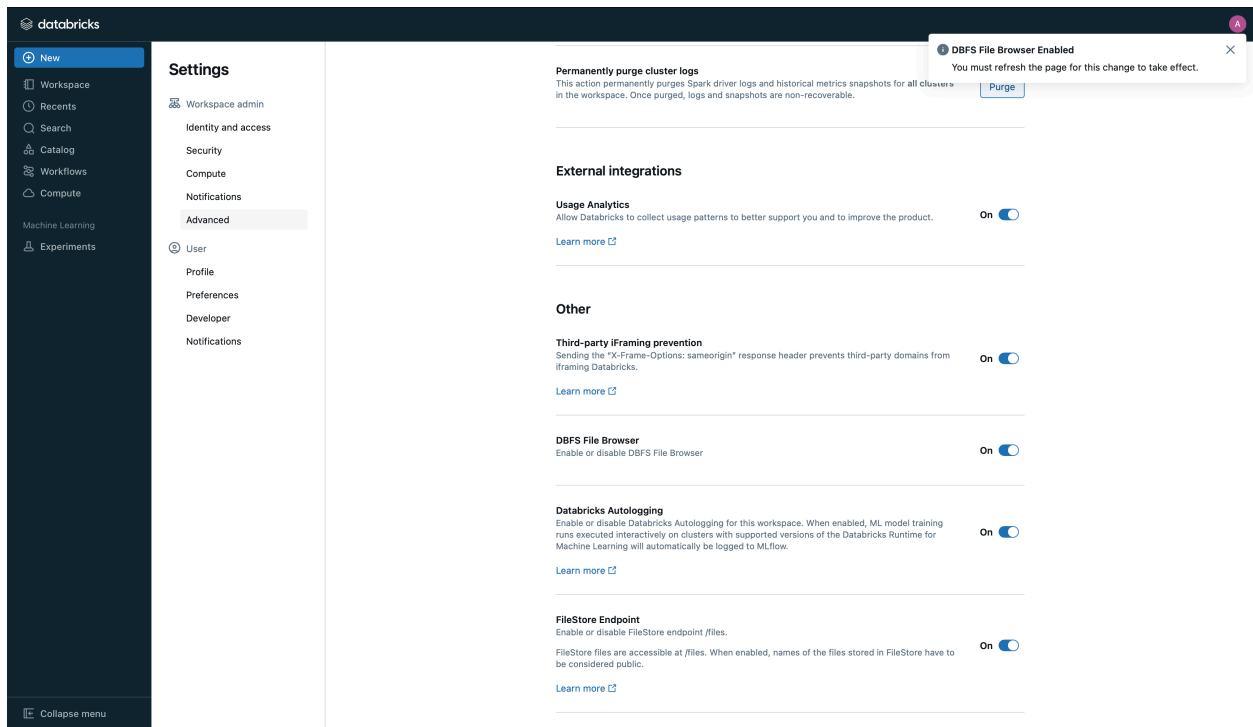


Name: **Anay Abhijit Joshi**  
M-ID: **M14391356 (joshi2an)**

**100% Done** 

**Code is attached in a Zip Folder and is also available on GitHub:**  
**<https://github.com/anay-a-joshi/Databricks-COVID19>**

**All the required screenshots are attached below !**





databricks

New

Workspace

Recents

Search

Catalog

Workflows

Compute

Machine Learning

Experiments

Collapse menu

Compute

Anay Abhijit Joshi's Cluster

More

Terminate

Edit

Configuration

Notebooks (0)

Libraries

Event log

Spark UI

Driver logs

Metrics

Apps

Spark compute UI - Master

Databricks Runtime Version

12.2 LTS (includes Apache Spark 3.3.2, Scala 2.12)

Driver type

Community Optimized15.3 GB Memory, 2 Cores

Instance

Free 15 GB Memory: As a Community Edition user, your compute will automatically terminate after an idle period of one or two hours.  
For more configuration options, please upgrade your Databricks subscription.

Spark

JDBC/ODBC

Spark config

spark.databricks.rocksDB.fileManager.useCommitServicefalse

Environment variables

PYSPARK\_PYTHON=/databricks/python3/bin/python3

databricks

New

Workspace

Recents

Search

Catalog

Workflows

Compute

Machine Learning

Experiments

Collapse menu

Compute

All-purpose compute

Job compute

Filter compute you have access to

Created by

Create compute

State	Name	Runtime	Active memory	Active cores	Active DBU / h	Source	Creator	Notebooks	
	Anay Abhijit Joshi's Cluster	12.2	15 GB	2 cores	1	UI	joshi2an@mail.uc.edu	-	

1

20 / page

New

Workspace

Recents

Search

Catalog

Workflows

Compute

Machine Learning

Experiments

AnyayAbhijitJoshi\_Project5

Python

File Edit View Run Help

Last edit was 3 minutes ago

Workspace

Josh1Zan@mail.uc.edu

AnyayAbhijitJoshi\_Project5

Run all

Anay Abhijit Joshi's C...

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100% | 1 file in path: dbfs:/FileStore/OWID\_COVID19\_data\_4\_Project5.csv, name= OWID\_COVID19\_data\_4\_Project5.csv, size=32946147, modificationTime=17315422618000, FileInfo(path='dbfs:/FileStore/tables/', name='tables/', size=0, modificationTime=0)]

4 minutes ago (19s)

4

Python

dbutils.fs.ls("dbfs:/FileStore/OWID\_COVID19\_data\_4\_Project5.csv")

df = spark.read.format("csv") \

.option("header", "true") \

.option("inferSchema", "true") \

.load("dbfs:/FileStore/OWID\_COVID19\_data\_4\_Project5.csv")

display(df)

(3) Spark Jobs

df: pyspark.sql.dataframe.DataFrame = [iso\_code: string, continent: string ... 63 more fields]

Table

	iso_code	continent	location	date	total_cases	new_cases	new_scases	total_deaths
1	AFG	Asia	Afghanistan	2020-02-24	5	5	0	0
2	AFG	Asia	Afghanistan	2020-02-25	5	0	0	0
3	AFG	Asia	Afghanistan	2020-02-26	5	0	0	0
4	AFG	Asia	Afghanistan	2020-02-27	5	0	0	0
5	AFG	Asia	Afghanistan	2020-02-28	5	0	0	0
6	AFG	Asia	Afghanistan	2020-02-29	5	0	0	0.714
7	AFG	Asia	Afghanistan	2020-03-01	5	0	0	0.714
8	AFG	Asia	Afghanistan	2020-03-02	5	0	0	0
9	AFG	Asia	Afghanistan	2020-03-03	5	0	0	0
10	AFG	Asia	Afghanistan	2020-03-04	5	0	0	0
11	AFG	Asia	Afghanistan	2020-03-05	5	0	0	0
12	AFG	Asia	Afghanistan	2020-03-06	5	0	0	0
13	AFG	Asia	Afghanistan	2020-03-07	8	3	0.429	0
14	AFG	Asia	Afghanistan	2020-03-08	8	0	0.429	0
15	AFG	Asia	Afghanistan	2020-03-09	8	0	0.429	0

5,415+ rows | Truncated data due to byte limit | 18.97 seconds runtime

Refreshed 4 minutes ago

5

Python

New

Workspace

Recents

Search

Catalog

Workflows

Compute

Machine Learning

Experiments

AnyayAbhijitJoshi\_Project5

Python

File Edit View Run Help

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Run all

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07:33 PM (3s)

9

Python

# Order the DataFrame by continent and month

ordered\_avg\_df = avg\_df.orderBy('continent', 'month')

# Display the ordered DataFrame to enable chart configuration

display(ordered\_avg\_df)

(2) Spark Jobs

ordered\_avg\_df: pyspark.sql.dataframe.DataFrame = [continent: string, month: integer ... 3 more fields]

Table

	continent	month	average_people_fully_vaccinated	average_new_cases	average_excess_mortality
1	Africa	9	9.050997067448682	38.56174506172839	25.88
2	Africa	10	10.979402173913043	18.04095400238949	9.0975
3	Asia	9	35.818799999999996	137.81524184397162	45.19416666666667
4	Asia	10	44.35308982035929	113.52837542896364	46.093333333333334
5	Europe	9	53.51533724340176	202.05234276382315	12.174639175257733
6	Europe	10	56.79475073313782	289.7618099579243	12.14
7	North America	9	40.22337078651684	332.61750579710144	74.689
8	North America	10	45.033721973094174	217.01673913043487	0
9	Oceania	9	31.851630434782614	22.318063636363636	-6.7
10	Oceania	10	47.44908163265306	15.839052325581394	-13
11	South America	9	43.167231404958684	108.70364066852369	9.0475
12	South America	10	51.30851528384279	74.9003790322581	7.786666666666668

12 rows | 3.00 seconds runtime

Refreshed 9 minutes ago

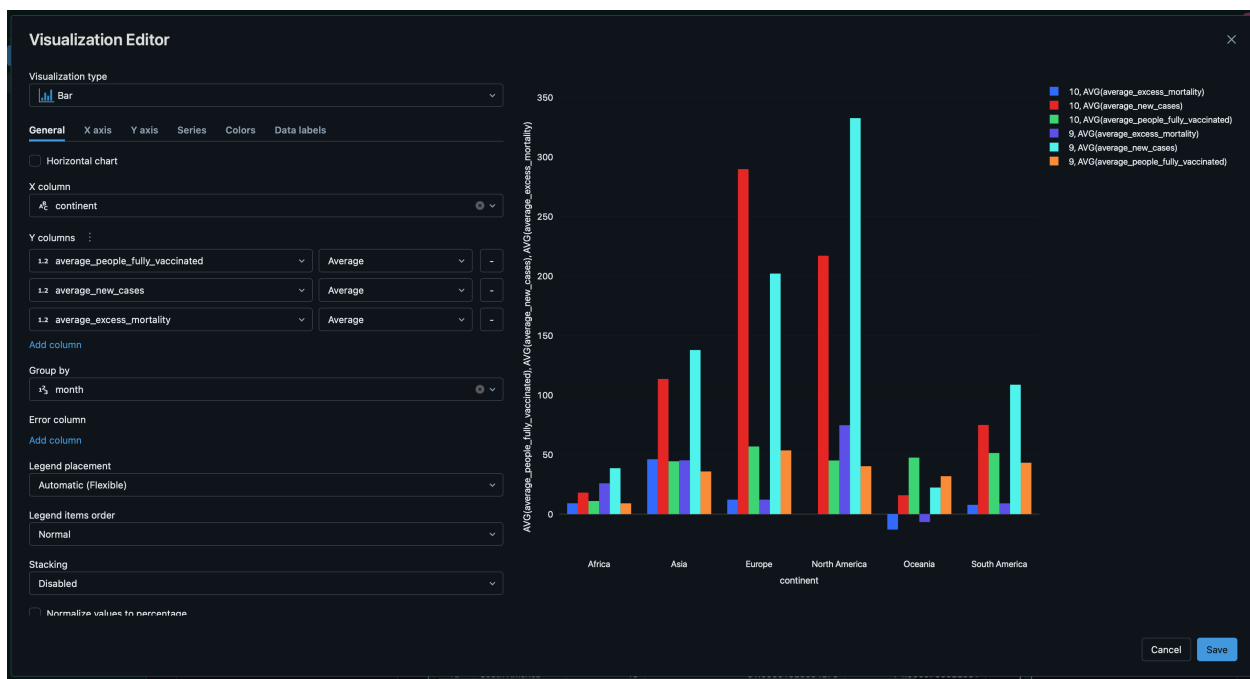
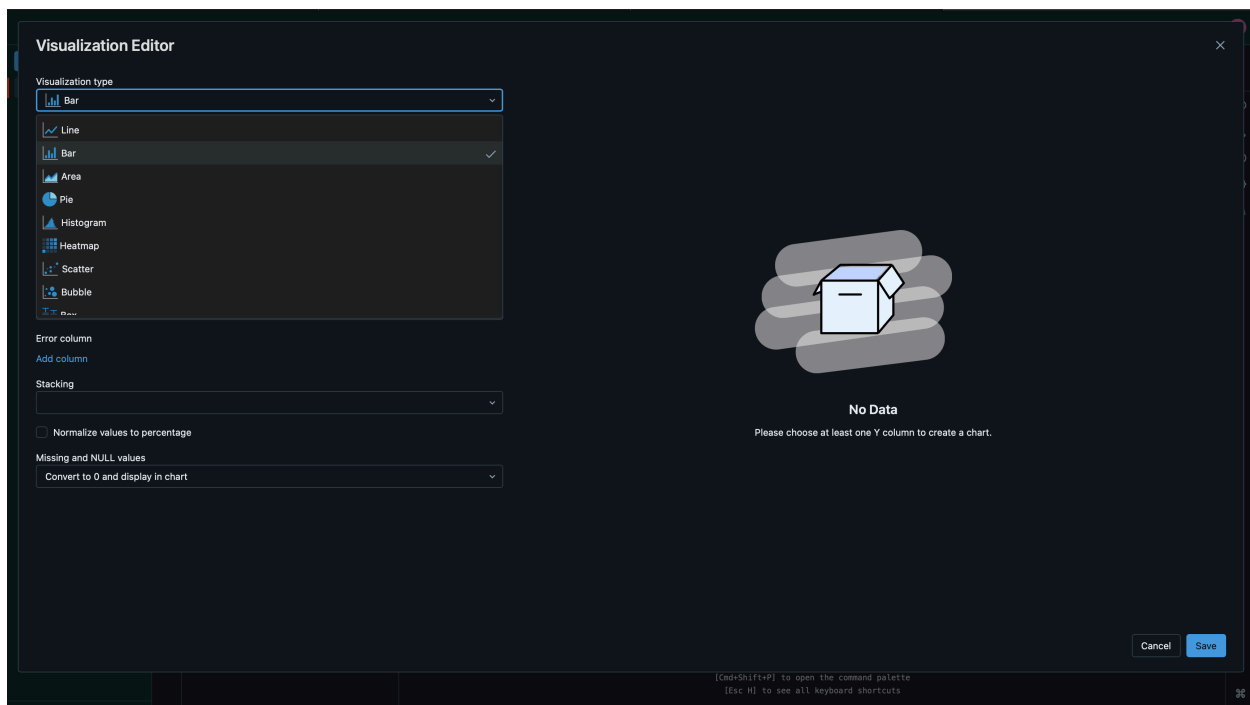
10

Python

(Shift+Enter) to run and move to next cell

(Cmd+Shift+P) to open the command palette

(Esc H) to see all keyboard shortcuts



## **STEP 10**

Based on our analysis, there appears to be a moderate positive association between COVID-19 vaccination rates and new cases per million, with a correlation coefficient of approximately **0.52**. This finding is somewhat surprising, as we might intuitively expect higher vaccination rates to correlate with lower case rates. However, this positive correlation could be influenced by several factors, such as differing rates of variant transmission, testing availability, or case reporting practices across regions.

Looking at the summary statistics, we found that the average vaccination rate for September and October 2021 was **42.59%** fully vaccinated individuals per hundred, with a standard deviation of **24.19**. The mean new cases per million was **136.59**, indicating continued viral transmission even in regions with relatively high vaccination coverage. Meanwhile, the mean excess mortality was **17.37** per million, with a large standard deviation of **25.69**, suggesting that mortality outcomes varied widely across locations.

Given these insights, while vaccination efforts have likely contributed to reducing severe outcomes and mortality overall, the data suggests that vaccination alone might not be enough to reduce case numbers uniformly. Other factors, including public health interventions and population density, likely play significant roles in influencing case rates and mortality outcomes.

### **EXTRA**

In my analysis, I observed that COVID-19 vaccination rates did not exhibit a straightforward negative correlation with new cases per million, as I might initially have expected. To support the obtained results and my analysis, I used regression and plotted its results with scatter plots, representing the relationships between vaccination rates (in people per hundred) and new cases (per million) as well as excess mortality (per million). The regression results, while showing some degree of association, suggest that higher vaccination rates alone do not necessarily correlate with significantly lower case numbers or uniformly reduced excess mortality. My correlation and scatter plots display a moderate positive association, which, upon further inspection, likely reflects the complex interplay of other factors, such as variant spread, testing availability, and localized health policies. Though vaccines are crucial in reducing severe illness and mortality, my data analysis reinforces that vaccination may need to be complemented by other public health interventions to effectively curb case rates and excess mortality on a broader scale.

