## Flu shot learning

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#### 1 Introduction

This project is being completed as the last part of the Harvard X Data Science program.

## 1.1 Project Aim

For this project, I chose the data set from the "flu shot learning" competition published on drivendata.org. The aim of the challenge is to predict H1N1 and seasonal flu vaccination rates from a number of predictors. The primary evaluation metric is the area under the receiver operating characteristic curve (AUROC).

## 1.2 Project Overview

This report contains the result from two machine learning methods:

Firstly, random forests are constructed with the package xgboost.

Secondly, linear regression is performed using the package glmnet.

I chose to only predict the h1n1\_vaccination rates for this report in order to keep it more clear. The prediction for the seasonal\_vaccination rate can be performed analogously.

## 2 Methods and Analysis

#### 2.1 Data Cleaning and Exploration

#### 2.1.1 Download and overview of datasets

Since the data can only be downloaded from drivendata.org if logging in with an account, I have uploaded the data on my github account, from which the two datasets are downloaded in the R script.

The first dataset (flu\_features) contains an ID for each entry (respondent\_id) and 35 predictors (features), e.g. h1n1\_concern, behavioral\_face\_mask, age\_group, education, race, sex. Some predictors are numerical values and others are character strings. As we can already see from the first entries, flu\_features contains NAs.

```
## $ behavioral_avoidance
                               : num 0 1 1 1 1 1 0 1 1 1 ...
                                    0000000000...
## $ behavioral_face_mask
                               : num
## $ behavioral_wash_hands
                               : num
                                     0 1 0 1 1 1 0 1 1 0 ...
## $ behavioral_large_gatherings: num 0 0 0 1 1 0 0 0 1 1 ...
## $ behavioral_outside_home : num
                                     1 1 0 0 0 0 0 0 1 0 ...
## $ behavioral_touch_face
                                    1 1 0 0 1 1 0 1 1 1 ...
                               : num
## $ doctor_recc_h1n1
                               : num
                                    0 0 NA 0 0 0 0 1 0 0 ...
## $ doctor_recc_seasonal
                              : num
                                     0 0 NA 1 0 1 0 0 0 0 ...
##
   $ chronic_med_condition
                              : num 0 0 1 1 0 0 0 1 0 1 ...
## $ child_under_6_months
                               : num
                                    00000000000...
## $ health_worker
                               : num 0000000000...
## $ health_insurance
                               : num
                                     1 1 NA NA NA NA NA 1 NA 1 ...
##
   $ opinion_h1n1_vacc_effective: num  3 5 3 3 3 5 4 5 4 4 ...
## $ opinion_h1n1_risk
                               : num 1 4 1 3 3 2 1 2 1 2 ...
## $ opinion_h1n1_sick_from_vacc: num 2 4 1 5 2 1 1 1 1 2 ...
##
   $ opinion_seas_vacc_effective: num 2 4 4 5 3 5 4 4 4 4 ...
##
   $ opinion_seas_risk
                               : num 1 2 1 4 1 4 2 2 2 2 ...
## $ opinion_seas_sick_from_vacc: num 2 4 2 1 4 4 1 1 1 2 ...
                                     "55 - 64 Years" "35 - 44 Years" "18 - 34 Years" "65+ Years" ...
## $ age_group
                               : chr
## $ education
                               : chr
                                     "< 12 Years" "12 Years" "College Graduate" "12 Years" ...
## $ race
                               : chr "White" "White" "White" ...
                                     "Female" "Male" "Female" ...
## $ sex
                               : chr
                                     "Below Poverty" "Below Poverty" "<= $75,000, Above Poverty" "Be
## $ income_poverty
                               : chr
                                     "Not Married" "Not Married" "Not Married" "Not Married" ...
## $ marital_status
                               : chr
                              : chr "Own" "Rent" "Own" "Rent" ...
## $ rent_or_own
## $ employment_status
                              : chr "Not in Labor Force" "Employed" "Employed" "Not in Labor Force"
   $ hhs_geo_region
                                     "oxchjgsf" "bhuqouqj" "qufhixun" "lrircsnp" ...
##
                               : chr
                              : chr
                                     "Non-MSA" "MSA, Not Principle City" "MSA, Not Principle City"
## $ census_msa
## $ household_adults
                               : num 0 0 2 0 1 2 0 2 1 0 ...
## $ household_children
                               : num 0000030000...
##
   $ employment_industry
                               : chr
                                     NA "pxcmvdjn" "rucpziij" NA ...
   $ employment_occupation
                               : chr NA "xgwztkwe" "xtkaffoo" NA ...
```

The second dataset (flu\_labels) also contains the respondent\_id, so that the labels can be matched with the predictors and the response variables h1n1\_vaccine and seasonal\_vaccine.

Both dataset consist of 26707 rows.

```
## 'data.frame': 26707 obs. of 3 variables:
## $ respondent_id : num 0 1 2 3 4 5 6 7 8 9 ...
## $ h1n1_vaccine : num 0 0 0 0 0 0 0 1 0 0 ...
## $ seasonal_vaccine: num 0 1 0 1 0 0 0 1 0 0 ...
```

The next section explains how the NAs are removed.

## 2.1.2 Removal of NA's

The following table shows that there are NA's in nearly all columns of the data set. In some columns around half of the rows contain NAs.

```
## number_of_NAs
## respondent_id 0
## h1n1_concern 92
```

##	h1n1_knowledge	116
##	behavioral_antiviral_meds	71
##	behavioral_avoidance	208
##	behavioral_face_mask	19
##	behavioral_wash_hands	42
##	behavioral_large_gatherings	87
##	behavioral_outside_home	82
##	behavioral_touch_face	128
##	doctor_recc_h1n1	2160
##	doctor_recc_seasonal	2160
##	chronic_med_condition	971
##	child_under_6_months	820
##	health_worker	804
##	health_insurance	12274
##	opinion_h1n1_vacc_effective	391
##	opinion_h1n1_risk	388
##	opinion_h1n1_sick_from_vacc	395
##	opinion_seas_vacc_effective	462
##	opinion_seas_risk	514
##	opinion_seas_sick_from_vacc	537
##	age_group	0
##	education	1407
##	race	0
##	sex	0
##	income_poverty	4423
##	marital_status	1408
##	rent_or_own	2042
	employment_status	1463
##	hhs_geo_region	0
##	census_msa	0
##		249
	household_children	249
##	employment_industry	13330
##	employment_occupation	13470

Furthermore, only 6437 of the 26707 rows contain no NA's at all.

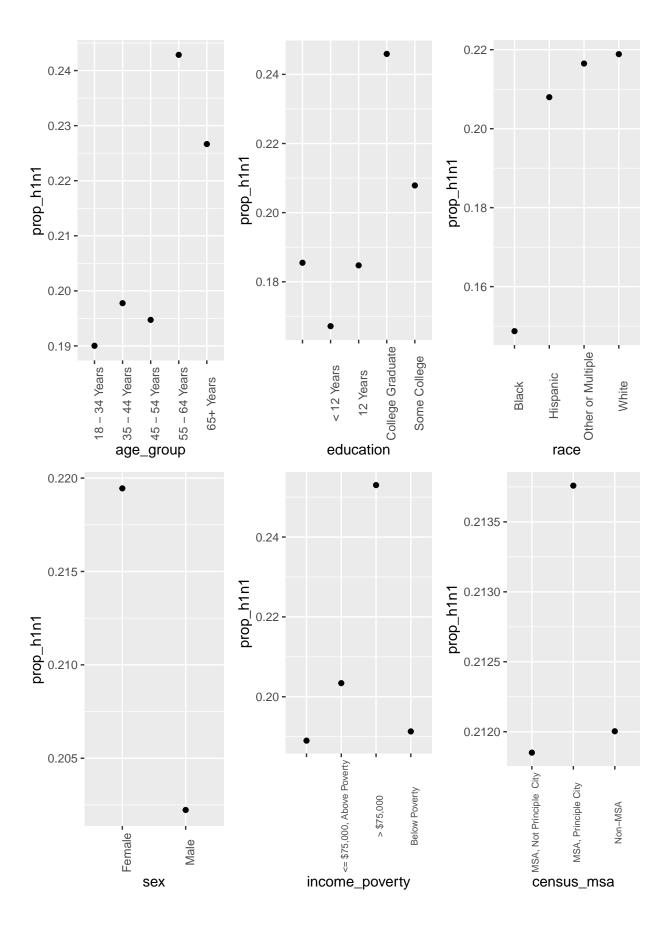
#### ## [1] 6437

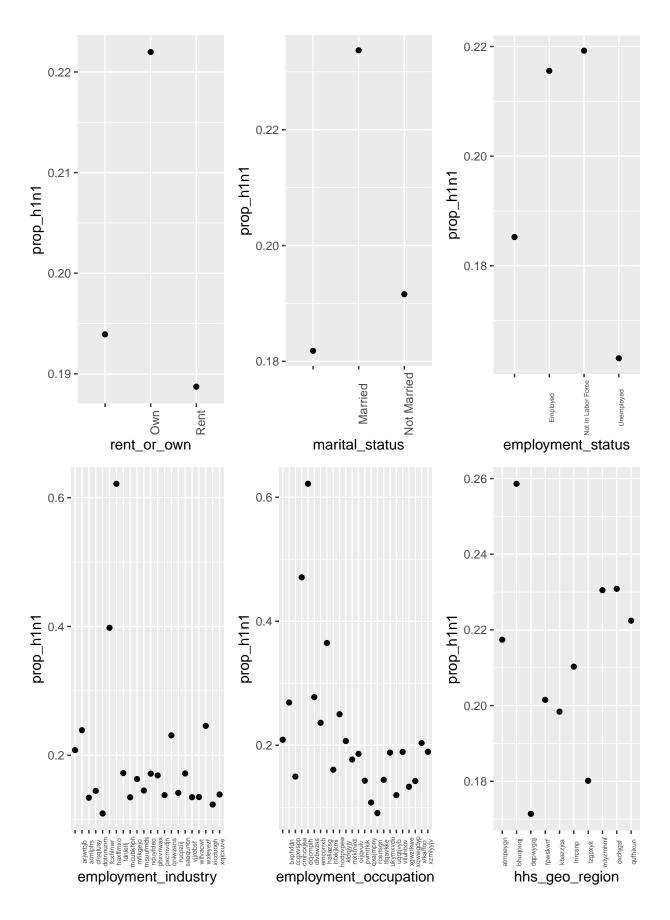
Since the number of rows without NA's is so small, it seems useful to replace the NAs with suitable values. I decided to replace the NA's in numerical columns with the column mean value. Whereas the NA's in the character string columns, I treated as a different value by replacing it with an empty string.

## 2.1.3 Factors and ordering

For both, the purpose of fitting a linear model and for the purpose of fitting a random forest, it is useful to choose an ordering for the factors representing the character strings which is compatible with the mean vaccination rate per factor level.

As we can see from the following plots, the original ordering does not show a monotone dependency of vaccination on factor level.





## 2.2 Analysis

## 2.2.1 Random Forests with xgboost

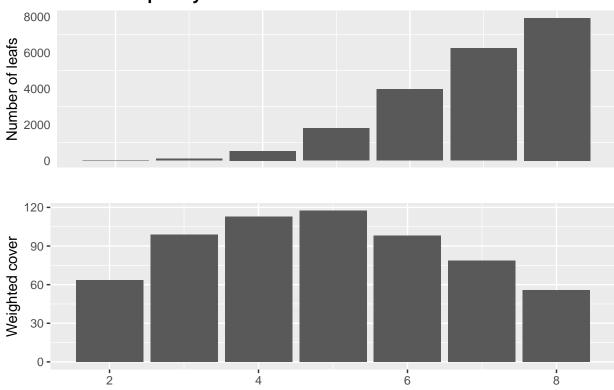
Xgboost is a powerful R package which can be used to build ensembles of decision trees (random forests) using gradient boosting algorithms. Random Forests are a machine learning method in which a large number of decision trees are built, each fitted with a random portion of the data. The prediction of the ensemble is built as a weighted sum of all the trees in the model.

I used the function xgb.cv to optimize the parameters for the xgboost model. Experimentation showed that a learning rate of 0.02 roughly leads to 500 trees per forest which was still manageable on a normal PC. An even lower learning rate might have led to even better models, but 0.02 seems to be a good compromise. It is important that every decision tree is fitted on a subset of the data so that the decision trees vary from each other enough. Therefore, the parameter subsample needs to be chosen smaller than 1. On the other hand the decision trees should not be fitted on a too small sample size, otherwise only simple decision trees could be fitted to the small sample size. Eventually I decided for a subsample of 0.9. Starting with a colsample\_bytree of 0.7, I tried different values of gamma and maxdepth and chose gamma = 4, max\_depth = 7. Given a gamma of 4 and maxdepth of 7, colsample\_bytree = 0.5 led to a reasonable prediction performance. Running the function xgb.cv for many different values for the parameters takes quite some time, so that it is not included in this report.

The following code builds the xgboost model xgb:

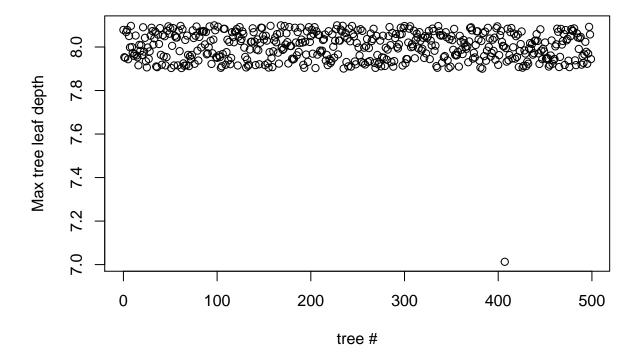
As can be seen from the upper graph, the higher the leaf depth, the more leafs a tree has. The plot below shows how many predictions are decided at each leaf depth.

# **Model complexity**

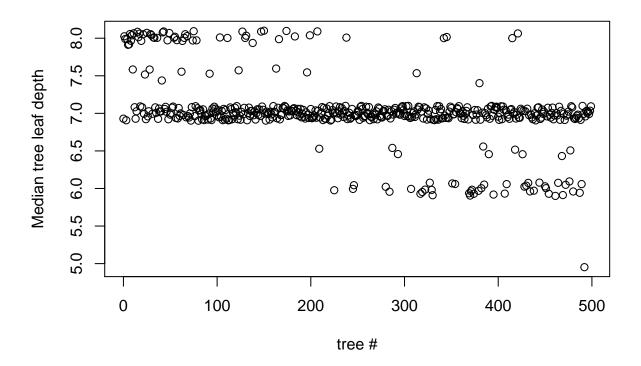


Leaf depth

There is only one tree with maximum leaf depth 7, nearly all trees have a leaf depth of 8:



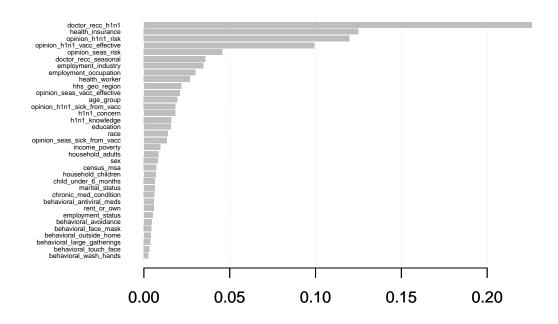
The median leaf depths range from 5 to 8. The most common median leaf depth is 7.



This table and diagram show the importance of each variable. We can see that for the h1n1\_vaccine the most important predictors are the doctor\_recc\_h1n1, health\_insurance, opinion\_h1n1\_risk and opinion h1n1 vacc effective.

```
##
                           Feature
                                           Gain
                                                      Cover
                                                              Frequency
                  doctor_recc_h1n1 0.225925269 0.078126101 0.027160125
##
    1:
##
   2:
                  health insurance 0.125005476 0.091183701 0.032184251
##
   3:
                 opinion h1n1 risk 0.119746342 0.094253536 0.049644332
       opinion_h1n1_vacc_effective 0.099293572 0.092780792 0.044968413
##
   4:
                 opinion_seas_risk 0.045834185 0.043881491 0.042729941
##
    5:
##
   6:
              doctor_recc_seasonal 0.035934712 0.045721501 0.033228871
##
   7:
               employment_industry 0.034700741 0.054550522 0.059294633
##
   8:
             employment_occupation 0.029968439 0.050036880 0.058896682
##
   9:
                     health_worker 0.026808006 0.036662726 0.023329851
## 10:
                    hhs_geo_region 0.021702106 0.027563189 0.056061284
       opinion_seas_vacc_effective 0.020901397 0.032094821 0.035168880
## 12:
                         age_group 0.019590255 0.033269457 0.042182759
  13:
       opinion_h1n1_sick_from_vacc 0.018401389 0.038108896 0.043227379
##
## 14:
                      h1n1_concern 0.018287241 0.030854666 0.039297617
## 15:
                    h1n1 knowledge 0.016036033 0.021474426 0.031836044
## 16:
                         education 0.015670226 0.024722586 0.035218624
## 17:
                              race 0.013935455 0.022685416 0.031189375
## 18: opinion_seas_sick_from_vacc 0.013338612 0.023571117 0.034721186
                    income_poverty 0.009508090 0.017358012 0.025618067
## 19:
                  household_adults 0.008391855 0.012756998 0.025369348
## 20:
```

```
## 21:
                               sex 0.008224099 0.017774764 0.018902651
## 22:
                        census msa 0.007364549 0.010759807 0.022384719
## 23:
                household children 0.006845094 0.010248792 0.021041636
## 24:
              child_under_6_months 0.006540674 0.012987446 0.016664179
## 25:
                    marital_status 0.006410098 0.009433043 0.016266229
## 26:
             chronic med condition 0.006174473 0.008931297 0.016415460
## 27:
         behavioral antiviral meds 0.005746367 0.009858724 0.016017510
## 28:
                       rent_or_own 0.005678643 0.008229216 0.016962642
## 29:
                 employment_status 0.005206245 0.006477127 0.015321096
## 30:
              behavioral_avoidance 0.004523598 0.004876440 0.013530319
## 31:
              behavioral_face_mask 0.004422451 0.006715926 0.012336467
## 32:
           behavioral_outside_home 0.004032799 0.004231339 0.012585186
## 33: behavioral_large_gatherings 0.003891132 0.008772050 0.011540566
## 34:
             behavioral_touch_face 0.003327978 0.003139359 0.010247227
## 35:
             behavioral_wash_hands 0.002632399 0.005907834 0.008456449
##
                           Feature
                                                      Cover
                                                              Frequency
```



The evaluation metric AUROC is calculated with the cross-validation function of the xgboost package and the built-in evaluation metric "auc".

```
## [1] train-auc:0.820400+0.031092 test-auc:0.809026+0.027731
## [101]
            train-auc:0.885831+0.002001 test-auc:0.865689+0.007840
            train-auc:0.897502+0.001418 test-auc:0.870083+0.007531
## [201]
## [301]
            train-auc:0.906116+0.001248 test-auc:0.871928+0.007305
## [401]
            train-auc:0.913065+0.001127 test-auc:0.872459+0.007105
## [500]
            train-auc:0.918852+0.001148 test-auc:0.872524+0.006965
      iter train auc mean train auc std test auc mean test auc std
                 0.918852
                            0.001147772
                                            0.8725238 0.006964715
## 1: 500
## [1] "out-of-sample AUC:0.8725238"
```

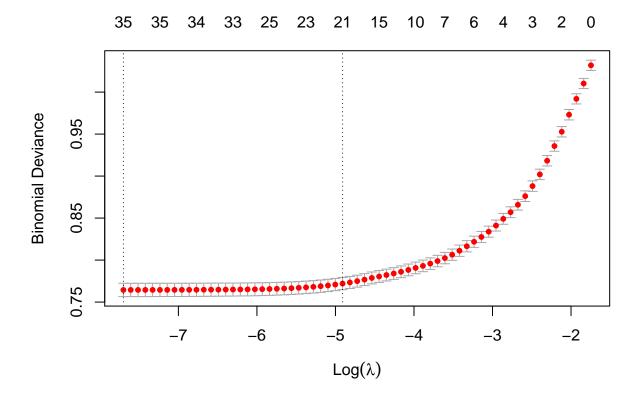
The out-of-sample AUC is 0.8725238.

## 2.2.2 Glmnet without one-hot encoding of the variables

The linear model is built using the package glmnet.

```
##Linear Model with qlmnet
##without one-hot-encoding
#Create test set
set.seed(1) #set seed to always get the same result
test_index <- createDataPartition(y = flu_labels$h1n1_vaccine, times = 1, p = 0.1, list = FALSE)
test_index<- as.vector(test_index)</pre>
x_train <- flu_features_int[-test_index,]</pre>
x_test <- flu_features_int[test_index,]</pre>
y_train <- flu_labels[-test_index,]</pre>
y_test <- flu_labels[test_index,]</pre>
##without one-hot-encoding (assume linearity because I ordered the variables by the mean response)
#create matrix for cv.glmnet
glm matrix1<-as.matrix(x train)</pre>
#model with 10-fold cross-validation
set.seed(1)
alpha < -0.9
cvg1<-cv.glmnet(glm_matrix1, y_train$h1n1_vaccine, family = "binomial", alpha=alpha)</pre>
```

Here, the log(lambda) is plotted against the logloss (prediction error). The smaller the penalty parameter lambda, the more variables are included in the model. In order to achieve the very best prediction error we could choose a lambda with the optimal prediction error. However, I choose the largest value of lambda, so that the error is within 1 standard error of the minimum, for a more robust model.

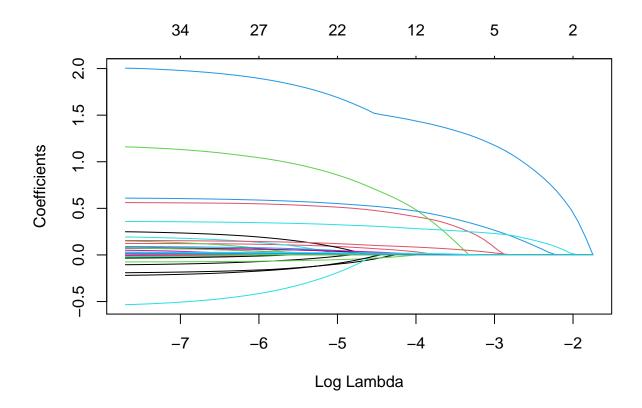


```
## [1] "lambda with optimal prediction error: -7.7001305308078"

## [1] "largest value of lambda such that error is within 1 standard error of the minimum: "
## [1] "-4.90911829947496"

#build model
glm_model1<-glmnet(glm_matrix1, y_train$h1n1_vaccine, family="binomial", alpha = 0.9)</pre>
```

If we look at the lambdas against the coefficients we can see how much influence each variable has depending on the lambda. One variable seems to have a high positive impact on the prediction. The majority of the variables have only a small influence.



In order to calculate the AUROC I used the method auc from the pROC package.

```
#make prediction
test_matrix<- as.matrix(x_test)
pred1<-predict(glm_model1, test_matrix, type="response", s=cvg1$lambda.1se)
#calculate AUC
auc_glm1<-auc(y_test$h1n1_vaccine, as.vector(pred1))

## Setting levels: control = 0, case = 1

## Setting direction: controls < cases</pre>
auc_glm1
```

## Area under the curve: 0.8383

## 2.2.3 Glmnet with one-hot-encoding

A linear model assumes a linear relationship between the variables. However, in our data set we also have variables that might not have a linear relationship. If we don't want to assume a linear relationship between the variables, we can use one-hot-encoding of factor levels. This way each value of each factor level is made to a separated predictor.

```
##Linear Model with glmnet
##with one-hot-encoding

#one-hot-encoding with makeX
glm_matrix2<- makeX(x_train)</pre>
```

Now, we build the model using the same modeling approach, but with the one-hot-encoded matrix:

```
#build model
glm_model2<-glmnet(glm_matrix2, y_train$h1n1_vaccine, family="binomial", alpha = 0.9)</pre>
```

Indeed, the prediction is only slightly better than without one-hot-encoding.

```
#make prediction
test_matrix<- makeX(x_test)
pred2<-predict(glm_model2, test_matrix, type="response", s=cvg2$lambda.1se)
#calculate AUC
auc_glm2<-auc(y_test$h1n1_vaccine, as.vector(pred2))

## Setting levels: control = 0, case = 1

## Setting direction: controls < cases
auc_glm2</pre>
```

## Area under the curve: 0.8372

#### 3 Results

The following table summarizes the results for the AUC using the different models:

We can see that the xgboost model shows a better result than the glmnet models. Using one-hot-encoding for the glmnet did not improve the AUC. It even resulted in a slightly lower AUC. Thus, it seems that assuming a linear relationship between the factor levels within the variables is suitable in this data set.

The best public score at the moment (January 6th of 2021) for predicting h1n1\_vaccine and seasonal\_vaccine is at 0.8658. We can not directly compare our value since our result is only for predicting the variable h1n1\_vaccine, whereas the competition's score refers to the average of the AUC metric of the h1n1\_vaccine and the seasonal vaccine prediction tasks. However, our result seems to lie in a good range.

#### 4 Conclusion

In conclusion, Xgboost and glmnet are suitable packages to tackle this prediction problem. The results for the xgboost model are very depending on the parameters. Thus, a more comprehensive optimization of the parameters (eta, gamma, subsample, max\_depth, nrounds, colsample\_bytree and others) could potentially further improve the results. It would be interesting to calculate the result for the seasonal\_vaccine as well in order to be able to better compare the result.