

¹ The importance of reproducibility in geographical
² research: the case of population density and the spread
³ of COVID-19

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6 Abstract

The emergence of the novel SARS-CoV-2 coronavirus and the global COVID-19 pandemic has led to explosive growth in scientific research. Of interest has been the associations between population density and the spread of the pandemic. In this paper, population density and the basic reproductive number of SARS-CoV-2 are examined in an example of reproducible research. Given the high stakes of the situation, it is essential that scientific activities, on which good policy depends, are as transparent and reproducible as possible. Reproducibility is key for the efficient operation of the self-correction mechanisms of science. Transparency and openness means that the same problem can, with relatively modest efforts, be examined by independent researchers who can verify findings, and bring to bear different perspectives, approaches, and methods—sometimes with consequential changes in the conclusions, as the empirical example of the spread of COVID-19 in the US shows.

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⁷ **Introduction**

⁸ The emergence of the novel SARS-CoV-2 coronavirus in 2019, and the global
⁹ pandemic that followed in its wake, led to an explosive growth of research around
¹⁰ the globe. According to Fraser et al. (2021), over 125,000 COVID-19-related
¹¹ papers were released in the first ten months from the first confirmed case of
¹² the disease. Of these, more than 30,000 were shared in pre-print servers, the
¹³ use of which also exploded in the past year (Añazco et al., 2021; Kwon, 2020;
¹⁴ Vlasschaert et al., 2020).

¹⁵ Given the heavy human and economic cost of the pandemic, there has been a
¹⁶ natural tension in the scientific community between the need to publish research
¹⁷ results quickly and the imperative to maintain consistently high quality standards
¹⁸ in scientific reporting; indeed, a call for maintaining the standards in published
¹⁹ research has termed this deluge of publications a “carnage of substandard research”
²⁰ (Bramstedt, 2020). Part of the challenge of maintaining quality standards
²¹ in published research is that, despite an abundance of recommendations and
²² guidelines (Broggini et al., 2017; Brunsdon and Comber, 2020; Ince et al., 2012;
²³ Ioannidis et al., 2014), in practice reproducibility has remained a lofty and
²⁴ somewhat aspirational goal (Konkol et al., 2019; Konkol and Kray, 2019). As
²⁵ reported in the literature, only a woefully small proportion of published research
²⁶ was actually reproducible before the pandemic (Iqbal et al., 2016; Stodden et
²⁷ al., 2018), and the situation does not appear to have changed substantially since
²⁸ (Gustot, 2020; Sumner et al., 2020).

²⁹ The push for open data and software, along with more strenuous efforts
³⁰ towards open, reproducible research, is simply a continuation of long-standing
³¹ scientific practices of independent verification. Despite the (at times dispro-
³² portionate) attention that high profile scandals in science tend to elicit in the
³³ media, science as a collective endeavor is remarkable for being a self-correcting

34 enterprise, one with built-in mechanisms and incentives to weed out erroneous
35 ideas. Over the long term, facts tend to prevail in science. At stake is the
36 shorter-term impacts that research may have in other spheres of economic and
37 social life. The case of economists Reinhart and Rogoff comes to mind: by the
38 time the inaccuracies and errors in their research were uncovered (see Herndon
39 et al., 2014), their claims about debt and economic growth had already been
40 seized by policy-makers on both sides of the Atlantic to justify austerity policies
41 in the aftermath of the Great Recession of 2007-2009¹. As later research has
42 demonstrated, those policies cast a long shadow, and their sequels continued to
43 be felt for years (Basu et al., 2017).

44 In the context of COVID-19, a topic that has grabbed the imagination of
45 numerous thinkers has been the prospect of life in cities after the pandemic
46 (Florida et al., 2020); the implications are the topic of ongoing research (Sharifi
47 and Khavarian-Garmsir, 2020). The fact that the worst of the pandemic was
48 initially felt in dense population centers such as Wuhan, Milan, Madrid, and New
49 York, brought a torrent of research into the associations between density and the
50 spread of the pandemic. Some important questions hang on the results of these
51 research efforts. For example, are lower density regions safer from the pandemic?
52 Are de-densification policies warranted, even if just in the short term? And in
53 the longer term, will the risks of life in high density regions presage a flight from
54 cities? What are the implications of the pandemic for future urban planning and
55 practice? Over the past year, numerous papers have sought to throw light into
56 the underlying issue of density and the pandemic; nonetheless the results, as will
57 be detailed next, remain mixed. Further, to complicate matters, precious few of

¹Nobel Prize in Economics Paul Krugman noted that “Reinhart–Rogoff may have had more immediate influence on public debate than any previous paper in the history of economics” <https://www.nybooks.com/articles/2013/06/06/how-case-austerity-has-crumbled/?pagination=false>

58 these studies appear to be sufficiently open to support independent verification.

59 The objective of this paper is to illustrate the importance of reproducibility
60 in research in the context of the flood of COVID-19 papers. To this end,
61 a recent study by Sy et al. (2021) is chosen as an example of reproducible
62 research. The objective is not to malign the analysis of these researchers, but
63 rather to demonstrate the value of openness to allow for independent verification
64 and further analysis. Open data and open code mean that an independent
65 researcher can, with only modest efforts, not only verify the findings reported,
66 but also examine the same data from a perspective which may not have been
67 available to the original researchers due to differences in disciplinary perspectives,
68 methodological traditions, and/or training, among other possible factors. The
69 example, which shows consequential changes in the conclusions reached by
70 different analyses, should serve as a call to researchers to redouble their efforts
71 to increase transparency and reproducibility in research. This paper, in addition,
72 aims to show how data can be packaged in well-documented, shareable units,
73 and code can be embedded into self-contained documents suitable for review and
74 independent verification. The source for this paper is an R Markdown document
75 which, along with the data package, will be available in a public repository².

76 **Background: the intuitive relationship between density and spread of
77 contagious diseases**

78 The concern with population density and the spread of the virus during the
79 COVID-19 pandemic was fueled, at least in part, by dramatic scenes seen in
80 real-time around the world from large urban centers such as Wuhan, Milan,
81 Madrid, and New York. In theory, there are good reasons to believe that higher

²For peer-review purposes, the data package and code are currently in an anonymous Drive folder: <https://drive.google.com/drive/folders/1cT6tcUc1pJ4aT5ajQ0emO0lyS46P8Ige?usp=sharing>

density may have a positive association with the transmission of a contagious virus. It has long been known that the potential for inter-personal contact is greater in regions with higher density (see for example the research on urban fields and time-geography, including Farber and Páez, 2011; Moore, 1970; Moore and Brown, 1970). Mathematically, models of exposure and contagion indicate that higher densities can catalyze the transmission of contagious diseases (Li et al., 2018; Rocklöv and Sjödin, 2020). The idea is intuitive and likely at the root of messages, by some figures in positions of authority, that regions with sparse population densities faced lower risks from the pandemic³.

As Rocklöv and Sjödin (Rocklöv and Sjödin, 2020) note, however, mathematical models of contagion are valid at small-to-medium spatial scales (and presumably, small temporal scales too, such as time spent in restaurants, concert halls, cruises), and the results do not necessarily transfer to larger spatial units and different time scales. There are solid reasons for this: while in a restaurant, one can hardly avoid being in proximity to other customers-however, a person can choose to (or be forced to as a matter of policy) not go to a restaurant in the first place. Nonetheless, the idea that high density correlates with high transmission is so seemingly reasonable that it is often taken for granted even at larger scales (e.g., Cruz et al., 2020; Micallef et al., 2020). At larger scales, however, there exists the possibility of behavioral adaptations, which are difficult to capture in the mechanistic framework of differential equations (or can be missing in agent-based models, e.g., Gomez et al., 2021); these adaptations, in fact, can be a key aspect of disease transmission.

A plausible behavioral adaptation during a pandemic, especially one broadcast

³Governor Kristi Noem of South Dakota, for example, claimed that sparse population density allowed her state to face the pandemic down without the need for strict policy interventions <https://www.inforum.com/lifestyle/health/5025620-South-Dakota-is-not-New-York-City-Noem-defends-lack-of-statewide-COVID-19-restrictions>

¹⁰⁶ as widely and intensely as COVID-19, is risk compensation. Risk compensation
¹⁰⁷ is a process whereby people adjust their behavior in response to their *perception*
¹⁰⁸ of risk (Noland, 1995; Phillips et al., 2011; Richens et al., 2000). In the case of
¹⁰⁹ COVID-19, Chauhan et al. (Chauhan et al., 2021) have found that perception of
¹¹⁰ risks in the US varies between rural, suburban, and urban residents, with rural
¹¹¹ residents in general expressing less concern about the virus. It is possible that
¹¹² people who listened to the message of leaders saying that they were safe because
¹¹³ of low density may not have taken adequate precautions against the virus. People
¹¹⁴ in dense places who could more directly observe the impact of the pandemic
¹¹⁵ may have become overly cautious. Both Paez et al. (2020) and Hamidi et al.
¹¹⁶ (2020b) posit this mechanism (i.e., greater compliance with social distancing in
¹¹⁷ denser regions) to explain the results of their analyses. The evidence available
¹¹⁸ does indeed show that there were important changes in behavior with respect
¹¹⁹ to mobility during the pandemic (Harris and Branon-Calles, 2021; Jamal and
¹²⁰ Paez, 2020; Molloy et al., 2020); furthermore, shelter in place orders may have
¹²¹ had greater buy-in from the public in higher density regions (Feyman et al.,
¹²² 2020; Hamidi and Zandiatashbar, 2021), and the associated behavior may have
¹²³ persisted beyond the duration of official social-distancing policies (Prahraj et
¹²⁴ al., 2020). In addition, there is evidence that changes in mobility correlated with
¹²⁵ the trajectory of the pandemic (Noland, 2021; Paez, 2020). Given the potential
¹²⁶ for behavioral adaptation, the question of density becomes more nuanced: it
¹²⁷ is not just a matter of proximity, but also of human behavior, which is better
¹²⁸ studied using population-level data and models.

¹²⁹ **Background: but what does the literature say?**

¹³⁰ When it comes to population density and the spread of COVID-19, the
¹³¹ international literature to date remains inconclusive.

132 On the one hand, there are studies that report positive associations between
133 population density and various COVID-19-related outcomes. Bhadra (2021),
134 for example, reported a moderate positive correlation between the spread of
135 COVID-19 and population density at the district level in India, however their
136 analysis was bivariate and did not control for other variables, such as income.
137 Similarly, Kadi and Khelfaoui (2020) found a positive and significant correlation
138 between number of cases and population density in cities in Algeria in a series
139 of simple regression models (i.e., without other controls). A question in these
140 relatively simple analyses is whether density is not a proxy for other factors.
141 Other studies have included controls, such as Pequeno et al. (2020), a team
142 that reported a positive association between density and cumulative counts
143 of confirmed COVID-19 cases in state capitals in Brazil after controlling for
144 covariates, including income, transport connectivity, and economic status. In
145 a similar vein, Fielding-Miller et al. (2020) reported a positive relationship
146 between the absolute number of COVID-19 deaths and population density (rate)
147 in rural counties in the US. Roy and Ghosh (2020) used a battery of machine
148 learning techniques to find discriminatory factors, and a positive and significant
149 association between COVID-19 infection and death rates in US states. Wong and
150 Li (2020) also found a positive and significant association between population
151 density and number of confirmed COVID-19 cases in US counties, using both
152 univariate and multivariate regressions with spatial effects. More recently, Sy
153 et al. (2021) reported that the basic reproductive number of COVID-19 in US
154 counties tended to increase with population density, but at a decreasing rate at
155 higher densities.

156 On the flip side, a number of studies report non-significant or negative
157 associations between population density and COVID-19 outcomes. This includes
158 the research of Sun et al. (2020) who did not find evidence of significant

correlation between population density and confirmed number of cases per day *in conditions of lockdown* in China. This finding echoes the results of Paez et al. (2020), who in their study of provinces in Spain reported non-significant associations between population density and infection rates in the early days of the first wave of COVID-19, and negative significant associations in the later part of the first lockdown. Similarly, (2020) found zero or negative associations between population density and infection numbers/deaths by country. Fielding-Miller et al. (2020) contrast their finding about rural counties with a negative relationship between COVID-19 deaths and population density in urban counties in the US. For their part, in their investigation of doubling time, White and Hébert-Dufresne (2020) identified a negative and significant correlation between population density and doubling time in US states. Likewise, (2021) found a small negative (and significant) association between population density and COVID-19 morbidity in districts in Tehran. Finally, two of the most complete studies in the US [by Hamidi et al.; (2020a); (2020b)] used an extensive set of controls to find negative and significant correlations between density and COVID-19 cases and fatalities at the level of counties in the US.

As can be seen, these studies are implemented at different scales in different regions of the world. They also use a range of techniques, from correlation analysis, to multivariate regression, spatial regressions, and machine learning techniques. This is natural and to be expected: individual researchers have only limited time and expertise. This is why reproducibility is important. To pick an example (which will be further elaborated in later sections of this paper), the study of Sy et al. [(2021); hereafter SWN] would immediately grab the attention of a researcher with a somewhat different toolbox.

184 **Reproducibility of research**

185 SWN investigated the basic reproductive number of COVID-19 in US counties,
186 and its association with population density, median household income, and
187 prevalence of private mobility. For their multivariate analysis, SWN used mixed
188 linear models. This is a reasonable modelling choice: R_0 is an interval-ratio
189 variable that is suitably modeled using linear regression; further, as SWN note
190 there is a likelihood that the process is not independent “among counties
191 within each state, potentially due to variable resource allocation and differing
192 health systems across states” (p. 3). A mixed linear model accounts for this
193 by introducing random components (in the case of SWN, random intercepts at
194 the state level). SWN estimated various models with different combinations
195 of variables, including median household income and prevalence of travel by
196 private transportation. These are sensible controls, given potential variations
197 in behavior: people in more affluent counties may have greater opportunities
198 to work from home, and use of private transportation reduces contact with
199 strangers. Moreover, they also conducted various sensitivity analyses. After
200 these efforts, SWN conclude that there is a positive association between the
201 basic reproductive number and population density at the level of counties in the
202 US.

203 One salient aspect of the analysis in SWN is that the basic reproductive
204 number can only be calculated reliably with a minimum number of cases, and a
205 large number of counties did not meet such threshold. As researchers do, SWN
206 made modelling decisions, in this case basing their analysis only on counties
207 with valid observations. A modeler with expertise in different methods would
208 likely ask some of the following questions on reading SWN’s paper: how were
209 missing counties treated? What are the implications of the spatial sampling
210 framework used in the analysis? Is it possible to spatially interpolate the missing

211 observations? These questions are relevant and their implications important.
212 Fortunately, SWN are an example of a reasonably open, reproducible research
213 product: their paper is accompanied by (most of) the data and (most of) the
214 code used in the analysis. This means that an independent expert can, with only
215 a moderate investment of time and effort, reproduce the results in the paper, as
216 well as ask additional questions.

217 Alas, reproducibility is not necessarily the norm in the relevant literature.
218 There are various reasons why a project can fail to be reproducible. In some
219 cases, there might be legitimate reasons to withhold the data, perhaps due to
220 confidentiality and privacy reasons (e.g., Lee et al., 2020). But in many other
221 cases the data are publicly available, which in fact has commonly been the case
222 with population-level COVID-19 information. Typically the provenance of the
223 data is documented, but in numerous studies the data themselves are not shared
224 (Amadu et al., 2021; Bhadra et al., 2021; Cruz et al., 2020; Feng et al., 2020;
225 Fielding-Miller et al., 2020; Hamidi et al., 2020a, 2020b; Inbaraj et al., 2021;
226 Souris and Gonzalez, 2020). As any researcher can attest, whether a graduate
227 student or a seasoned scientist, collecting, organizing, and preparing data for a
228 project can take a substantial amount of time. Pointing to the sources of data,
229 even when these sources are public, is a small step towards reproducibility-but
230 only a very small one. Faced with the prospect of having to recreate a data set
231 from raw sources is probably sufficient to dissuade all but the most dedicated
232 (or stubborn) researcher from independent verification. This is true even if part
233 of the data are shared (e.g., Wong and Li, 2020). In other cases, data are shared,
234 but the processes followed in the preparation of the data are not fully documented
235 (Ahmad et al., 2020; Skórka et al., 2020). These processes matter, as shown
236 by the errors in the spreadsheets of Reinhart and Rogoff (Herndon et al., 2014)
237 and the data of biologist Jonathan Pruitt that led to an “avalanche” of paper

²³⁸ retractions⁴. Another situation is when papers share well-documented data, but
²³⁹ fail to provide the code used in the analysis (Noury et al., 2021; Pequeno et
²⁴⁰ al., 2020; Wang et al., 2021). Making code available only “on demand” (e.g.,
²⁴¹ Brandtner et al., 2021) is an unnecessary barrier when most journals offer the
²⁴² facility to share supplemental materials online. Then there are those papers that
²⁴³ more closely comply with reproducibility standards, and share well-documented
²⁴⁴ processes and data, as well as the code used in any analyses reported (Feyman
²⁴⁵ et al., 2020; Paez et al., 2020; Stephens et al., 2021; Sy et al., 2021; White and
²⁴⁶ Hébert-Dufresne, 2020).

²⁴⁷ In the following sections, the analysis of RWN is reproduced, some relevant
²⁴⁸ questions from the perspective of an independent researcher are asked, and the
²⁴⁹ data are reanalyzed.

²⁵⁰ Reproducing SWN

²⁵¹ SWN examined the association between the basic reproductive number of
²⁵² COVID-19 and population density. The basic reproductive number R_0 is a
²⁵³ summary measure of contact rates, probability of transmission of a pathogen,
²⁵⁴ and duration of infectiousness. In rough terms, R_0 measures how many new
²⁵⁵ infections each infections begets. Infectious disease outbreaks generally tend
²⁵⁶ to die out when $R_0 < 1$, and to grow when $R_0 > 1$. Reliable calculation of
²⁵⁷ R_0 requires a minimum number of cases to be able to assume that there is
²⁵⁸ community transmission of the pathogen. Accordingly, SWN based their analysis
²⁵⁹ only on counties that had at least 25 cases or more at the end of the exponential
²⁶⁰ growth phase (see Fig. 1). Their final sample included 1,151 counties in the US,
²⁶¹ including in Alaska, Hawaii, Puerto Rico, and island territories.

²⁶² Table 1 reproduces the first three models of SWN (the fourth model did

⁴<https://doi.org/10.1038/d41586-020-00287-y>

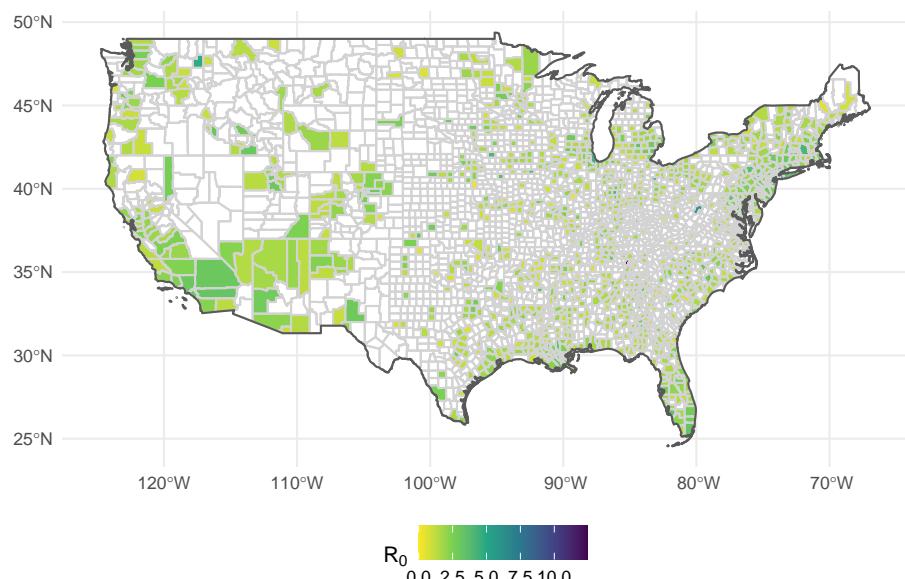


Figure 1: Basic reproductive rate in US counties (Alaska, Hawaii, Puerto Rico, and territories not shown).

Table 1: Reproducing SWN: Models 1-3

Variable	Model 1		Model 2		Model 3	
	beta	95% CI	beta	95% CI	beta	95% CI
Intercept	2.274	[2.167, 2.381]	3.347	[2.676, 4.018]	3.386	[2.614, 4.157]
Log of population density	0.162	[0.133, 0.191]	0.145	[0.115, 0.176]	0.147	[0.113, 0.18]
Percent of private transportation			-0.013	[-0.02, -0.005]	-0.013	[-0.021, -0.005]
Median household income (\$10,000)					-0.003	[-0.033, 0.026]
Standard deviation (Intercept)	0.166	[0.108, 0.254]	0.136	[0.081, 0.229]	0.137	[0.081, 0.232]
Within-group standard error	0.665	[0.638, 0.693]	0.665	[0.638, 0.693]	0.665	[0.638, 0.694]

not have any significant variables; see Table 1 in SWN). It is possible to verify that the results match, with only the minor (and irrelevant) exception of the magnitude of the coefficient for travel by private transportation, which is due to a difference in the input (here the variable is one percent units, whereas in SWN it was ten percent units). The mixed linear model gives random intercepts (i.e., the intercept is a random variable), and the standard deviation is reported in the fourth row of Table 1. It is useful to map the random intercepts: as seen in Figure 2, other things being equal, counties in Texas tend to have somewhat lower values of R_0 (i.e., a negative random intercept), whereas counties in South Dakota tend to have higher values of R_0 . The key of the analysis, after extensive sensitivity analysis, is a robust finding that population density has a positive association with the basic reproductive number. But does it?

Expanding on SWN

The preceding section shows that thanks to the availability of code and data, it is possible to verify the results reported by SWN. As noted earlier, though, an independent researcher might have wondered about the implications of the spatial sampling procedure used by SWN. The decision to use a sample of counties with reliable basic reproductive numbers, although apparently sensible, results in a non-random spatial sampling scheme. Turning our attention back to Figure 1, we form the impression that many counties without reliable values

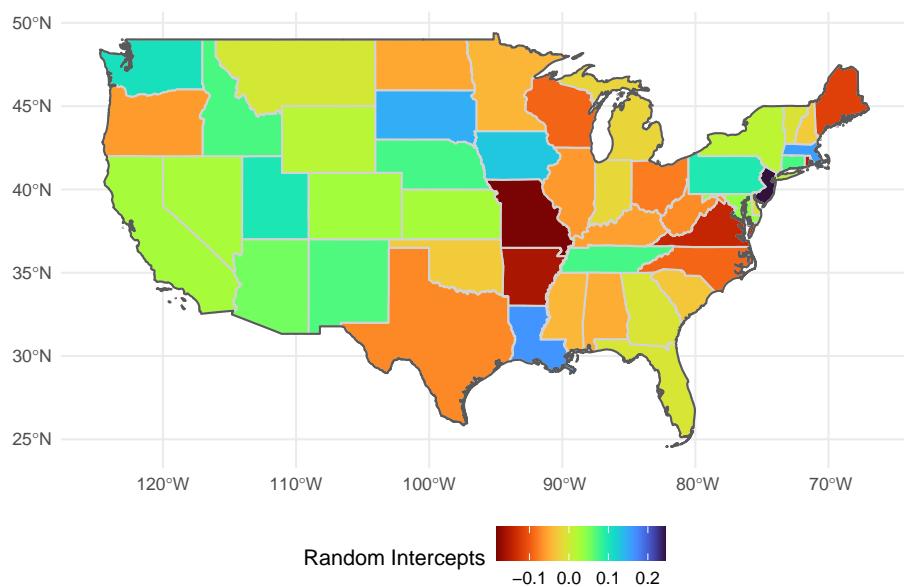
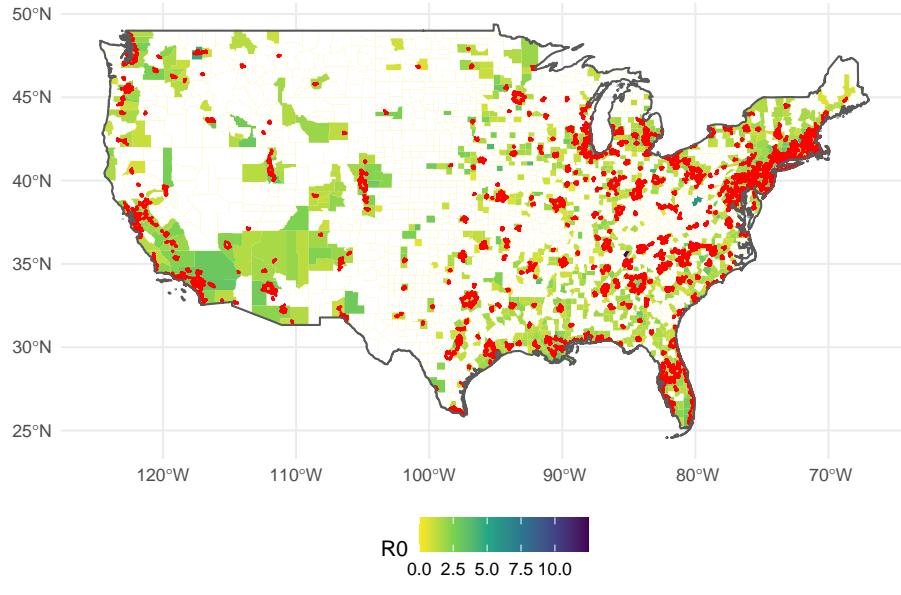


Figure 2: Random intercepts of Model 3 (Alaska, Hawaii, Puerto Rico, and territories not shown).



Note: boundaries of urbanized areas with population > 50,000 are shown in red

Figure 3: Urban areas with population > 50,000 (Alaska, Hawaii, Puerto Rico, and territories not shown).

of R_0 are in more rural, less dense parts of the United States. This impression is reinforced when we overlay the boundaries of urban areas with population greater than 50,000 on the counties with valid values of R_0 (see Figure 3). The fact that R_0 could not be accurately computed in many counties without large urban areas does not mean that there was no transmission of the virus: it simply means that we do not know with precision whether that was the case. The low number of cases may be related to low population and/or low population density. This is intriguing, to say the least: by excluding cases based on the ability to calculate R_0 we are potentially *censoring* the sample in a non-random way.

A problematic issue with non-random sample selection is that parameter estimates can become unreliable, and numerous techniques have been developed over time to address this. A model useful for sample selection problems is

²⁹⁵ Heckman's selection model (see Maddala, 1983). The selection model is in fact a
²⁹⁶ system of two equations, as follows:

$$y_i^{S*} = \beta^{S'} x_i^S + \epsilon_i^S$$

$$y_i^{O*} = \beta^{O'} x_i^O + \epsilon_i^O$$

²⁹⁷ where y_i^{S*} is a latent variable for the sample selection process, and y_i^{O*} is
²⁹⁸ the latent outcome. Vectors x_i^S and x_i^O are explanatory variables (with the
²⁹⁹ possibility that $x_i^S = x_i^O$). Both equations include random terms (i.e., ϵ_i^S and
³⁰⁰ ϵ_i^O) The first equation is designed to model the *probability* of sampling, and the
³⁰¹ second equation the outcome of interest (say R_0). The random terms are jointly
³⁰² distributed and correlated with parameter ρ .

What the analyst observes is the following:

$$y_i^S = \begin{cases} 0 & \text{if } y_i^{S*} < 0 \\ 1 & \text{otherwise} \end{cases}$$

and:

$$y_i^O = \begin{cases} 0 & \text{if } y_i^S = 0 \\ y_i^{O*} & \text{otherwise} \end{cases}$$

³⁰³ In other words, the outcome of interest is observed *only* for certain cases
³⁰⁴ ($y_i^S = 1$, i.e., for sampled observations). The probability of sampling depends on
³⁰⁵ x_i^S . For the cases observed, the outcome y_i^O depends on x_i^O .

³⁰⁶ A sample selection model is estimated using the same selection of variables as
³⁰⁷ SWN Model 3. This is Sample Selection Model 1 in Table 3. The first thing to
³⁰⁸ notice about this model is that the sample selection process and the outcome are
³⁰⁹ not independent ($\rho \neq 0$ with 5% of confidence). The selection equation indicates
³¹⁰ that the probability of a county to be in the sample increases with population
³¹¹ density (but at a decreasing rate due to the log-transformation), when travel by

312 private modes is more prevalent, and as median household income in the county
313 is higher. This is in line with the impression left by Figure 3 that counties with
314 reliable values of R_0 tended to be those with larger urban centers. Once that the
315 selection probabilities are accounted for in the model, several things happen with
316 the outcomes model. First, the coefficient for population density is still positive,
317 but the magnitude changes: in effect, it appears that the effect of density is more
318 pronounced than what SWN Model 3 indicated. The coefficient for percent of
319 private transportation changes signs. And the coefficient for median household
320 income is now significant.

321 The second model in Table 3 (Selection Model 2) changes the way the
322 variables are entered into the model. The log-transformation of density in SWN
323 and Selection Model 1 assumes that the association between density and R_0 is
324 monotonically increasing (if the sign of the coefficient is positive) or decreasing
325 (if the sign of the coefficient is negative). There are some indications that the
326 relationship may actually not be monotonical. For example, Paez et al. (2020)
327 found a positive (if non-significant) relationship between density and incidence
328 of COVID-19 in the provinces of Spain at the beginning of the pandemic. This
329 changed to a negative (and significant) relationship during the lockdown. In
330 the case of the US, Fielding-Miller et al. (2020) found that the association
331 between COVID-19 deaths and population density was positive in rural counties,
332 but negative in urban counties. A variable transformation that allows for non-
333 monotonic changes in the relationship is the square of the density.

334 As seen in the table, Selection Model 2 replaces the log-transformation of
335 population density with a quadratic expansion. The results of this analysis
336 indicate that with this variable transformation, the selection and outcome
337 processes are still not independent ($\rho \neq 0$ with 5% of confidence). But a few
338 interesting things emerge. When we examine the outcomes model, we see that

Table 2: Estimation results of sample selection models

Variable	Selection Model 1		Selection Model 2	
	β	95% CI	β	95% CI
Sample Selection Model				
Intercept	-2.237	[-3.109, -1.365]	-7.339	[-8.381, -6.297]
Log of population density	0.385	[0.352, 0.418]		
Density (1,000 per sq.km)			2.484	[2.13, 2.838]
Density squared			-0.387	[-0.473, -0.3]
Percent of private transportation	0.025	[0.016, 0.034]	0.057	[0.046, 0.067]
Median household income (10,000)	0.202	[0.168, 0.235]	0.32	[0.283, 0.357]
Outcome Model				
Intercept	0.605	[-0.257, 1.466]	2.784	[1.652, 3.915]
Log of population density	0.39	[0.354, 0.426]		
Density (1,000 per sq.km)			0.758	[0.509, 1.008]
Density squared			-0.132	[-0.187, -0.077]
Percent of private transportation	0.01	[0.001, 0.018]	-0.011	[-0.021, -0.001]
Median household income (\$10,000)	0.126	[0.094, 0.159]	0.002	[-0.033, 0.037]
σ	0.954	[0.904, 1.003]	0.684	[0.652, 0.716]
ρ	0.971	[0.961, 0.98]	-0.199	[-0.377, -0.022]

³³⁹ the quadratic expansion has a positive coefficient for the first order term, but a
³⁴⁰ negative coefficient for the second order term. This indicates that R_0 initially
³⁴¹ tends to increase with higher density, but only up to a point, after which the
³⁴² negative second term (which grows more rapidly due to the square), becomes
³⁴³ increasingly dominant. Secondly, the sign of the coefficient for travel by private
³⁴⁴ transportation becomes negative again. This, of course, makes more sense
³⁴⁵ than the positive sign of Selection Model 1: if people tend to travel in private
³⁴⁶ transportation, the potential for contact should be lower instead of higher. And
³⁴⁷ finally median household income is no longer significant.

³⁴⁸ **Proceed with caution: Spatial effects ahead!**

³⁴⁹ Words go here.

Table 3: Estimation results of sample selection model with spatial filter

Variable	Selection Model 3	
	β	95% CI
Sample Selection Model		
Intercept	-7.304	[-8.346, -6.262]
Density (1,000 per sq.km)	2.445	[2.089, 2.802]
Density squared	-0.380	[-0.468, -0.292]
Percent of private transportation	0.056	[0.046, 0.067]
Median household income (10,000)	0.318	[0.28, 0.356]
Outcome Model		
Intercept	2.563	[2.497, 2.629]
Density (1,000 per sq.km)	0.760	[0.746, 0.774]
Density squared	-0.133	[-0.135, -0.13]
Percent of private transportation	-0.011	[-0.012, -0.011]
Median household income (\$10,000)	0.002	[-0.001, 0.004]
Spatial filter	1.000	[0.998, 1.001]
σ	0.017	[0.015, 0.019]
ρ	-0.304	[-0.957, 0.349]

350 **Discussion**

351 How relevant are the difference between the different model specifications
352 presented above? Figure 4 shows the relationship between density and R_0 implied
353 by SWN Model 3, Selection Model 2, and Selection Model 3. The left panel of the
354 figure shows the non-linear but monotonic relationship implied by SWN Model
355 1. The conclusion is that at higher densities, R_0 is *always* higher. The right
356 panel, in contrast, shows that, according to Selection Model 2, R_0 is zero when
357 density is zero (as expected), and then it tends to increase at higher densities.
358 This continues until a density of approximately 2.9 (1,000 people per sq.km). At
359 higher densities than that R_0 begins to decline, and the relationship becomes
360 negative at densities higher than approximately 5.7 (1,000 people per sq.km).

361 Thus, other things being equal, the effect of density in a county like Char-
362 lottesville in Virginia (density ~1,639 people per sq.km) is roughly the same as
363 that in a county like Philadelphia (density ~4,127 people per sq.km). In contrast,
364 the effect of density on R_0 in a county like Arlington in Virginia (density ~3,093
365 people per sq.km) is *stronger* than either of the previous two examples. Lastly,
366 the density of counties like San Francisco in California, or Queens and Bronx in
367 NY, which are among the densest in the US, contributes even less to R_0 than
368 even the most rural counties in the country.

369 It is worth at this point to recall Cressie's dictum about modelling: "[w]hat
370 is one person's mean structure could be another person's correlation structure"
371 (Cressie, 1989, p. 201). There are almost always multiple ways to approach a
372 modelling situation. In the present case, we would argue that spatial sampling
373 is an important aspect of the modeling process, but one that perhaps required
374 different technical skills than those available to SWN. There is nothing wrong
375 with that. What matters is that, by adopting relatively high reproducibility
376 standards, these researchers made a valuable and honest contribution to the

³⁷⁷ collective enterprise of seeking knowledge. Their effort, and subsequent efforts
³⁷⁸ to validate and expand on their work, can potentially contribute to provide
³⁷⁹ clarity to ongoing conversations about the relevance of density and the spread of
³⁸⁰ COVID-19.

³⁸¹ In particular, it is noteworthy that a sample selection model with a different
³⁸² variable transformation does not lend support to the thesis that higher density is
³⁸³ *always* associated with a greater risk of spread of the virus [as put by Wong and
³⁸⁴ Li, “‘Density is destiny’ is probably an overstatement”; (2020)]. At the same
³⁸⁵ time, this also stands in contrast to the findings of Hamidi et al., who found that
³⁸⁶ higher density was either not significantly associated with the rate of the virus in
³⁸⁷ a cross-sectional study (Hamidi et al., 2020b), or was negatively associated with
³⁸⁸ in a longitudinal setting [Hamidi et al. (2020a)]. In this sense, the conclusion that
³⁸⁹ density does not aggravate the pandemic may have been somewhat premature;
³⁹⁰ instead, reanalysis of the data of SWN suggests that Fielding-Miller et al. (2020)
³⁹¹ might be onto something with respect to the difference between rural and urban
³⁹² counties. More generally, in population-level studies, density is indicative of
³⁹³ proximity, no doubt about that, but also for adaptive behavior. And it is possible
³⁹⁴ that the determining factor during COVID-19, at least in the US, has been
³⁹⁵ variations in perceptions of the risks associated with contagion (Chauhan et al.,
³⁹⁶ 2021), and subsequent compensations in behavior in more and less dense regions.

³⁹⁷ Conclusion

³⁹⁸ The tension between the need to publish research potentially useful in dealing
³⁹⁹ with a global pandemic, and a “carnage of substandard research” (Bramstedt,
⁴⁰⁰ 2020), highlights the importance of efforts to maintain the quality of scientific
⁴⁰¹ outputs during COVID-19. An important part of quality control is the ability of
⁴⁰² independent researchers to verify and examine the results of materials published

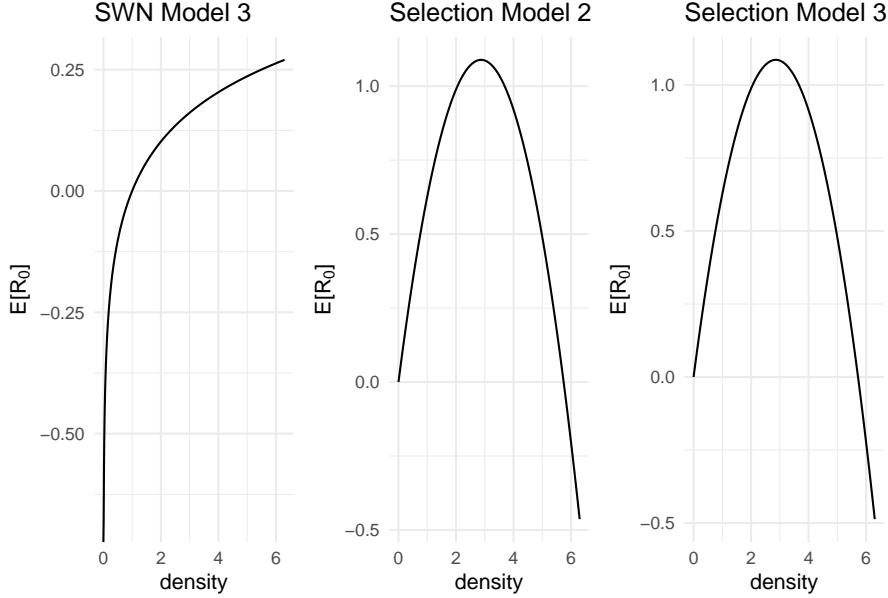


Figure 4: Effect of density according to SWN Model 3 and Sample Selection Model 2.

403 in the literature. As previous research illustrates, reproducibility in scientific
 404 research remains an important but elusive goal (Gustot, 2020; e.g., Iqbal et al.,
 405 2016; Stodden et al., 2018; Sumner et al., 2020). This idea is reinforced by the
 406 review conducted for this paper in the context of research about population
 407 density and the spread of COVID-19.

408 Taking one recent example from the literature [Sy et al., Sy et al. (2021);
 409 SWN], the present paper illustrates the importance of good reproducibility
 410 practices. Sharing data and code can catalyze research, by allowing independent
 411 verification of findings, as well as additional research. After verifying the results of
 412 SWN, experiments with sample selection models and variations in the definition
 413 of model inputs, lead to an important reappraisal of the conclusion that high
 414 density is associated with greater spread of the virus. Instead, the possibility
 415 of a non-monotonical relationship between population density and contagion is

416 raised.

417 In the spirit of openness, this paper is prepared as an R Markdown document,
418 an a companion data package is provided. The data package contains the relevant
419 documentation of the data, and all data pre-processing is fully documented.
420 Hopefully this, and similar reproducible papers, will continue to encourage others
421 to adopt reproducible standards in their research.

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