# PR\_Assign\_W5

December 4, 2020

## 1 Final Project Report: Analysis of COVID cases in Ontario, CA

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### 1.1 Week 5 - Part A: Statement of the Problem

In this study, we plan to analyze the COVID-19 cases in Ontario province. Currently, we observe the second wave of pandemic and the government plans to impose additional restrictions on different counties. Given the venues in the neighborhood of a medical center and the number of confirmed cases, we try to cluster similar cities/counties in terms of COVID behaviour and consult the government to make decisions accordingly. In the first section we analyze the data, then we try to map it, later the neighborhoud venues will be extraced using FourSquare, and as the final step the data will be clustered to 5 different categories to restrict the interactions. The first audience of this study would be the Government of Ontario and the Mayers and City councils, but the citizens also could be the second audience.

#### 1.1.1 Import libraries

Libraries imported. - Confirmed

#### 1.2 Week 5 - Part B: Data Section

The data is live COVID data that is being posted on the "https://data.ontario.ca". It includes all reported cases since the start of pandemic. The columns for each case are the exact episode date, age grouped by decade, gender, outcome (recovered, active, and death), Reporting PHU ID, name, postal code, latitude and longitude. Furthermore, using the Foursquare website, the venues near each public health unit (PHU) is extracted to find a relation between venues and the number of confirmed cases. Data URL: https://data.ontario.ca/dataset/f4112442-bdc8-45d2-be3c-12efae72fb27/resource/455fd63b-603d-4608-8216-7d8647f43350/download/conposcovidloc.csv

#### 1.3 Week 5 - Part C: Basic analysis of the received data

In the first step, we drop the cases that include 'NaN' values in their cells. Data shows handful of cases at the start of pandemic have less information, but as times go on, the information package is more complete.

After cleaning, number of confirmed cases to be analyzed in the rest of study are: 121733

A summary of data is shown in Table 1. Dataframe includes more columns, but for the sake of brevity, we just show some of the main columns.

Table 1: Daily COVID-19 Cases, Ontario Province

[5]:	Accurate_Episode_Date	Age_Group	Client_Gender	\	
0	2020-11-03	60s	MALE		
1	2020-11-23	30s	FEMALE		
2	2020-11-26	40s	FEMALE		
3	2020-11-19	70s	FEMALE		
4	2020-11-20	30s	MALE		
		Reporting	_PHU		
0	Peel	Public Hea	alth		
1	1 York Region Public Health Services				
2	Durham Region Health Department				
3	Peel	Public Hea	alth		
4	Peel	Public Hea	alth		

Now, data is grouped on a weekly basis for a better representation on plot. The onjective here is to see the confirmed cases per week and observe the trend of confirmed cases.

Table 2: Confirmed cases on a weekly basis

[6]:		Row_ID
	Accurate_Episode_Date	
	2019-12-23/2019-12-29	2
	2019-12-30/2020-01-05	2
	2020-01-06/2020-01-12	1
	2020-01-13/2020-01-19	1
	2020-01-20/2020-01-26	3

Confirmed cases are divided based on the gender to see the significance of each gender exposure to virus.

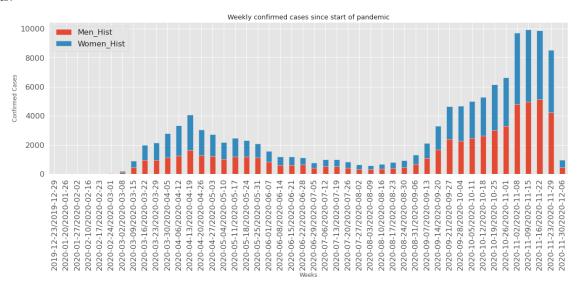


Figure 1: Weekly visualization of confirmed cases based on gender

Figure 1 shows that we are exactly in the middle of second wave. The pandemic trend graphically seems to be identical for each gender. In the next plot, we like to see how the trend of fatality has changed in the second wave compared to the first one.

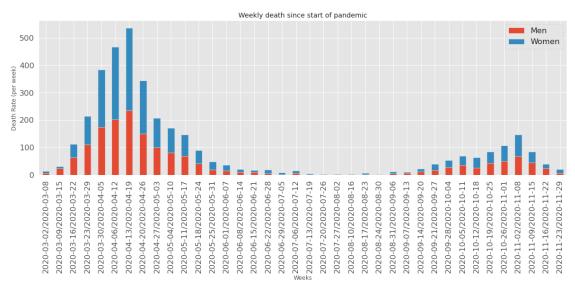


Figure 2: Fatality rate on a weekly basis since the start of pandemic

COVID-19 virus was an unprecedented pandemic. Figure 2 shows how the health knowledge of both health personnel and people has improved over time. The fatality rate of the first wave was too high while in the second wave the fatality rate droped by 80% while affection rate increased by 150%, from 4,000 cases per day to apprximately 10,000 cases per day. Cumulative fatality shows that since the start of pandemic we had more than 3500 cases died.

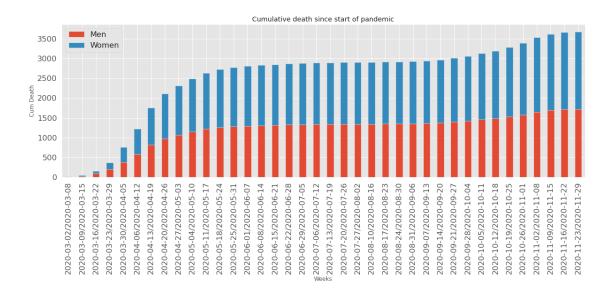
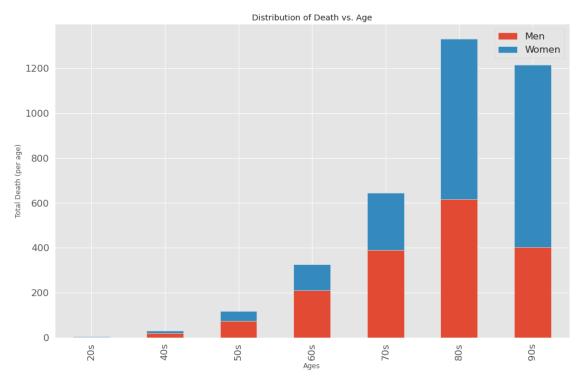


Figure 3: Cumulative fatality in Ontario Province

Another important measure is the age group of dead people since the start of pandemic. This information is highly demanded to classify and focus on the most vulnerable groups in the society. Figure 4 presents the distribution of fatality by the age group. It shows that seniors must be carefully looked after because the most cases are in the range of 60s and older. Another observation is that as age goes higher, the ratio of female to male fatality increases.



### Figure 4: Fatality versus the age group

Figure 4 shows the fatality rate decreases for the age range of 90s compared to 80s while this plot does not account for the number of confirmed cases for each

#### [11]: Text(0.5, 1.0, 'Fataility Percentage vs. Age')

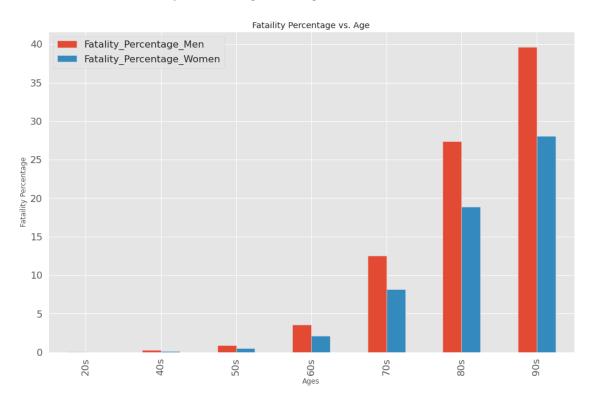


Figure 5: Fatality percentage vs. the age group

Figure 5 shows that the fatality percentage monotonicly increases vs age group and the percentage is lower for women.

### 1.4 Week 5 - Part D: Map representation of confirmed cases

Number of cases are summed up for each PHU.

Table 3: Number of total confirmed cases by each PHU

[12]:		${ t Reporting\_PHU}$	Row_ID
	0	Algoma Public Health Unit	61
	1	Brant County Health Unit	613
	2	Chatham-Kent Health Unit	515
	3	Durham Region Health Department	4692
	4	Eastern Ontario Health Unit	872

The location of each PHU and the total percentage are added to each PHU row in Table 4 and are shown in Figure 6.

Table 4: Location and address of each PHU

[13]:		${ t Reporting\_PHU}$	Row_ID R	Reporting_PHU_Postal_Code $\$	
	0	Algoma Public Health Unit	61	P6B OA9	
	1	Brant County Health Unit	613	N3R 1G7	
	2	Chatham-Kent Health Unit	515	N7M 5L8	
	3	Durham Region Health Department	4692	L1N OB2	
	4	Eastern Ontario Health Unit	872	K6J 5T1	
		Reporting_PHU_Latitude Reporti	ng_PHU_Lor	ngitude Percentage_Cases	
	0	46.532373	-84.	.314836 0.050110	
	1	43.151811	-80.	.274374 0.503561	
	2	42.403861	-82.	.208561 0.423057	
	3	43.898605	-78.	.940341 3.854337	
	4	45.029152	-74.	.736298 0.716322	

The geograpical coordinate of Sudbury is 46.49272, -80.991211.

[28]: <folium.folium.Map at 0x7efbecf75e10>

Figure 6: PHUs on map. The blue circles represents the percentage of the confirmed cases (cannot be shown)

#### 1.5 Week 5 - Part E: Finding nearby venues

### 1.5.1 Define Foursquare Credentials and Version

The credentials of the app created in FourSquare is given here:

CLIENT\_ID: 5CI5CO1LEUXWI12VXCO0100UUHPD5RHARRWPV02DQULDLVNM CLIENT\_SECRET:0NCZVFFNU3WGX0VVX4UXFBSSKSUKVEYJWG1ZB22L03SQ04MK

#### 1.5.2 Nearby Venues

Nearby venues are extraced for the following PHUs:

Algoma Public Health Unit

Brant County Health Unit

Chatham-Kent Health Unit

Durham Region Health Department

Eastern Ontario Health Unit

Grey Bruce Health Unit

Haldimand-Norfolk Health Unit

Haliburton, Kawartha, Pine Ridge District Health Unit

Halton Region Health Department

Hamilton Public Health Services

Hastings and Prince Edward Counties Health Unit

Huron Perth District Health Unit

Kingston, Frontenac and Lennox & Addington Public Health Lambton Public Health Leeds, Grenville and Lanark District Health Unit Middlesex-London Health Unit Niagara Region Public Health Department North Bay Parry Sound District Health Unit Northwestern Health Unit Ottawa Public Health Peel Public Health Peterborough Public Health Porcupine Health Unit Region of Waterloo, Public Health Renfrew County and District Health Unit Simcoe Muskoka District Health Unit Southwestern Public Health Sudbury & District Health Unit Thunder Bay District Health Unit Timiskaming Health Unit Toronto Public Health Wellington-Dufferin-Guelph Public Health Windsor-Essex County Health Unit

where, they are 2355 different venues

York Region Public Health Services

Venues are inserted into a dataframe where the top five cases are:

Table 5: List of Venues

[20]:			Reporting_PHU	Neighborhood Latitu	de Neighborhood Longitude	\
	0	Algoma Publ	ic Health Unit	46.5323	73 -84.314836	
	1	Algoma Publ	ic Health Unit	46.5323	73 -84.314836	
	2	Algoma Publ	ic Health Unit	46.5323	73 -84.314836	
	3	Algoma Publ	ic Health Unit	46.5323	73 -84.314836	
	4	Algoma Publ	ic Health Unit	46.5323	73 -84.314836	
		Venu	e Venue Latitud	e Venue Longitude	Venue Category	
	0	Shogun Sush	i 46.53080	1 -84.319091	Sushi Restaurant	
	1	Burger Do	a 46.52258	-84.319638	Burger Joint	
	2	Fratelli	46.54284	2 -84.318774	Italian Restaurant	
	3	YMC	A 46.52149	4 -84.316275	Gym / Fitness Center	
	4	North 8	46.52767	4 -84.319183	Steakhouse	

### 1.6 Week 5 - Part F: Neighborhood Venues vs Confirmed Cases in Ontario

In this section, number of confirmed cases is related to the number of venues in the surrounding counties. Figure 7 shows that there is a positive relation between confirmed cases and the number of venues in close proximity. The correlativity increases when we plot confirmed cases per venue.

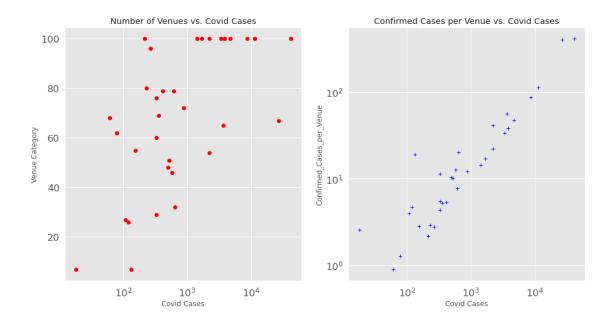


Figure 7: a) Number of venues vs. number of confirmed cases, and b) Confirmed cases per venue vs Confirmed cases in the close neighborhoud

### 1.7 Week 5 - Part G: Clustering the neighborhouds based on confirmed cases

The regions are clustered in 5 different zones to impose additional restrictions. "KMeans" function is used to cluster the venues based on the confirmed cases per venue.

[25]: <folium.folium.Map at 0x7efbeb9d4a58>

Figure 8: Ontario map including clusters (cannot be shown)

[26]: <seaborn.axisgrid.FacetGrid at 0x7efbeb9ad828>

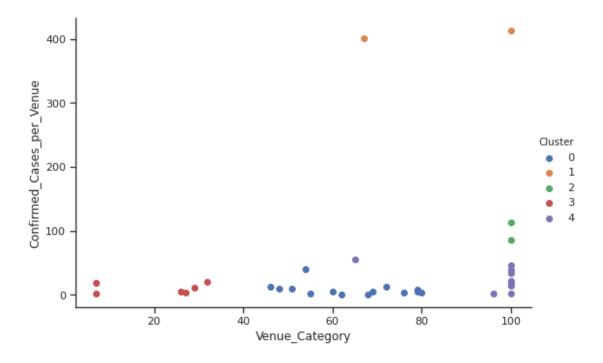


Figure 9: Confirmed cases per venue showing different clusters

#### 1.8 Week 5 - Part H: Discussion and Conclusions

Results show that we can manage cities for the next phase of restrictions based on findings of this analysis. Cluster map reveals that Toronto Downtown and Brampton region are associated with the highest level of risk which implies imposing most restrictions. Northern Toronto (newmarket region) and Ontario could be dealt similarly as the second level of risks. Detroit, London, Hamilton and some other same-size cities are in the third category. Smaller cities such as Sudbury are in the next level of decision making. And finally, the lowest risk zones can be defined as Timmins and Simcoe.