Midterm Exam Prep

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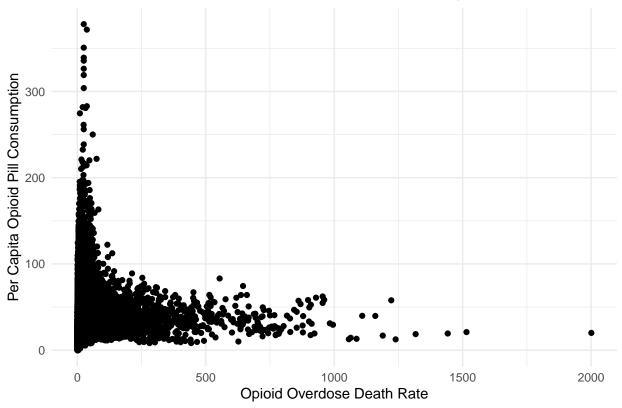
2024-10-03

1. What is the unit of observation for the countyopioids dataset you just read in?

The unit of observation in the dataset is a county. More specifically, each row represents a specific county in a given year.

2. Generate a scatter plot with the opioid overdose death rate (overdosedeaths) on the x-axis and per capita opioid pill consumption (percapitapills) on the y-axis.

Scatter Plot of Overdose Death Rate vs. Pill Consumption

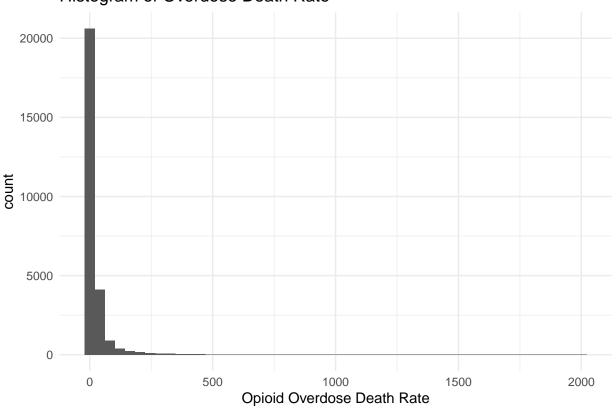


3. Generate histograms separately for the opioid overdose death rate (overdosedeaths) and per capita opioid pills (percapitapills). If you had to take the logarithm of one of these variables based on the distributions you just generated, which one would you transform and why?

If I had to take the logarithm of one of these variables based on the distributions/histograms, I would transform the opioid overdose death rate because the distribution is more right skewed. Taking the log will render it more normally distributed.

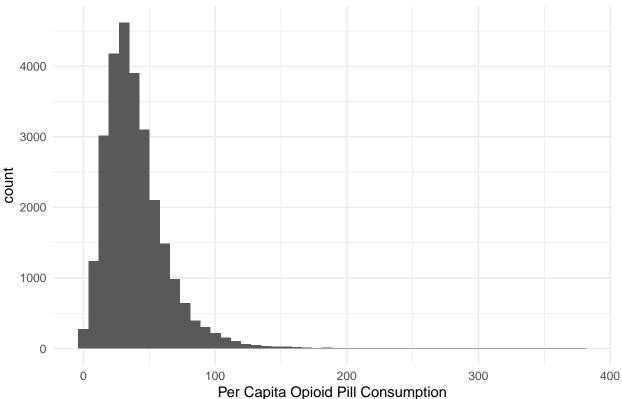
```
# Opioid overdose death rate histogram
ggplot(countyopioids, aes(x = overdosedeaths)) +
  geom_histogram(bins = 50) +
  labs(x = "Opioid Overdose Death Rate", title = "Histogram of Overdose Death Rate") +
  theme_minimal()
```

Histogram of Overdose Death Rate



```
# Per capita opioid pills histogram
ggplot(countyopioids, aes(x = percapitapills)) +
  geom_histogram(bins = 50) +
  labs(x = "Per Capita Opioid Pill Consumption", title = "Histogram of Pill Consumption") +
  theme_minimal()
```

Histogram of Pill Consumption



4. Create two new variables by taking the logarithm of overdosedeaths and percapitapills (for the name, add log_ to the beginning), remove Alaska and Hawaii from the original dataset (i.e., filter them out), and assign/create this to a new object called contigiousopioiddata. You will use this for the remainder of the assignment.

5. Regress the opioid overdose death rate (level) on the per capita pill consumption (level). Interpret each coefficient. Remember that it is regressing the dependent variable on the independent variable (i.e., y on x). Does that seem reasonable?

On average, a county has a yearly overdose death rate of 24.39 when there are no opioid pills. The coefficient on percapitapills suggests that, on average, an increase of 1 opioid pill per capita is associated with a 0.05 increase in the opioid overdose death rate. It seems reasonable that the coefficient is positive, as we would expect more pills to be associated with more overdose deaths.

```
# one option
lm(overdosedeaths ~ percapitapills, data = countyopioids)

##
## Call:
## lm(formula = overdosedeaths ~ percapitapills, data = countyopioids)
##
## Coefficients:
## (Intercept) percapitapills
## 24.39483     0.05046
```

```
# alternative option
model_level <- lm(overdosedeaths ~ percapitapills, data = countyopioids)
summary(model level)
##
## Call:
## lm(formula = overdosedeaths ~ percapitapills, data = countyopioids)
##
## Residuals:
##
      Min
                                3Q
                10 Median
                                       Max
    -28.90
           -22.19 -17.58
                             -7.56 1975.59
##
##
## Coefficients:
                  Estimate Std. Error t value Pr(>|t|)
##
## (Intercept)
                  24.39483
                              0.83316
                                       29.280
                                                <2e-16 ***
                                        2.807
                                                 0.005 **
## percapitapills 0.05046
                              0.01798
## Signif. codes: 0 '***' 0.001 '**' 0.05 '.' 0.1 ' ' 1
##
## Residual standard error: 71.58 on 26968 degrees of freedom
## Multiple R-squared: 0.0002921, Adjusted R-squared:
## F-statistic: 7.881 on 1 and 26968 DF, p-value: 0.005
```

- 6. Regress the opioid overdose death rate on the per capita pill consumption, but this time, do it three separate ways: log-level, level-log, and log-log. Interpret each coefficient below the code chunk for each way.
- a. log-level

A one unit increase in per capita pill consumption is associated, on average, with a 1.41 percent change in opioid overdose death rate. Because the coefficient is small, we can approximate it directly from the coefficient in the regression, i.e., a 1.4% increase in the overdose death rate.

```
lm(log(overdosedeaths) ~ percapitapills, data = countyopioids)
##
```

```
## lm(formula = log(overdosedeaths) ~ percapitapills, data = countyopioids)
##
## Coefficients:
## (Intercept) percapitapills
## 1.677 0.014
```

b. level-log

A one percent increase in per capita pill consumption is associated, on average, with a 0.05 unit change in opioid overdose death rate. As before, we can approximate this directly from the coefficient, i.e., 4.825/100 = 0.048 increase in the overdose death rate.

```
lm(overdosedeaths ~ log(percapitapills), data = countyopioids)
```

```
##
## Call:
## lm(formula = overdosedeaths ~ log(percapitapills), data = countyopioids)
##
## Coefficients:
## (Intercept) log(percapitapills)
## 9.609 4.825
```

c. log-log

##

0.2335

A one percent increase in per capita pill consumption is associated, on average, with a 0.57 percent change in opioid overdose death rate.

```
lm(log(overdosedeaths) ~ log(percapitapills), data = countyopioids)

##
## Call:
## lm(formula = log(overdosedeaths) ~ log(percapitapills), data = countyopioids)
##
## Coefficients:
## (Intercept) log(percapitapills)
```

7. Regress the opioid overdose death rate (log) on the per capita pill consumption (log), and add the variable rural. Interpret each coefficient. Use the summary function to obtain the standard errors, test statistics, and p-values. What can you infer about the statistical significance of each coefficient?

The intercept represents the expected log of opioid overdose deaths when all predictors (i.e., log(percapitapills) and rural) are zero, i.e., in urban areas with no pills. This is not super meaningful here, as similar to a class with no students, there are likely no counties with zero pills.

The coefficient for log(percapitapills) tells us a one percent increase in per capita pill consumption is associated, on average, with a 0.42 percent change in opioid overdose death rate, holding rural constant.

The coefficient for rural tells us compared with an urban area, the opioid overdose death rate in rural area is on average 73.05 percent lower, holding pill consumption constant.

All coefficients are statistically significant at traditional levels of significance (i.e., $\alpha = 0.05$ or 0.1).

```
model_log_log_rural <- lm(log(overdosedeaths) ~ log(percapitapills) + rural, data = countyopioids)
model_log_log_rural</pre>
```

```
##
## Call:
## lm(formula = log(overdosedeaths) ~ log(percapitapills) + rural,
## data = countyopioids)
##
## Coefficients:
## (Intercept) log(percapitapills) rural
## 0.9926 0.4237 -1.3113
```

8. Generate a 95% confidence interval for the log(percapitapills) coefficient using information from the previous regression output in question 7. What does this confidence interval mean?

If we repeated our sampling procedure a large number of times, we expect about 95% of the resulting confidence interval [0.4054404, 0.4418982] to capture the true value of the population parameter. We got this by using the formula $[\hat{\beta} - 1.96Xse(\hat{\beta}), \hat{\beta} + 1.96Xse(\hat{\beta})] = [0.42367 - 1.96X0.00930, 0.42367 + 1.96X0.00930]$.

```
# Altnerative option in R is using the following command
confint(model_log_log_rural, level = 0.95)
```

```
## 2.5 % 97.5 %
## (Intercept) 0.9260685 1.0591643
## log(percapitapills) 0.4054404 0.4418982
## rural -1.3473371 -1.2753250
```

9. Regress the opioid overdose death rate (log) on the per capita pill consumption (log), but now interact the log of pill consumption with rural (use *) instead of adding it as a separate regressor. Interpret each coefficient. BE CAREFUL!

The intercept represents the expected log of opioid overdose deaths when all predictors are zero, so again, urban areas with no pills.

In urban areas, a one percent increase in per capita pill consumption is associated, on average, with a 0.49 percent increase in the opioid overdose death rate.

In rural areas, a one percent increase in per capita pill consumption is associated, on average, with a 0.33 percent increase in the opioid overdose death rate. Remember that we can get this directly from the regression output adding 0.48 + -0.15...

We also observe a negative impact of being in rural area on the opioid overdose death rate (likely due to population differences), but this effect is decreasing in the pill consumption.

```
model_interaction <- lm(log(overdosedeaths) ~ log(percapitapills) * rural, data = countyopioids)
summary(model_interaction)</pre>
```

```
##
## Call:
## lm(formula = log(overdosedeaths) ~ log(percapitapills) * rural,
##
      data = countyopioids)
##
## Residuals:
##
      Min
               1Q Median
                               3Q
                                      Max
## -5.5496 -0.7577 -0.0988 0.5621
                                  5.3741
##
## Coefficients:
                            Estimate Std. Error t value Pr(>|t|)
##
## (Intercept)
                             0.76866
                                        0.04374 17.572 < 2e-16 ***
## log(percapitapills)
                             0.48661
                                        0.01211 40.192 < 2e-16 ***
                            -0.80717
                                        0.06485 -12.447 < 2e-16 ***
## log(percapitapills):rural -0.15301
                                        0.01888 -8.106 5.46e-16 ***
## Signif. codes: 0 '***' 0.001 '**' 0.05 '.' 0.1 ' ' 1
##
## Residual standard error: 1.128 on 26966 degrees of freedom
## Multiple R-squared: 0.2543, Adjusted R-squared: 0.2543
## F-statistic: 3066 on 3 and 26966 DF, p-value: < 2.2e-16
```