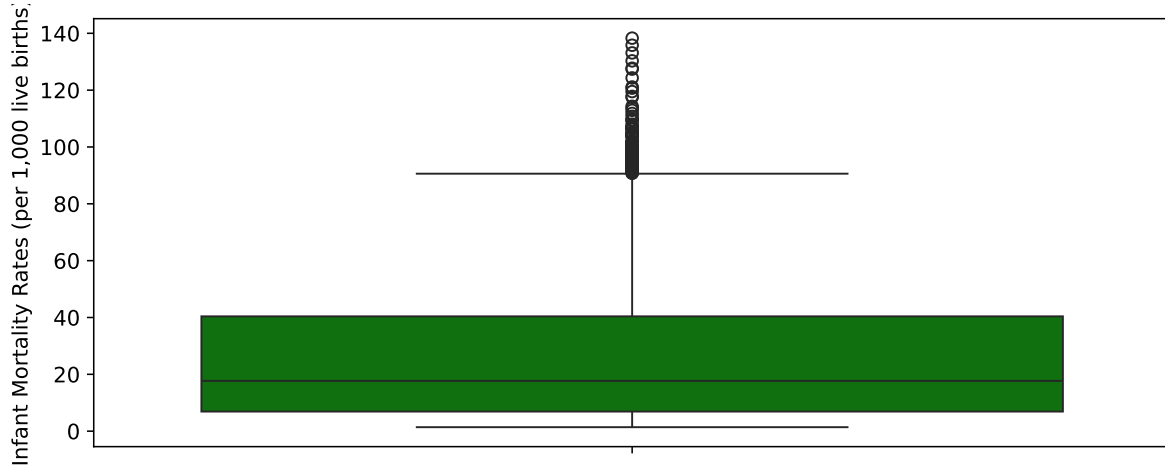


Figure 3: Box Plot of Infant Mortality Rate (per 1,000 live births)

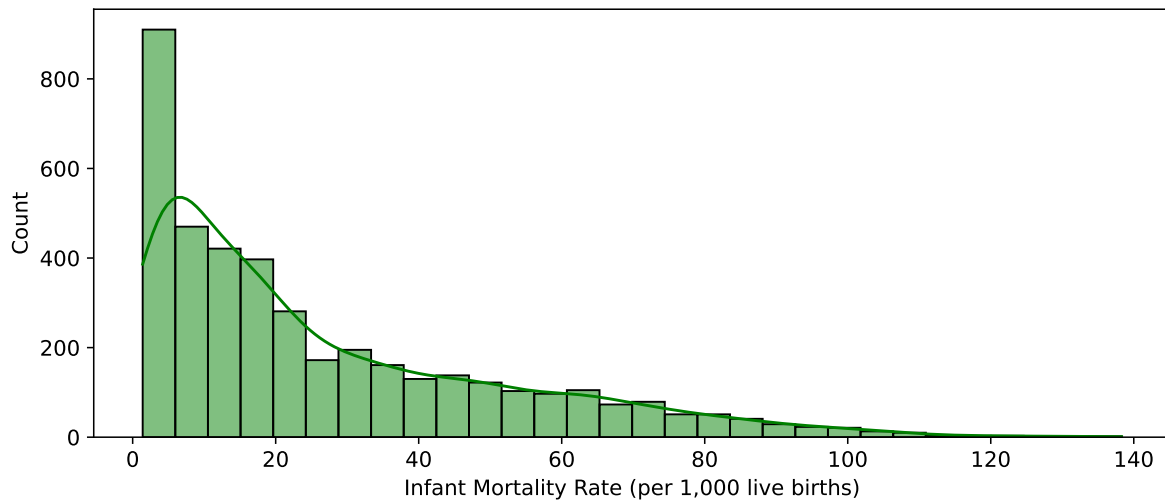


Figure 4: Histogram with Density of Infant Mortality Rate (per 1,000 live births)

The distribution of infant mortality rate seen in Figures 3 and 4 is similar to that of healthcare expenditure per capita.

The variable is also positively skewed, as seen by the median being significantly lower than the upper quartile. There are several outliers in Figure 3, with specific countries having abnormally high infant mortality rates.

This is supported by Figure 4, which displays that as rates rise frequency falls dramatically, the majority of observations being below 40 deaths per 1,000 live births. While infant mortality is low in many nations, it is much higher in others, most likely because of infrastructural constraints, economic considerations, and healthcare discrepancies. This may indicate a causal relationship between healthcare expenditure per capita and infant mortality rate needing investigation.

Correlation Analysis

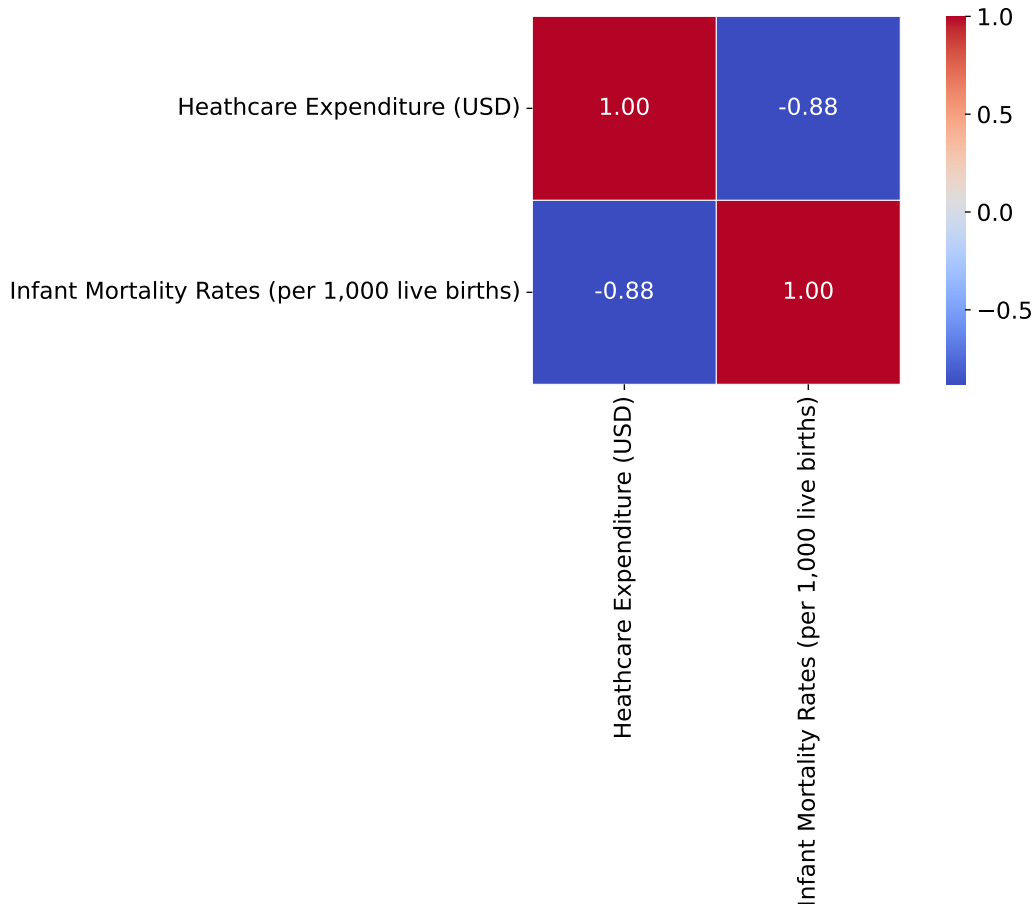


Figure 5: Spearman Rank Correlation Matrix of Healthcare Expenditure and Infant Mortality Rates

Figure 5 illustrates the relationship between healthcare expenditure per capita and infant mortality rates. The correlation coefficient of -0.88 indicates a strong negative correlation, suggesting that as healthcare expenditure increases, infant mortality rates decrease. This aligns with economic and public health expectations, where greater investment in healthcare typically leads to better medical infrastructure, improved care, and reduced infant deaths. Spearman's rank correlation is used as it captures non-linear relationships, making it more robust. However, correlation does not imply causation, and additional factors such as health-

care efficiency, socioeconomic disparities, and government policies could be confounders in this relationship.

Regression Analysis

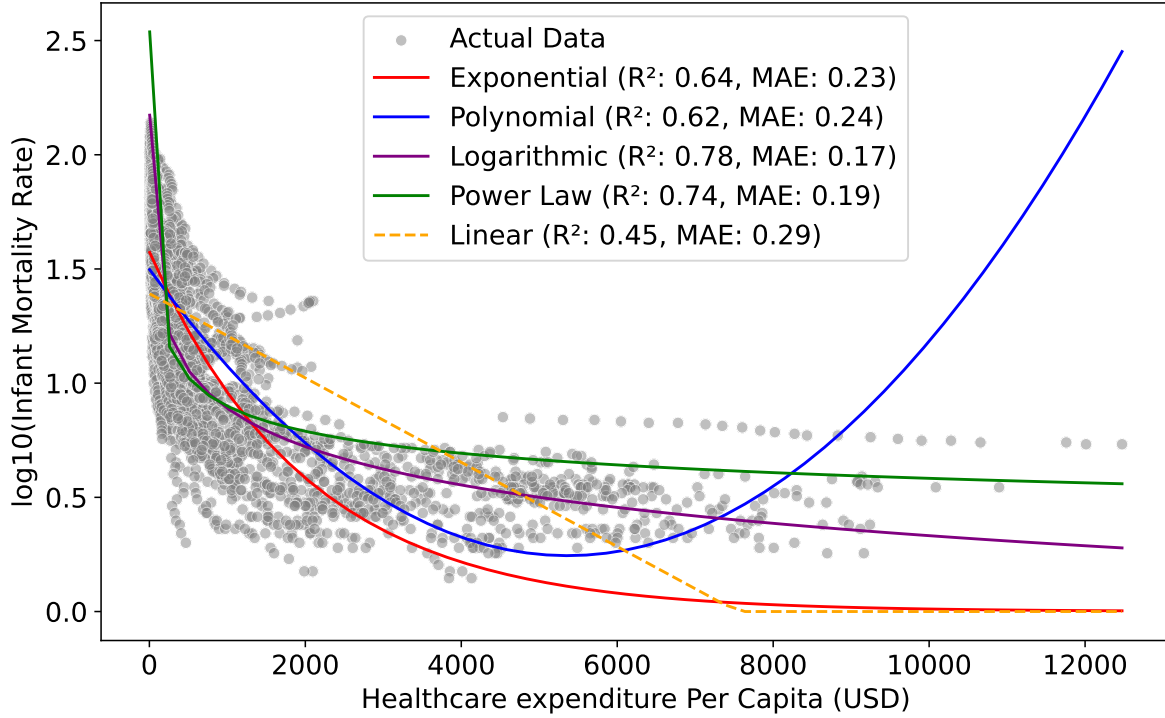


Figure 6: Comparison of Regression Models: Healthcare Spend vs Infant Mortality Rate

Figure 6 compares five regression models; exponential, polynomial, logarithmic, power law, and linear, in quantifying the relationship between healthcare expenditure per capita and infant mortality rates. A \log_{10} transformation was performed to deal with the skewness of the data and reduce heteroscedasticity. All models are constrained to prevent infant mortality predictions below 0, ensuring a realistic representation. The linear model performs worst ($R^2 = 0.45$), not capturing the non-linearity of the data, indicating that non-linear regression methods may fit the relationship better.

Polynomial regression initially follows the relationship but overall performs poorly, shown by its lower R^2 of 0.62. Exponential and Power Law regression perform well ($R^2 = 0.64$ and 0.74 , respectively), capturing the steep initial decline in infant mortality rates before plateauing at higher expenditure levels. The logarithmic model achieves the best fit with an R^2 of 0.78, revealing that 78% of the variance in infant mortality rates is due to healthcare expenditure per capita, and the lowest mean absolute error (MAE) of 0.17.

This analysis proves that non-linear models, particularly power law and logarithmic regression, provide the most accurate representation of the data, reiterating the non-linearity of the

relationship between healthcare expenditure per capita and infant mortality rates shown by Figure 5.

Regression Model Evaluation

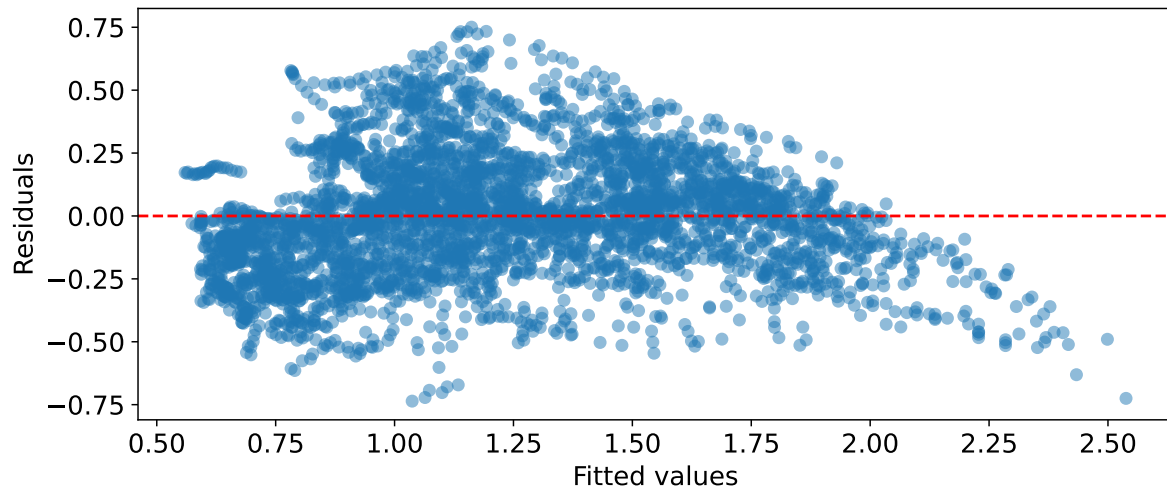


Figure 7: Residual Plot of Logarithmic Regression

The residuals, illustrated by Figure 7, for the logarithmic regression model indicate some issues with fit of the model. The residuals display a clear pattern rather than being randomly scattered around 0, suggesting heteroscedasticity, where the variance of residuals increases as fitted values increase. This means that the model performs well at low levels of healthcare expenditure but struggles to maintain accuracy as expenditure increases. To address these issues, applying a log transformation to both variables or using alternative regression techniques may help improve the model's fit.

Time Series Analysis

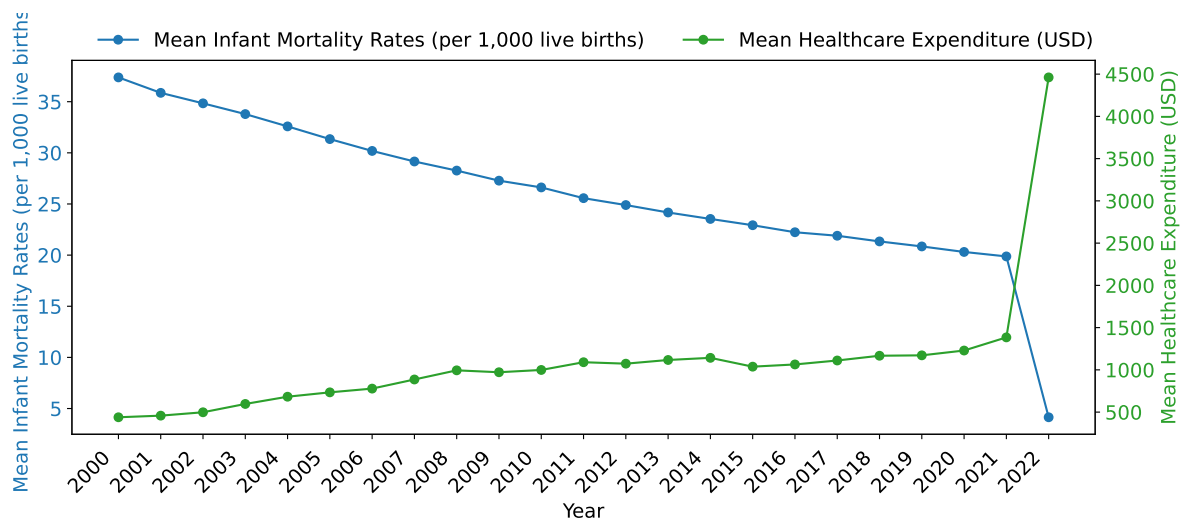


Figure 8: Time Series Analysis of Mean Infant Mortality Rates and Healthcare Expenditure

Figure 8 illustrates the non-linear negative association between mean infant mortality rates (IMR) and mean healthcare expenditure from 2000 to 2022. The trend indicates healthcare expenditure has steadily climbed, indicating greater investment in health infrastructure and services. Leading to a continual drop in IMR, reflecting these improvements in healthcare, economic development, and medical advances

An anomaly occurs in 2022 when healthcare expenditure increases disproportionately to other years and infant death rates significantly decrease. This large increase is likely due to pandemic-related expenditure, emergency health interventions, or data errors.

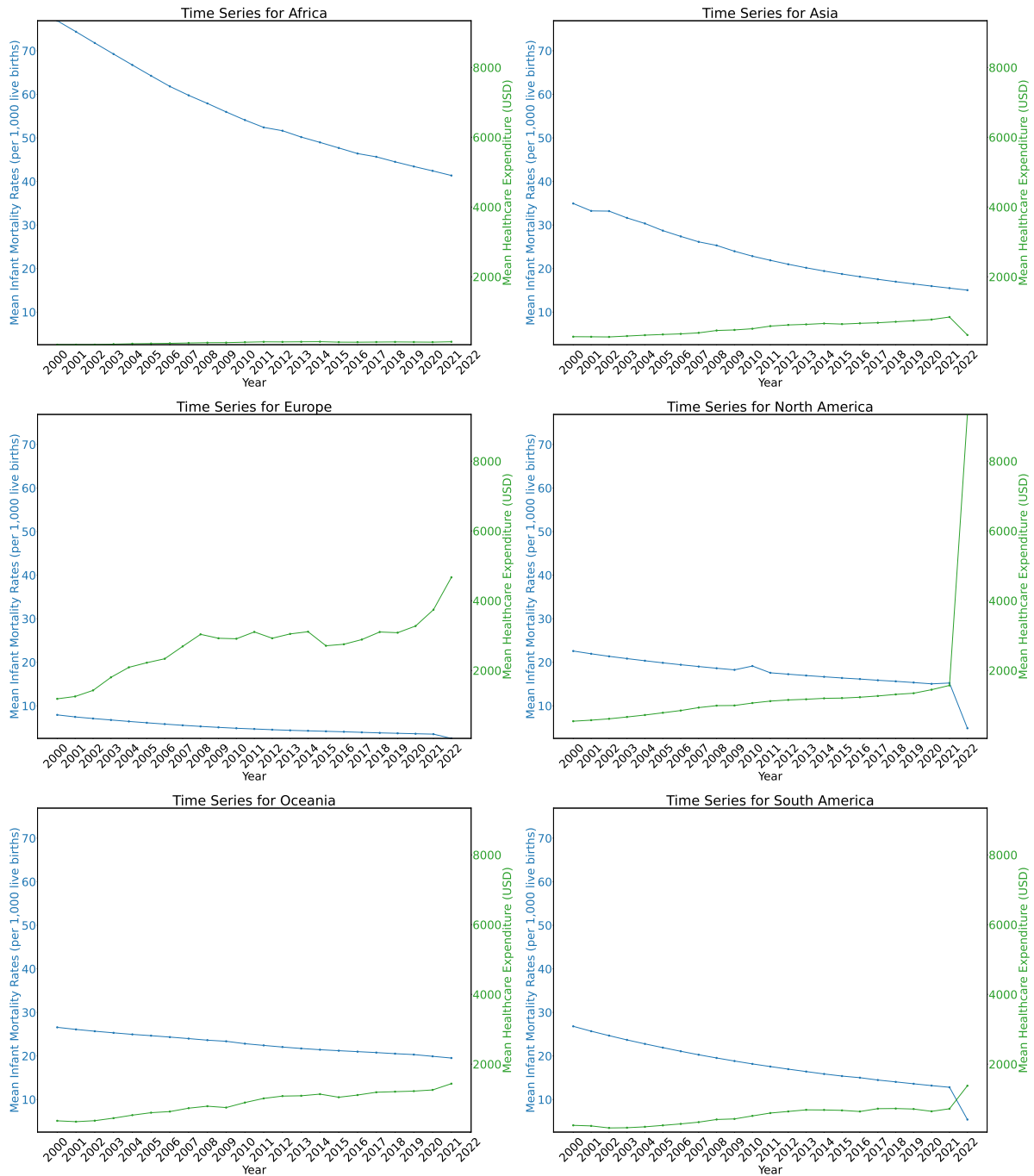


Figure 9: Time Series Analysis of Mean Infant Mortality Rates and Healthcare Expenditure By Continent

Figure 9 shows continent-specific relationships between mean IMR and mean healthcare expenditure from 2000 to 2022. The negative relationship across all continents reiterates that increasing healthcare investment has the potential to reduce infant mortality.

Asia and Africa have had considerable decreases in IMR, indicating substantial improvements in healthcare despite relatively small expenditure. Europe and North America, with larger starting expenditures, experienced lower IMR decreases, indicating diminishing returns on investment.

Healthcare expenditure rose significantly in 2022 in Europe and South America, potentially due to pandemic-related measures. This substantial rise in expenditure corresponds with an acceleration in IMR decreases, implying short-term healthcare gains.

Conclusion

In conclusion, there is a strong non-linear negative relationship between healthcare expenditure and infant mortality rates. Countries with higher healthcare investment generally experience lower infant mortality, though the impact varies based on economic and healthcare infrastructure factors.

The non-linear nature of this relationship indicates diminishing returns, where initial increases in spending lead to substantial improvements, but further investments yield smaller reductions in infant mortality. Regression and time-series analyses further reinforce this pattern, indicating long-term declines in infant mortality alongside growing healthcare expenditure.

Regional disparities are present, with high-income regions investing more per capita while achieving lower mortality rates, whereas lower-income regions show greater relative improvements despite lower absolute expenditure. The 2022 anomaly suggests short-term shifts in healthcare spending and outcomes, likely due to pandemic-driven policies.

While healthcare expenditure is an important driver of infant mortality rates, efficient allocation, accessibility, and policy effectiveness remain key determinants of long-term health improvements worldwide.

[Link to Github Repository = BEE2041 Data Science in Economics Assignment](#)