

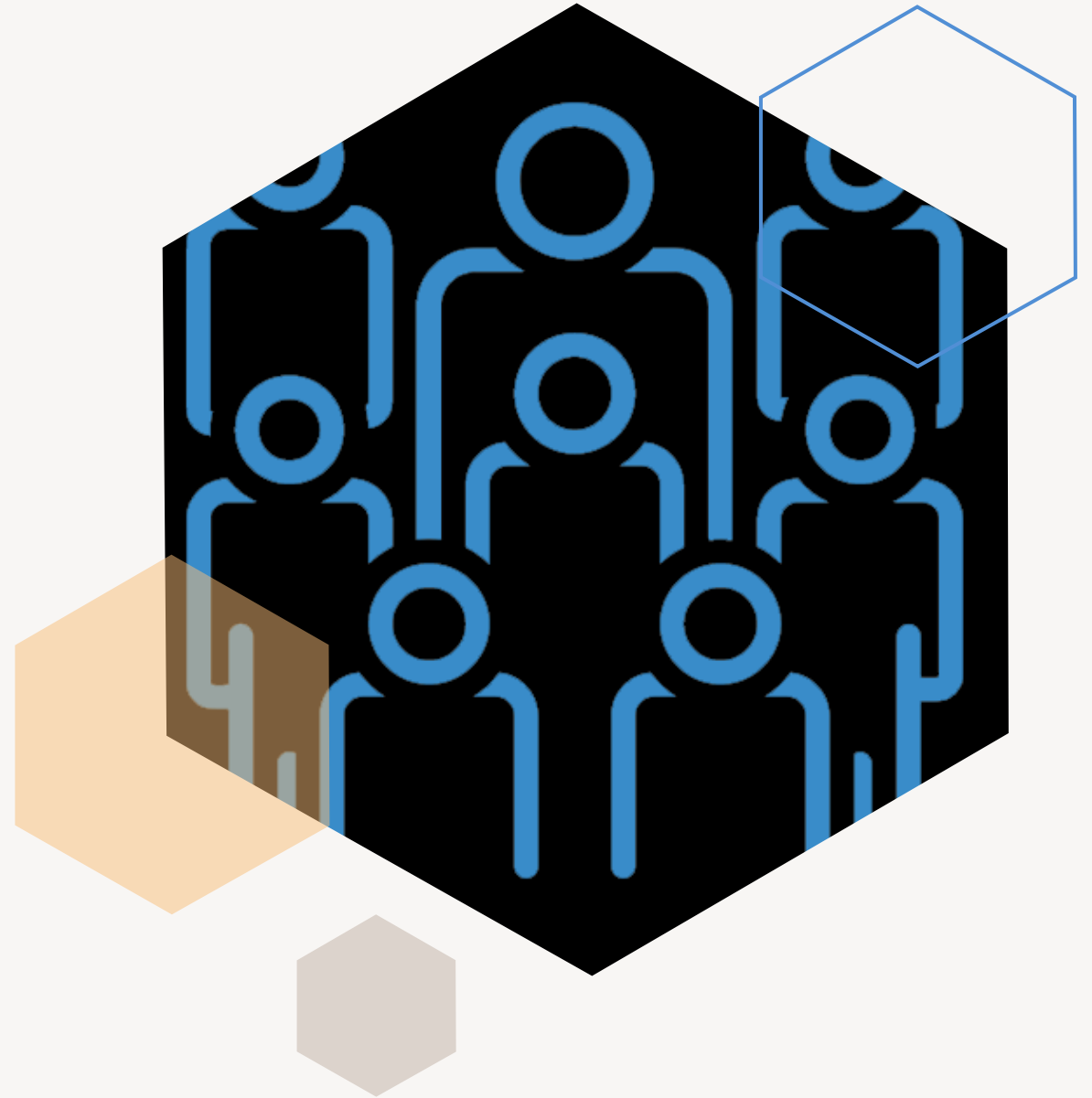
MSDS 6372

Project 1: Group 5

Ivan Chavez

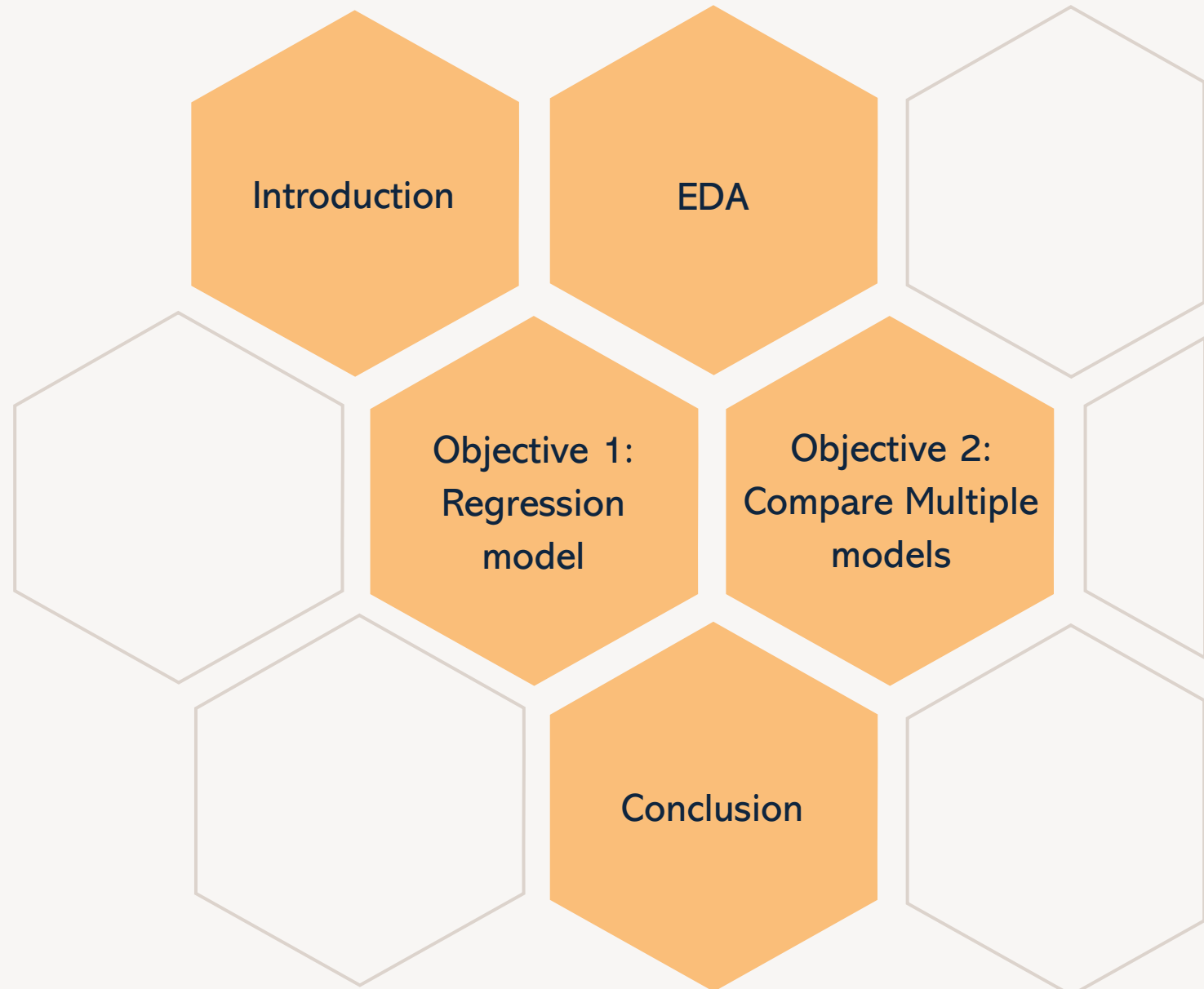
Jessica McPhaul

Rafia Mirza





Agenda

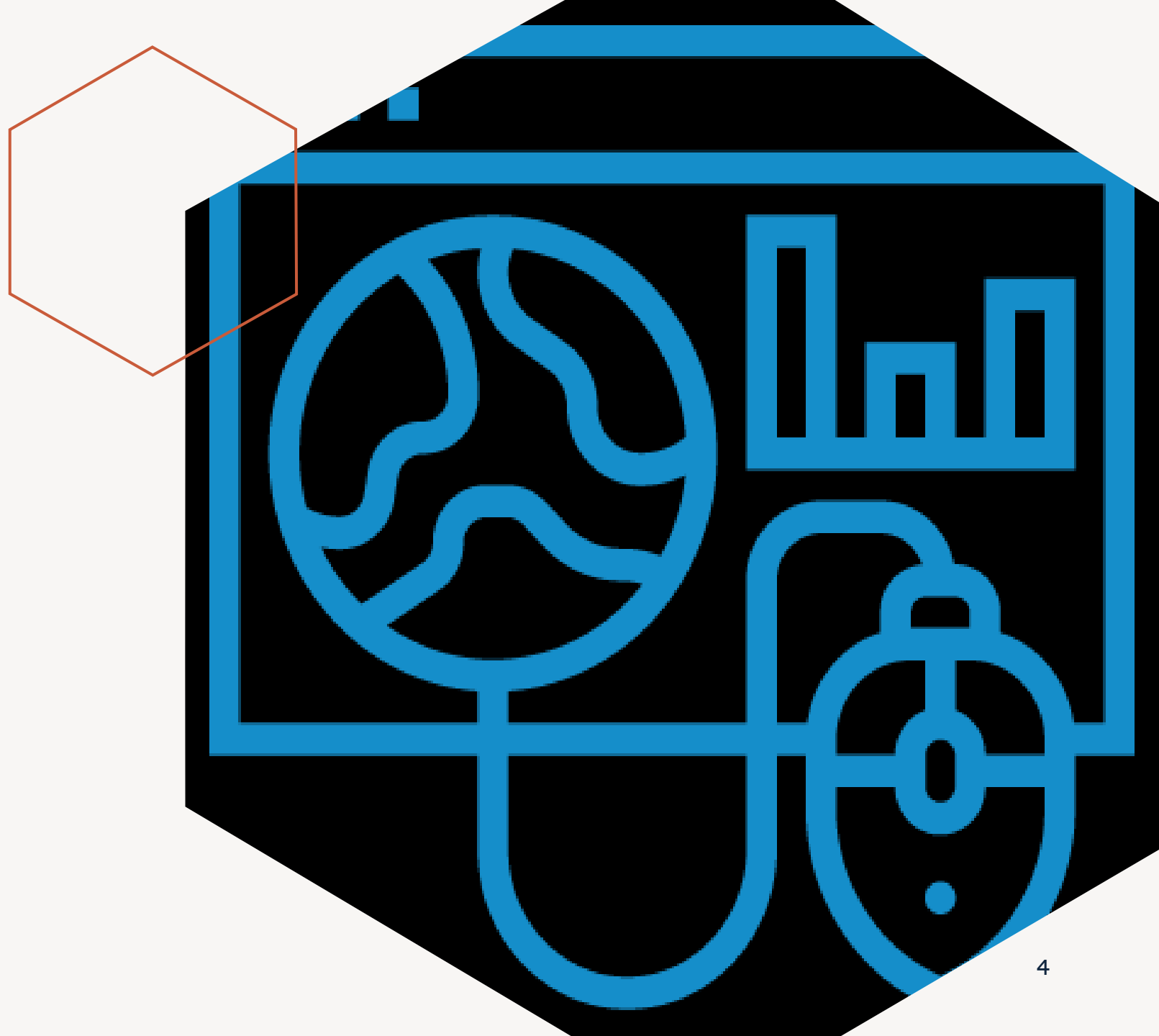




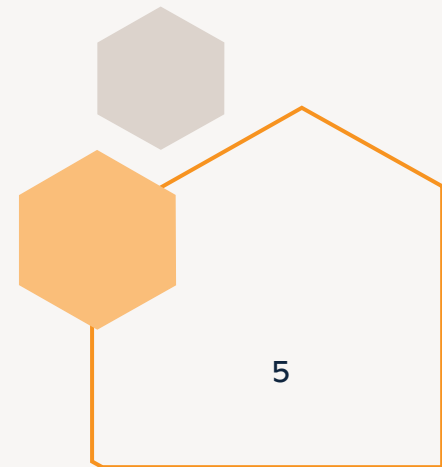
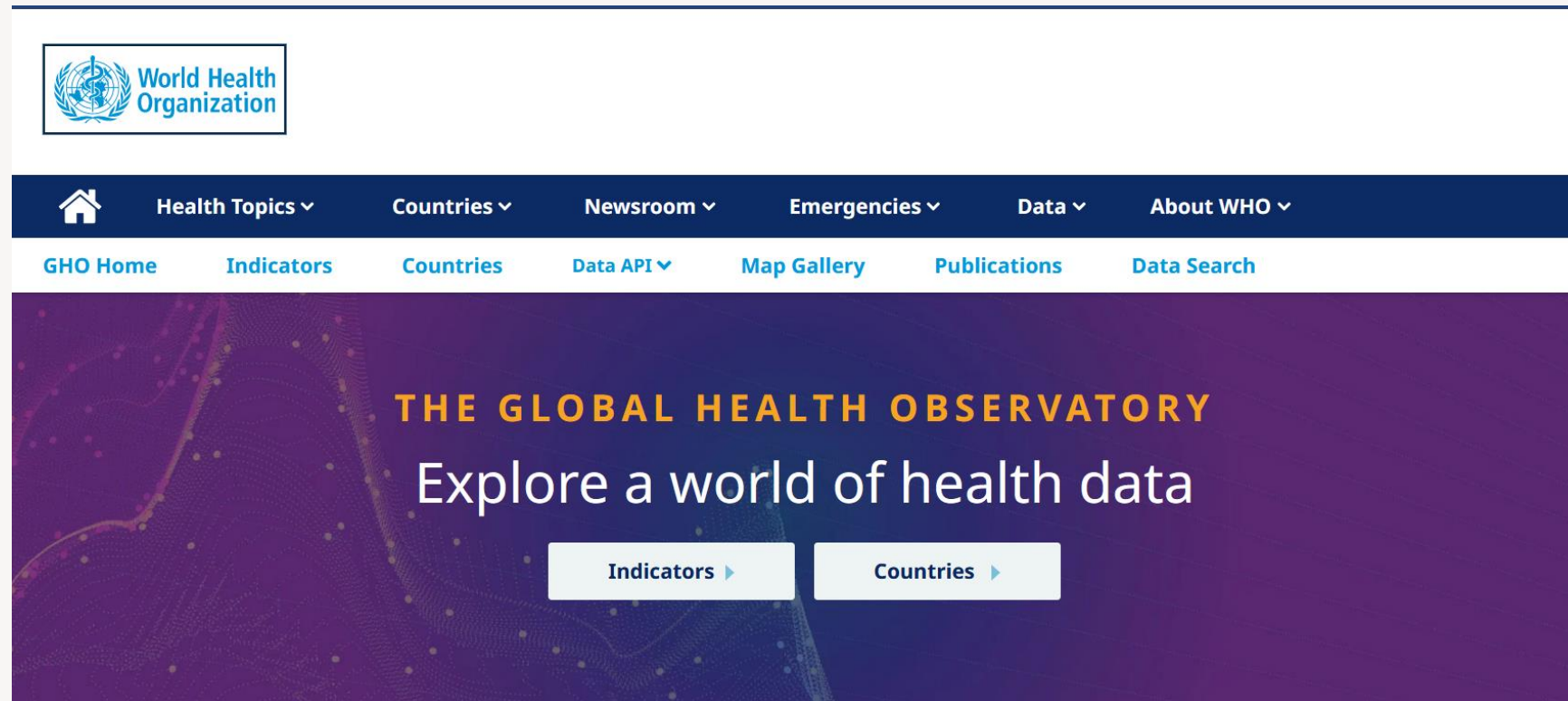
[Click here for
Final Analysis
\(Interactive\)](#)

Goal

- A regression model that predicts life expectancy based on health indicators

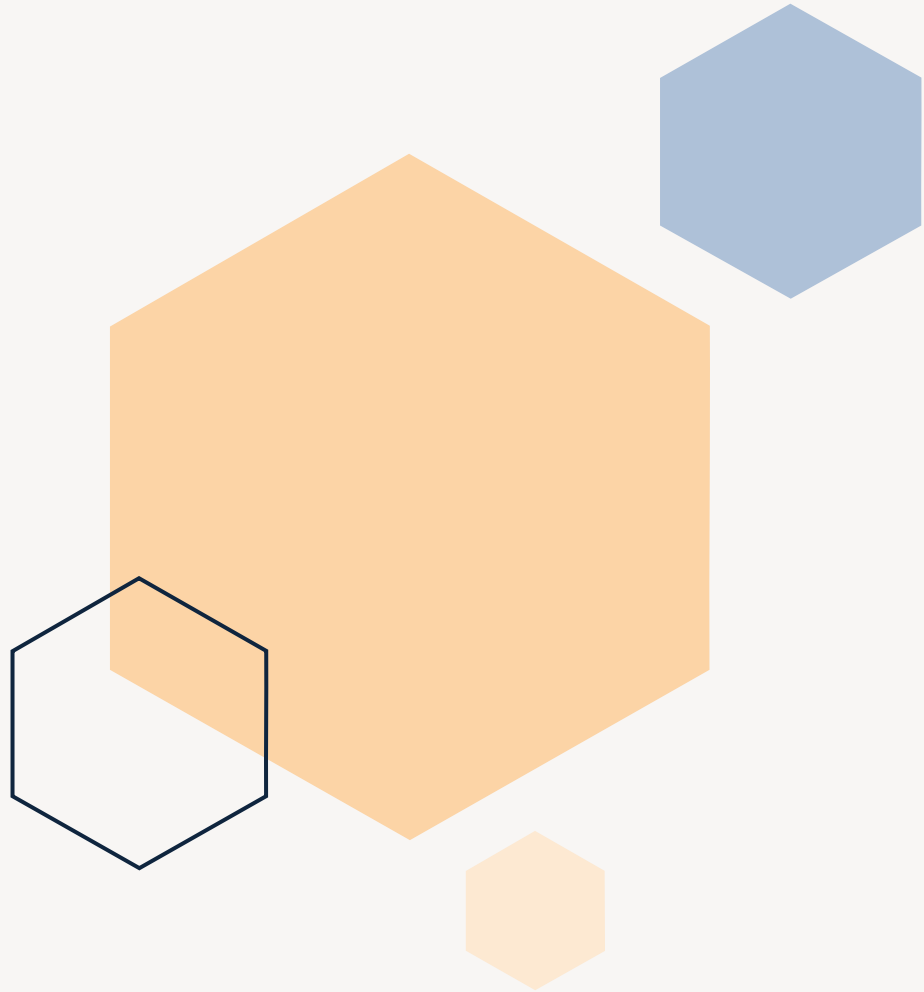


Data Set: Health indicators





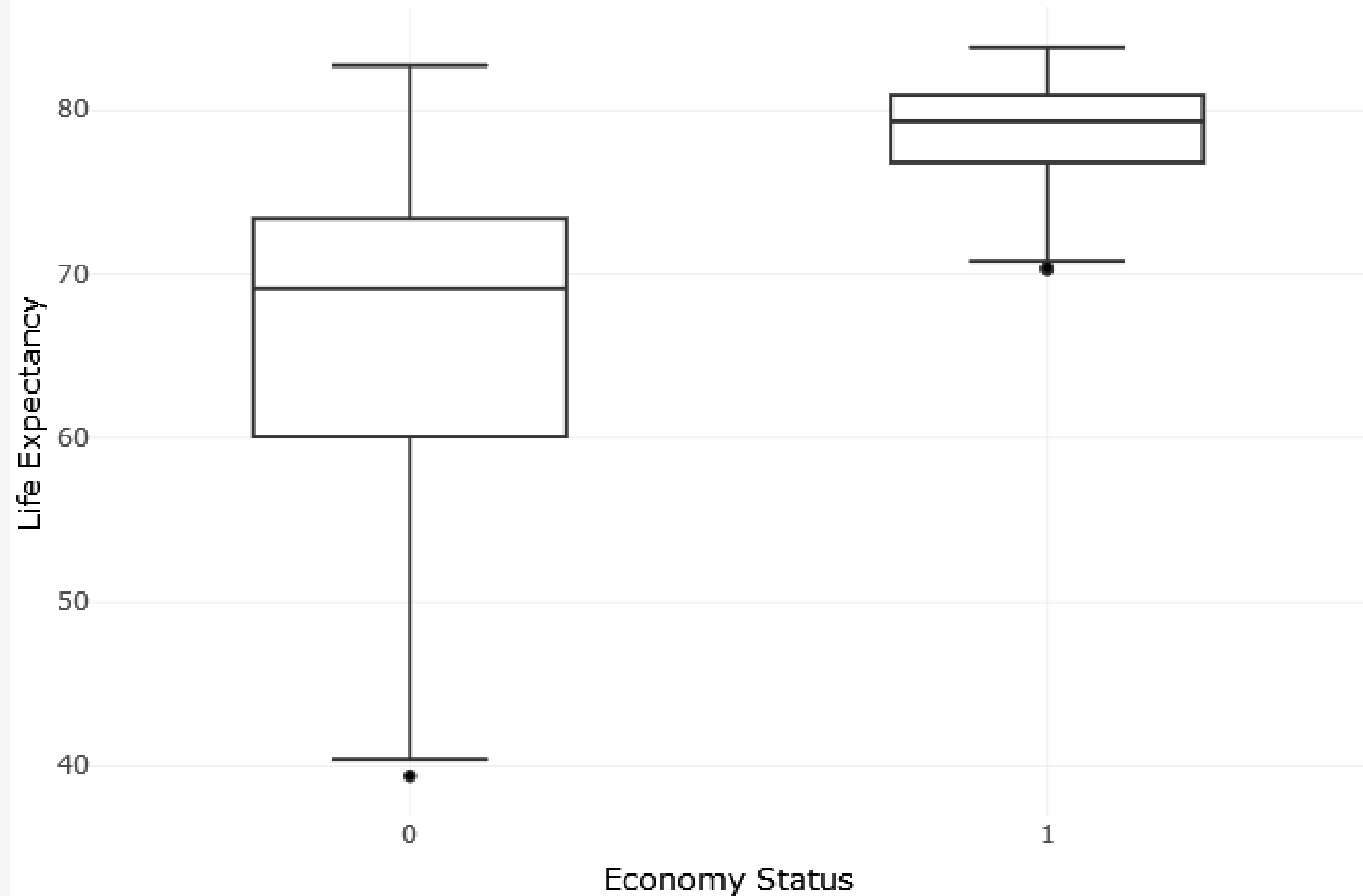
EDA

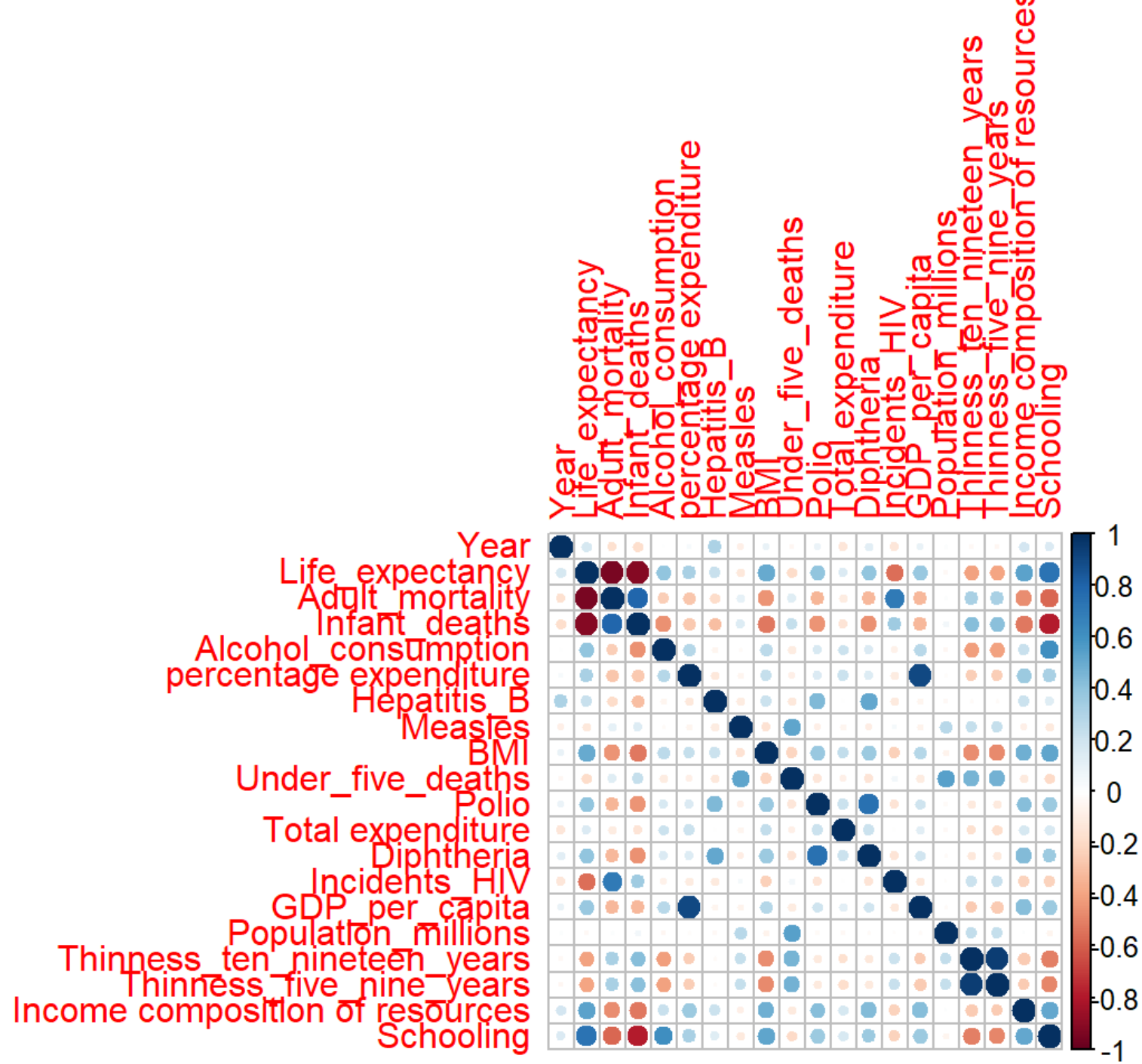


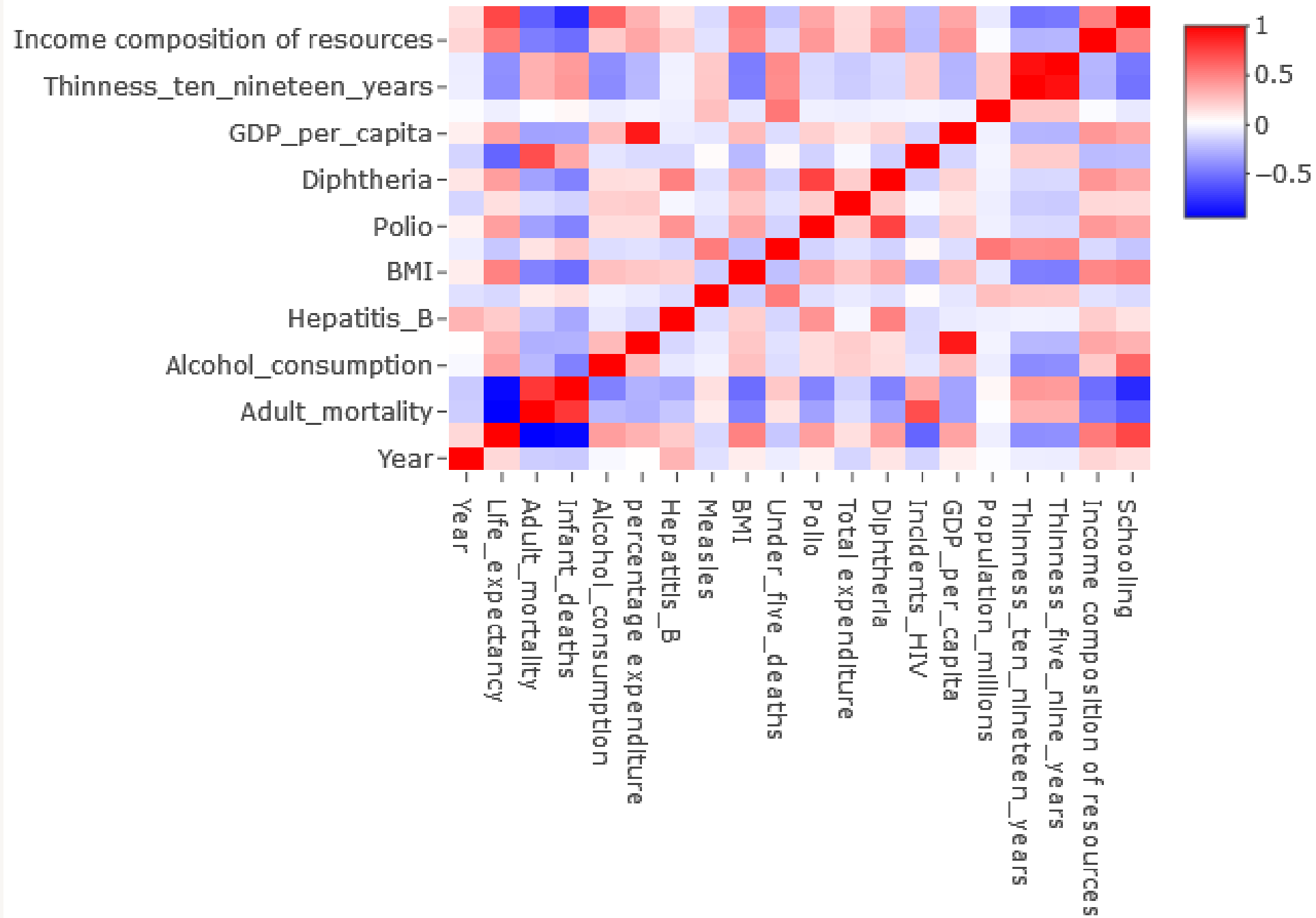
Missing Values

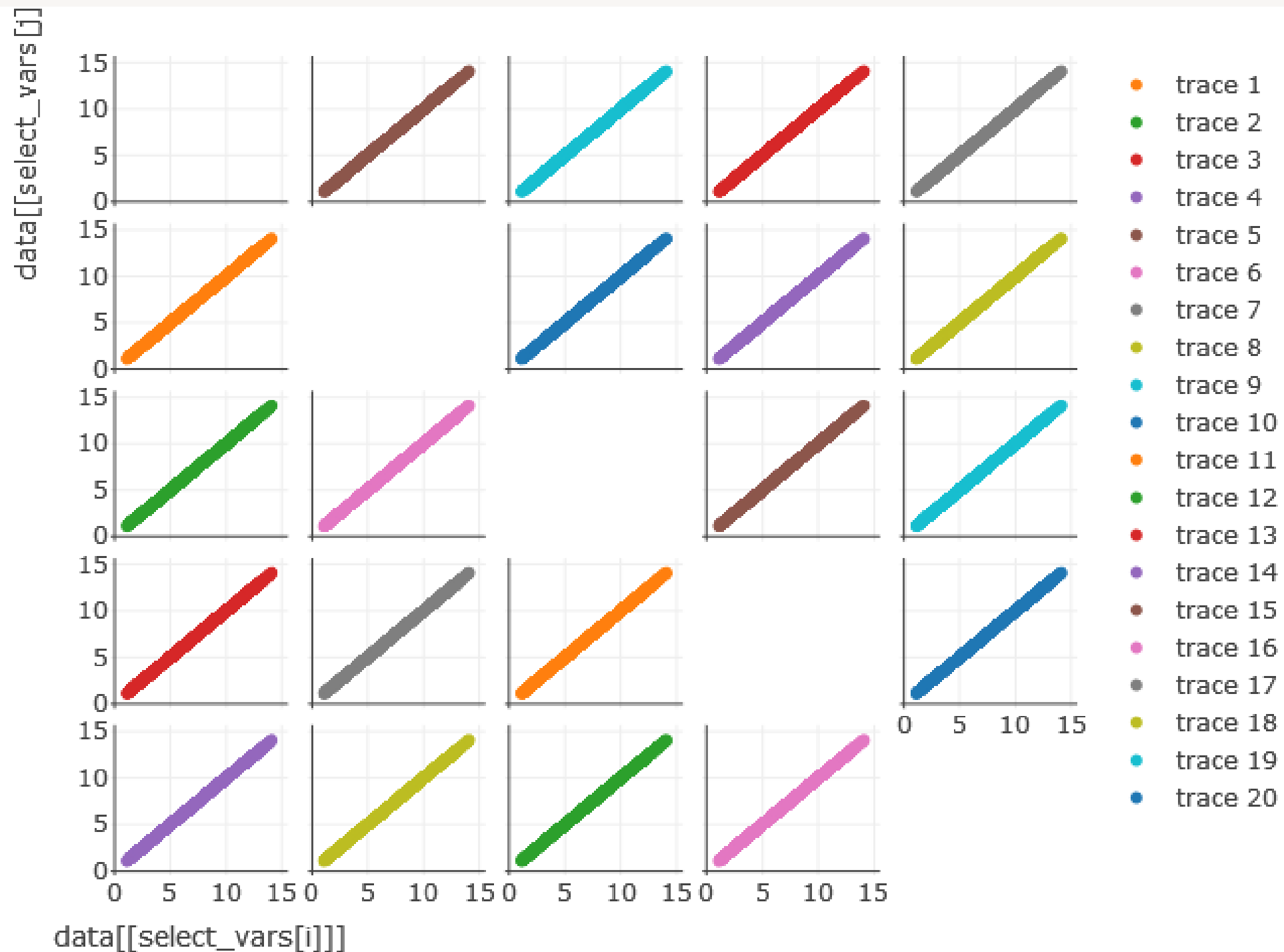
- Imputation
- Removal
- Visualizations

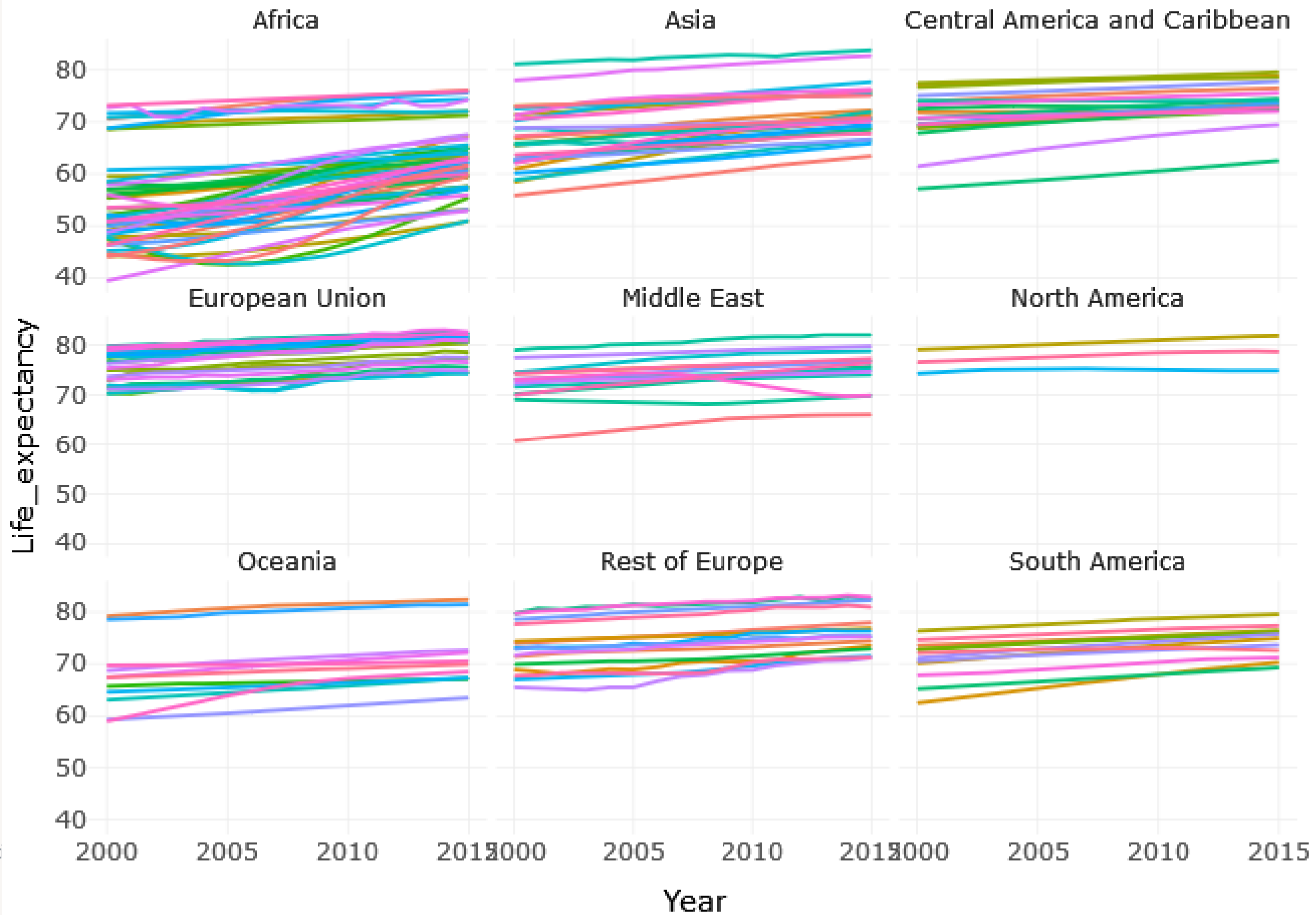
Boxplot of Life Expectancy by Economy Status













Objective 1: Regression model



- We built the initial linear model from the basis of our EDA and running recursive feature elimination to get significant features for predicting life expectancy.
- There were 22 selection variables in the initial model, some of the features included were Alcohol consumption, Incidents of HIV, GDP, BMI, and others.

```
## [1] "Adult_mortality"           "Infant_deaths"  
## [3] "Alcohol_consumption"      "Under_five_deaths"  
## [5] "Country"                  "Year"  
## [7] "Thinness_five_nine_years" "Incidents_HIV"  
## [9] "Income composition of resources" "Total expenditure"  
## [11] "Thinness_ten_nineteen_years" "Region"  
## [13] "Measles"                  "percentage expenditure"  
## [15] "BMI"                      "Diphtheria"  
## [17] "Schooling"                "GDP_per_capita"  
## [19] "Polio"                    "Hepatitis_B"  
## [21] "Population_millions"      "Economy_status_Developed"
```



- When looking at our regression table of our model we will discuss two variables adult mortality and alcohol consumption their coefficients and how they influence life expectancy.
- The coefficient estimate for adult mortality is $-.04070$ this indicates that for each unit increase in adult mortality we expect a decrease in life expectancy by approx. $.04070$ years.
- This along with a statistically significant p-value of $2e-16$ suggests that as adult mortality increases life expectancy decreases.
- For alcohol consumption we have a coefficient estimate of $-.03304$, and this indicates that for each unit increase in alcohol consumption we can expect a decrease in life expectancy by approx. $.03304$ years.
- Again, we have a statistically significant p-value of $.0358$ and suggests that there is a relation that when alcohol consumption goes up the life expectancy will fall.

```
## Analysis of Variance Table
##
## Model 1: Life_expectancy ~ Adult_mortality + Infant_deaths + Alcohol_consumption +
##   Under_five_deaths + Country + Year + Thinness_five_nine_years +
##   Incidents_HIV + `Income composition of resources` + `Total expenditure` +
##   Thinness_ten_nineteen_years + Region + Measles + `percentage expenditure` +
##   BMI + Diphtheria + Schooling + GDP_per_capita + Polio + Hepatitis_B +
##   Population_millions + Economy_status_Developed
## Model 2: Life_expectancy ~ Adult_mortality + Infant_deaths + Alcohol_consumption +
##   Under_five_deaths + Country + Year + Thinness_five_nine_years +
##   Incidents_HIV + `Income composition of resources` + `Total expenditure` +
##   Thinness_ten_nineteen_years + Region + Measles + `percentage expenditure` +
##   BMI + Diphtheria + Schooling + GDP_per_capita + Polio + Hepatitis_B +
##   Population_millions + Economy_status_Developed + I(Alcohol_consumption^2)
##   Res.Df    RSS Df Sum of Sq    F Pr(>F)
## 1   1799 503.62
## 2   1798 502.92   1    0.70149 2.5079 0.1135
```

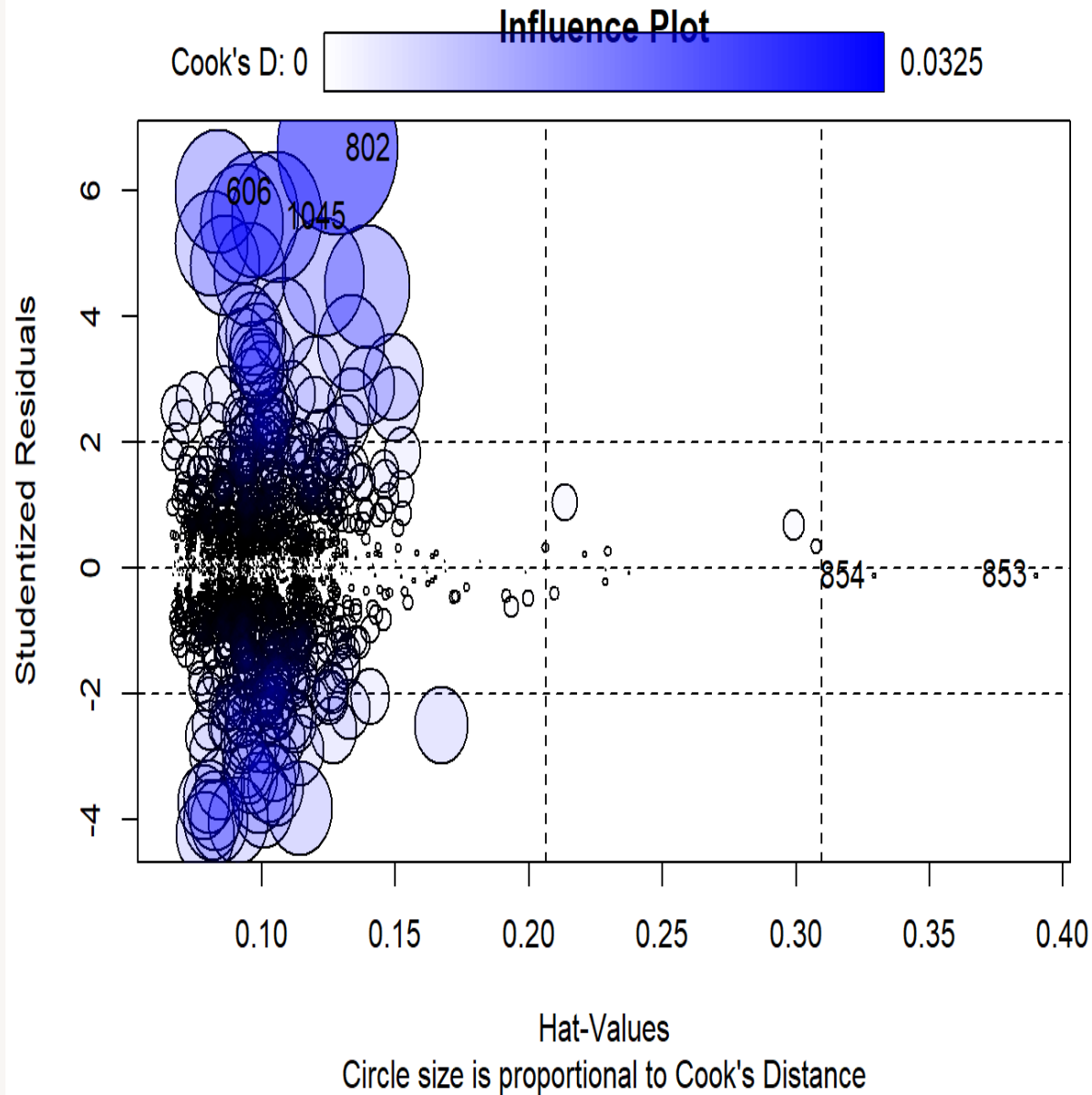
```
## Analysis of Variance Table
##
## Model 1: Life_expectancy ~ Adult_mortality + Infant_deaths + Alcohol_consumption +
##   Under_five_deaths + Country + Year + Thinness_five_nine_years +
##   Incidents_HIV + `Income composition of resources` + `Total expenditure` +
##   Thinness_ten_nineteen_years + Region + Measles + `percentage expenditure` +
##   BMI + Diphtheria + Schooling + GDP_per_capita + Polio + Hepatitis_B +
##   Population_millions + Economy_status_Developed
## Model 2: Life_expectancy ~ Year + Adult_mortality + Alcohol_consumption +
##   BMI
##   Res.Df    RSS  Df Sum of Sq    F    Pr(>F)
## 1   1799   503.6
## 2   1991 12779.8 -192   -12276 228.4 < 2.2e-16 ***
## ---
## Signif. codes:  0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1
```

- The first screenshot is the anova table comparing our simple linear model with the enhanced model.
- In the top anova table we see that model 2 has all of the same predictors as model 1 but with an extra predictor being the quadratic term for Alcohol consumption.
- Our null hypothesis for this anova table is that the two models perform equally well in predicting the life expectancy.
- We see that with a p-value = .1135 that at the .05 significance level that there is no significant difference in the performance of Model 1 compared to Model 2 in terms of predicting the life expectancy.
- In the 2nd table we see that we are comparing the original simple linear model with another model containing only 4 variable predictors.
- Here we see that model 2 outperforms model 1 with the highly significant p-value of 2.2e-16.

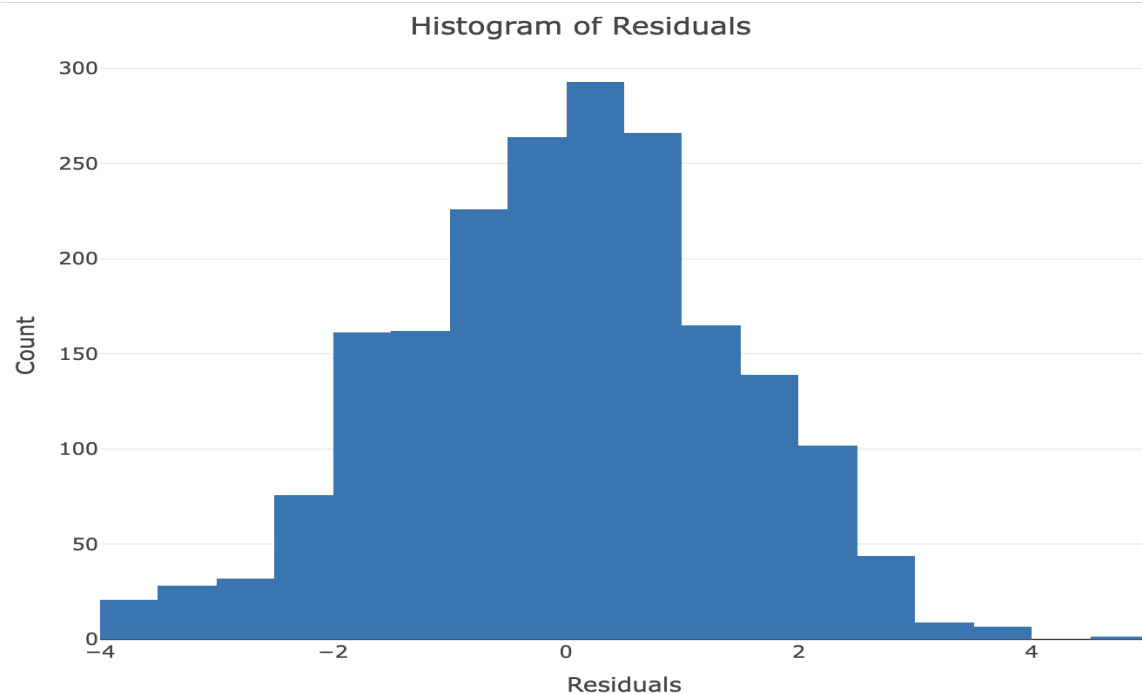
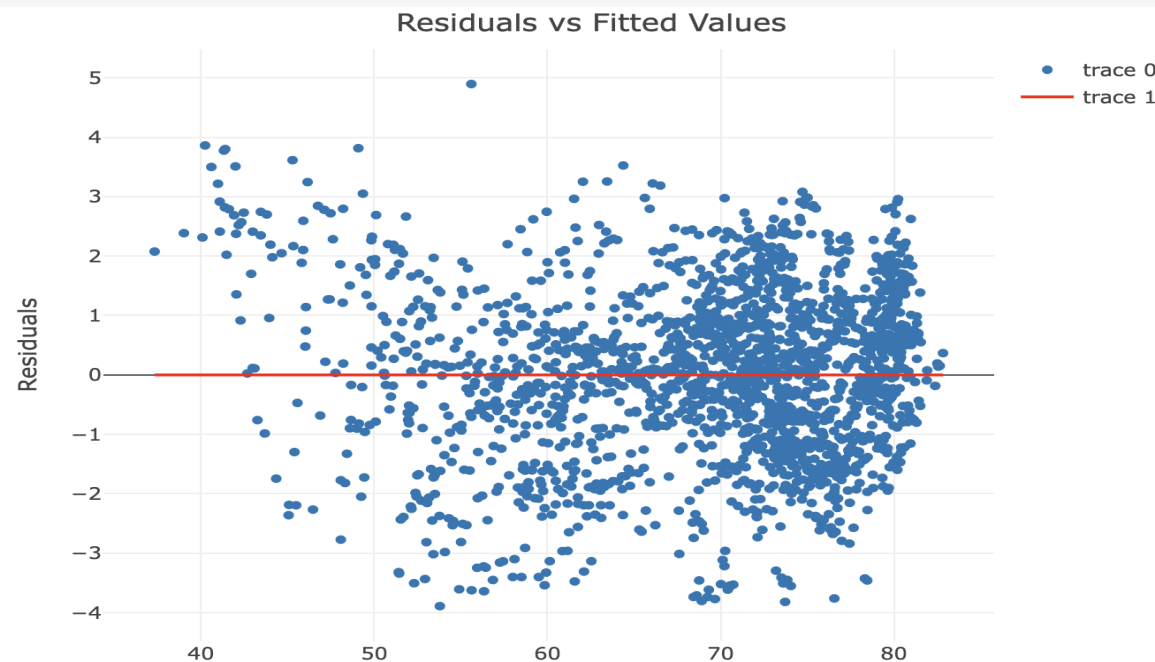

```
## Linear Regression
##
## 1996 samples
## 20 predictor
##
## No pre-processing
## Resampling: Cross-Validated (10 fold)
## Summary of sample sizes: 1798, 1797, 1796, 1796, 1796, 1796, ...
## Resampling results:
##
## RMSE      Rsquared   MAE
## 1.431348  0.9767833  1.143409
##
## Tuning parameter 'intercept' was held constant at a value of TRUE
```

```
##           Adult_mortality      Infant_deaths
##           7.247209           6.823786
##           Alcohol_consumption      Under_five_deaths
##           2.661002           2.315195
##           Year      Thinness_five_nine_years
##           1.205640           8.755260
##           Incidents_HIV `Income composition of resources`
##           2.767337           1.819810
##           `Total expenditure`      Thinness_ten_nineteen_years
##           1.278385           8.802770
##           Measles      `percentage expenditure`
##           1.414925           5.806101
##           BMI      Diphtheria
##           1.821269           2.709575
##           Schooling      GDP_per_capita
##           3.967074           5.918139
##           Polio      Hepatitis_B
##           2.434013           1.770356
##           Population_millions      Economy_status_Developed
##           1.504514           2.705831
```

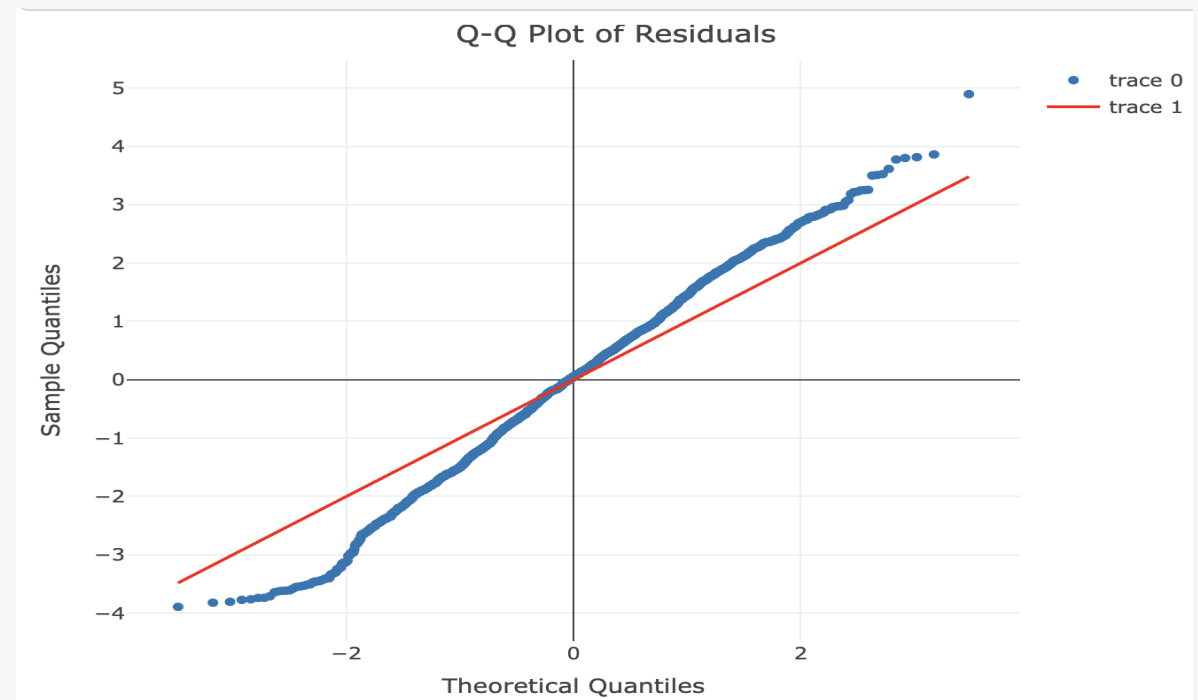
- Here we wanted to test how well our model performed by running it through a 10 fold cross validation.
- We performed the cross validation on our numeric values only.
- We can see that the model performed well based on the RMSE, Rsquared, and MAE values.
- Additionally, here we see the VIF values of our selected variables.
- Most of the variables had low levels but there were a few that had higher levels such as Thinness_ten_nineteen_years, Adult_mortality, and Thinness_five_nine_years.
- One step we could make in our future models could be removing one of the thinness variables.



- In the graph to the left we display the points and the Cook's distance along with the influence and leverage of the points.
- We can see we get a good distribution of our points clustered in the area to the left with a few outliers farther out to the right.
- Overall the residuals and distribution of our model looks good and we will continue with our analysis.



- Here we see the various plots of our residual values.
- All of our plots for the model look to confirm the assumptions of normality for our residuals.
- These plots show that there is no evidence of heteroscedasticity since they are normally distributed.





Objective 2: Compare Multiple models



Conclusion



Thank you

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