

COVID-19 Pandemic Analysis

Presented by

Group #21

Abbas Raza
Mishaal Usman
Rahimah Siddiqi
Syed Rayyan Jamal
Syed Rohaan Hussain

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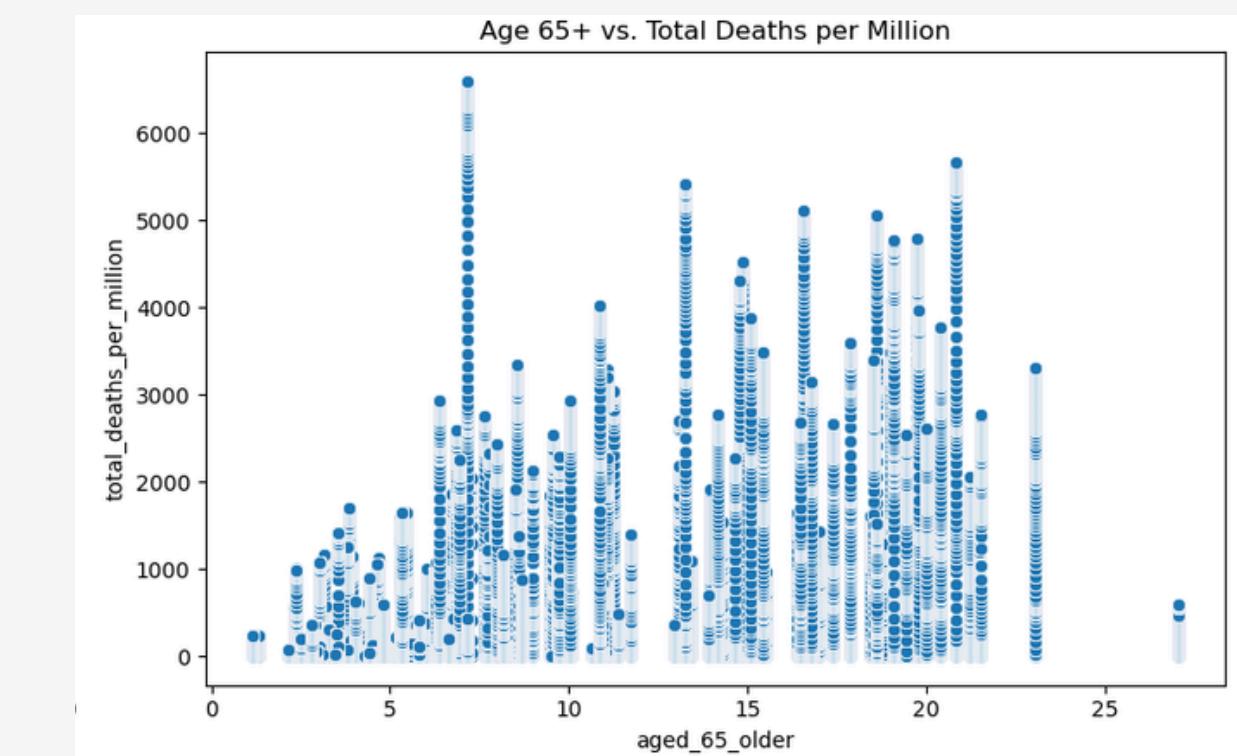
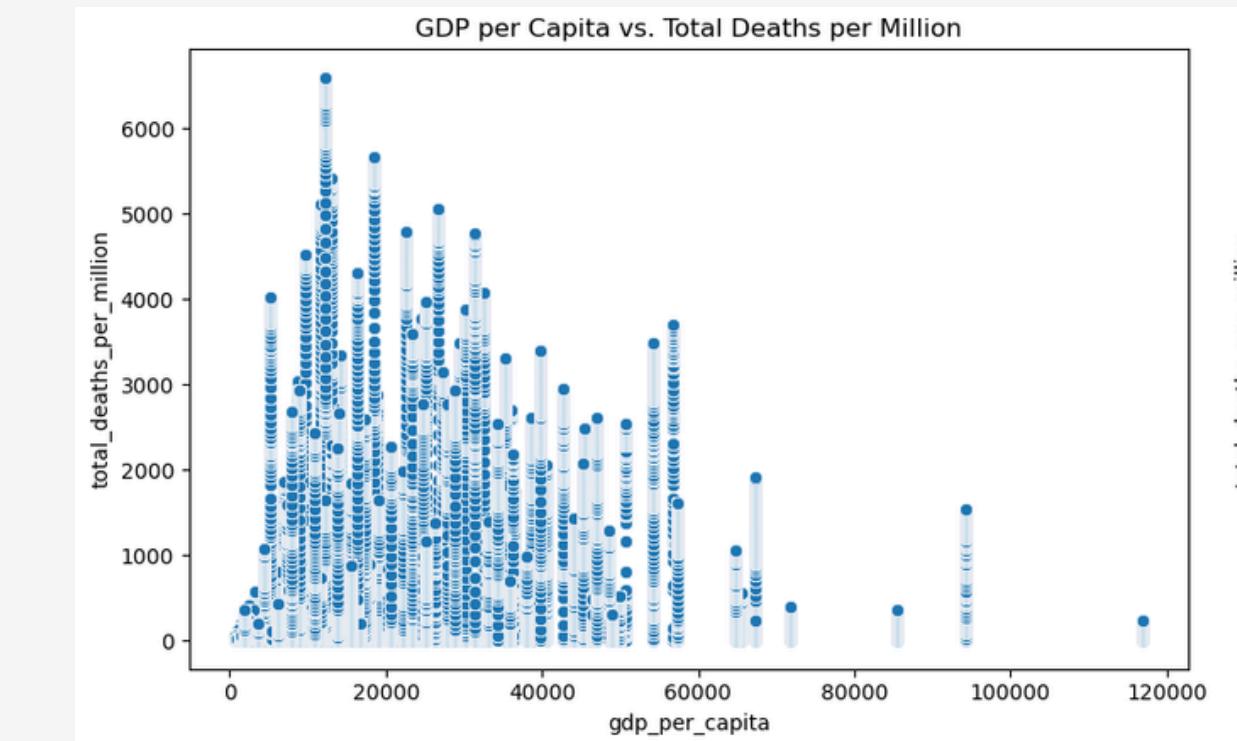
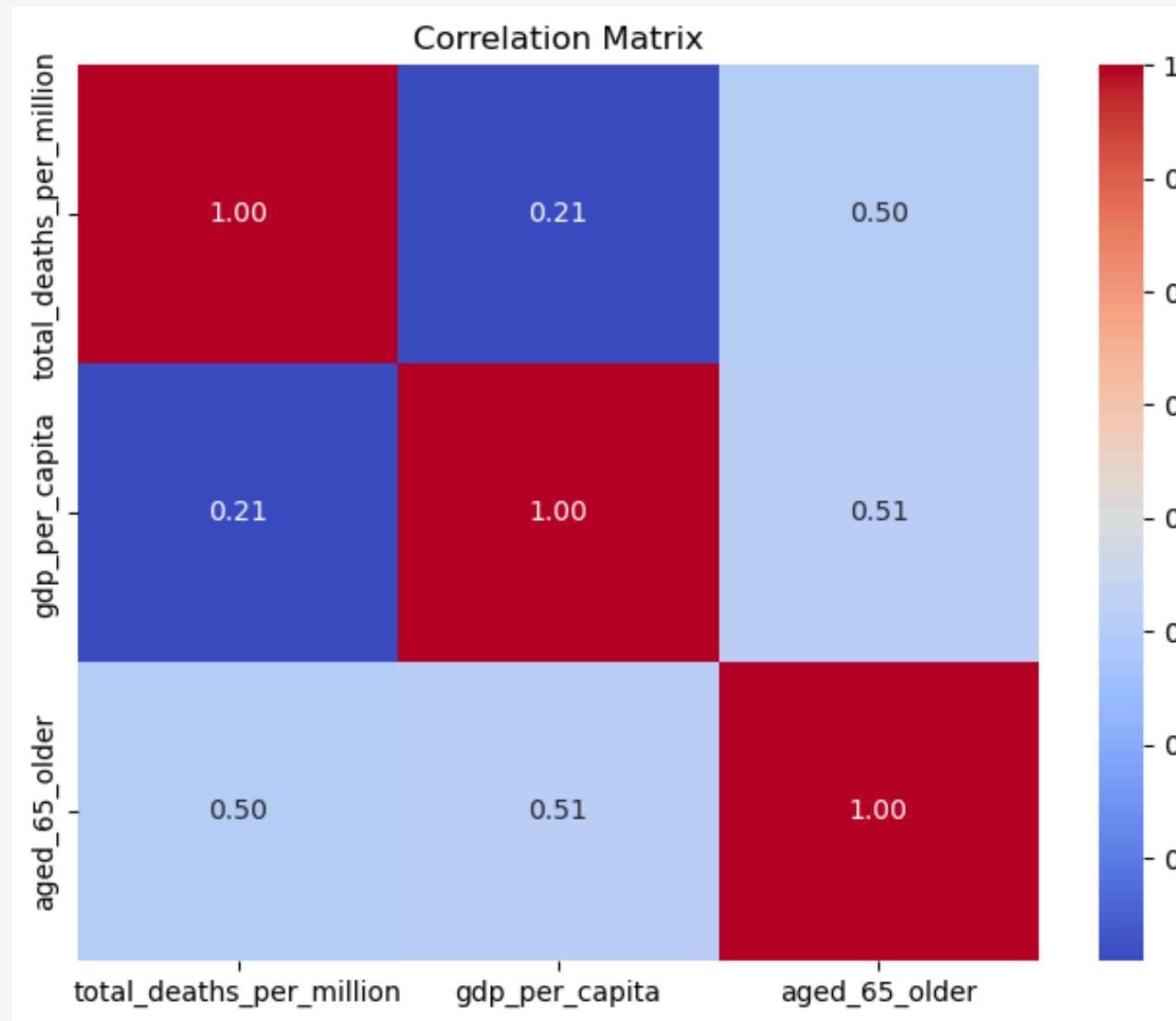
Introduction

The COVID-19 Pandemic has been the most significant health crisis of the 21st century, with a considerable contrast existing in the intensity of the Pandemic's impact on different countries. Our dataset comprehensively tracks multiple economic and demographic indicators across all countries in the world on a daily basis from 2019 to 2025. We use this data to develop a machine learning model that predicts total deaths per million people based on:

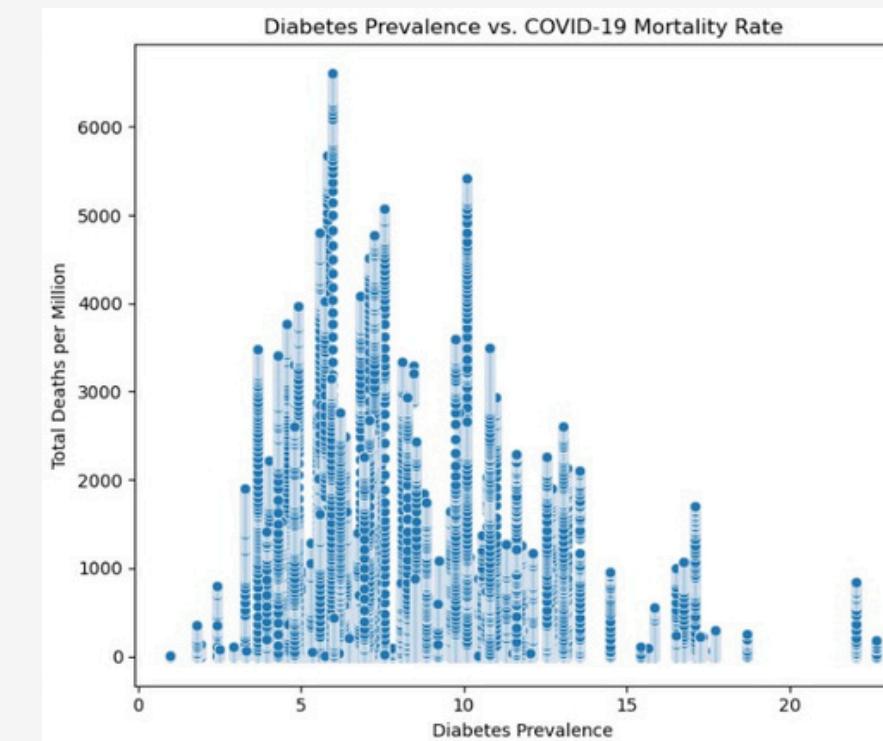
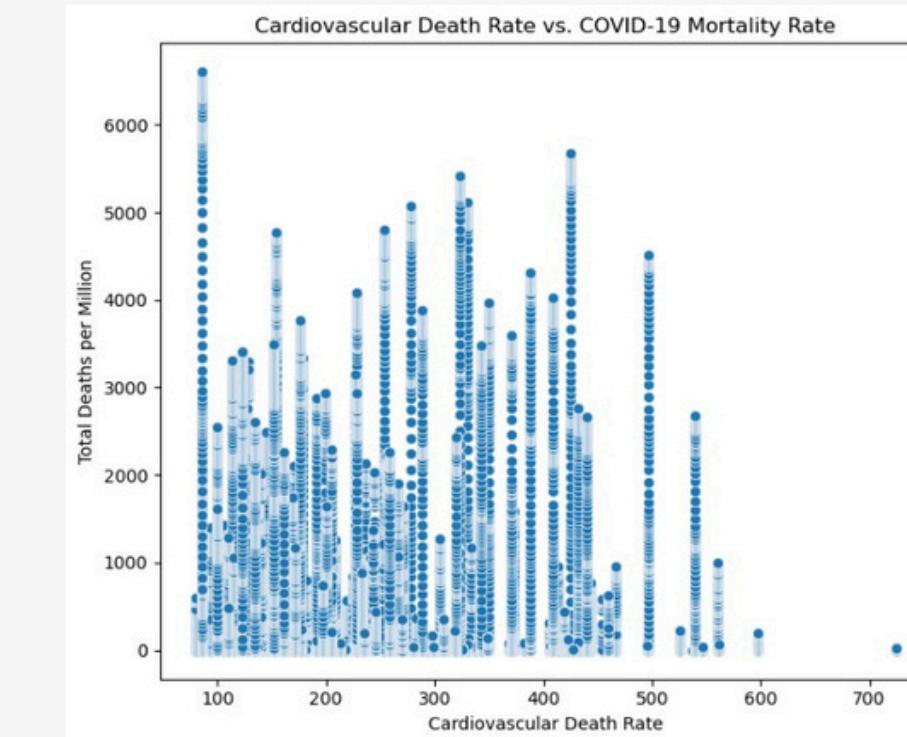
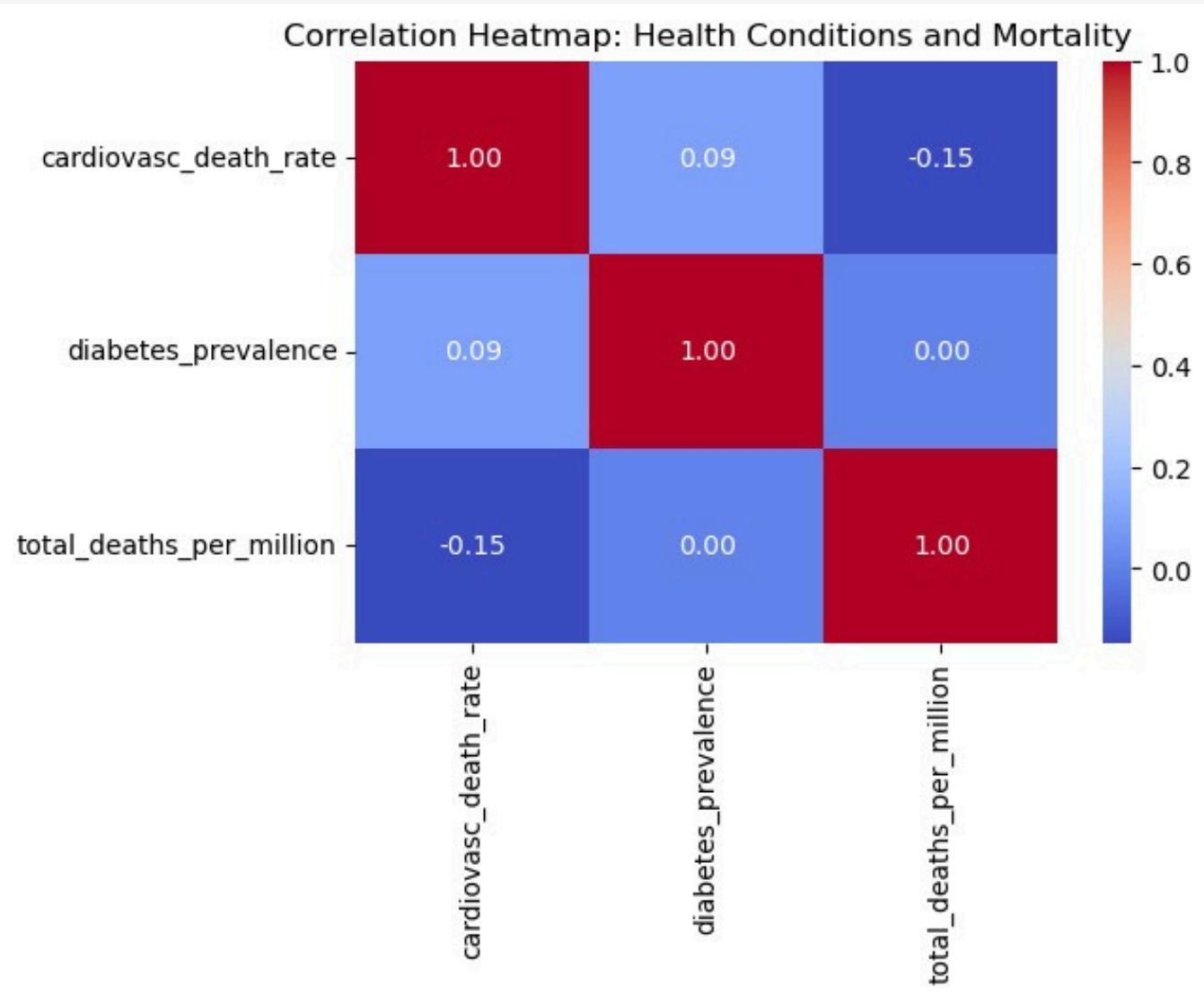
- GDP per capita
- Percentage of population aged 65 or above
- Population density
- HDI
- Hospital beds per thousand people
- Government response measures (stringency)

to answer the following research questions:

- Does higher HDI and GDP per capita lead to a lower number of cases and deaths?
- To what extent did pre-existing health conditions, such as cardiovascular disease and diabetes, contribute to a higher mortality rate among COVID-19 patients?
- How did demographic factors such as median age and proportion of elderly individuals impact mortality rates across countries?

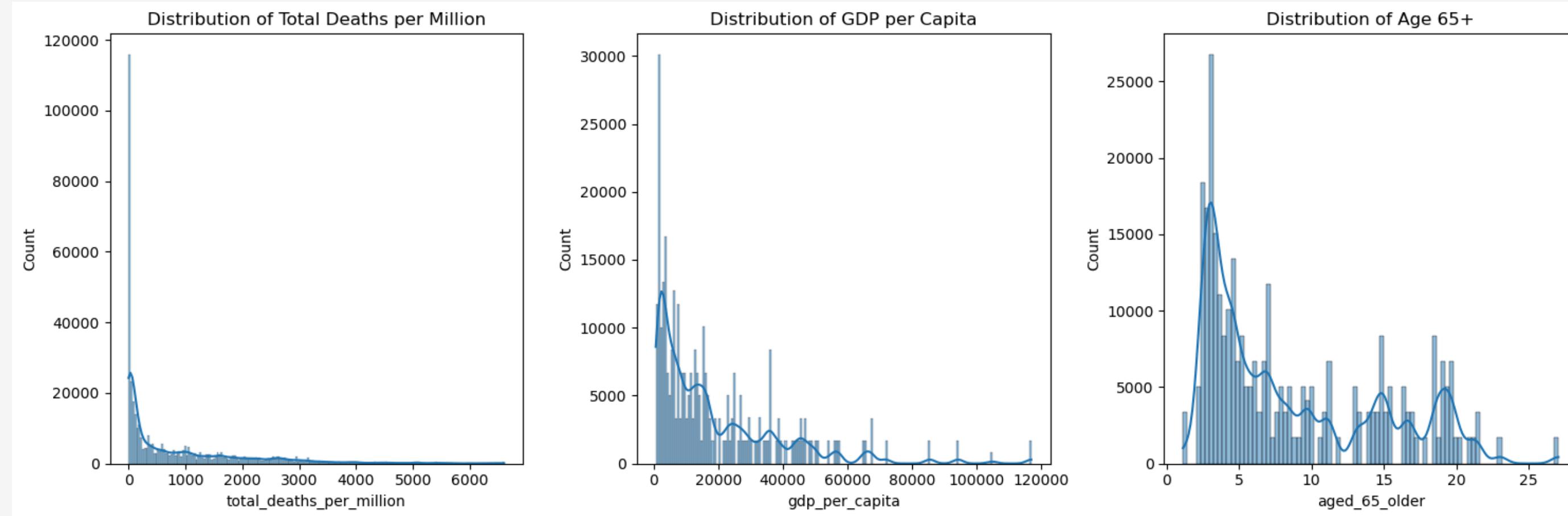


The weak positive correlation between gdp_per_capita and total_deaths_per_million (0.21) and moderate positive correlation between aged_65_older and total_deaths_per_million (0.50) provide strong support for our first and third research questions.



The absence of correlation between `diabetes_prevalence` and `total_deaths_per_million` (0.00) and negative correlation between `cardiovasc_death_rate` and `total_deaths_per_million` (-0.15), leading us to discard our second research questions

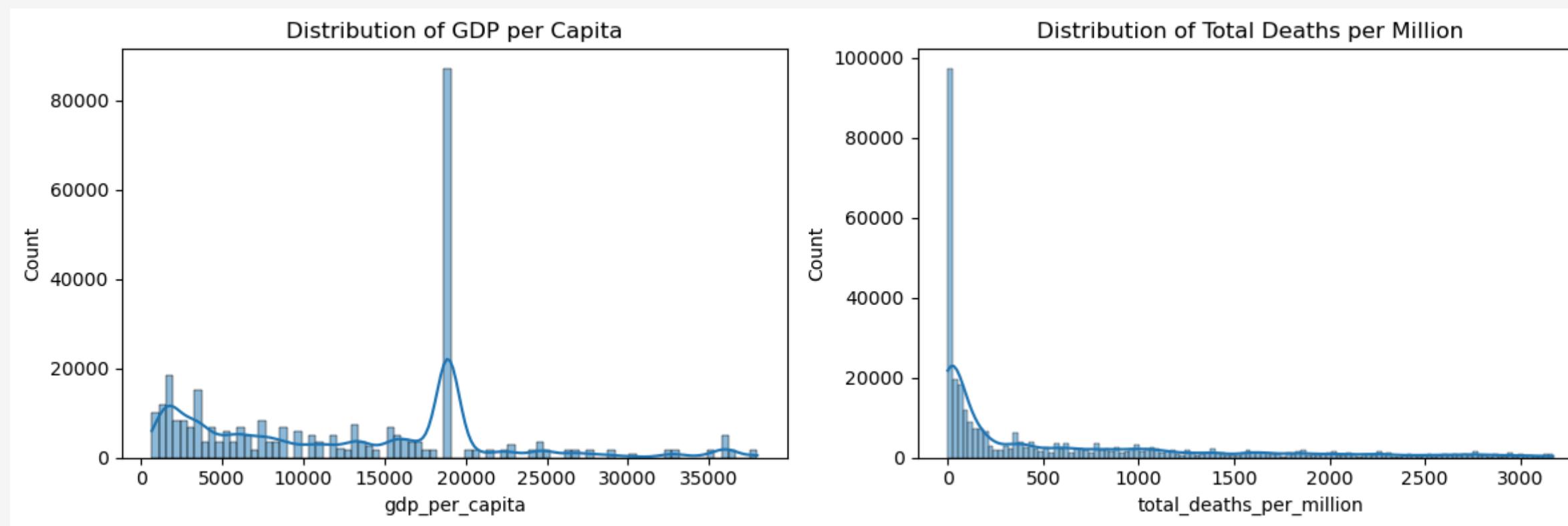
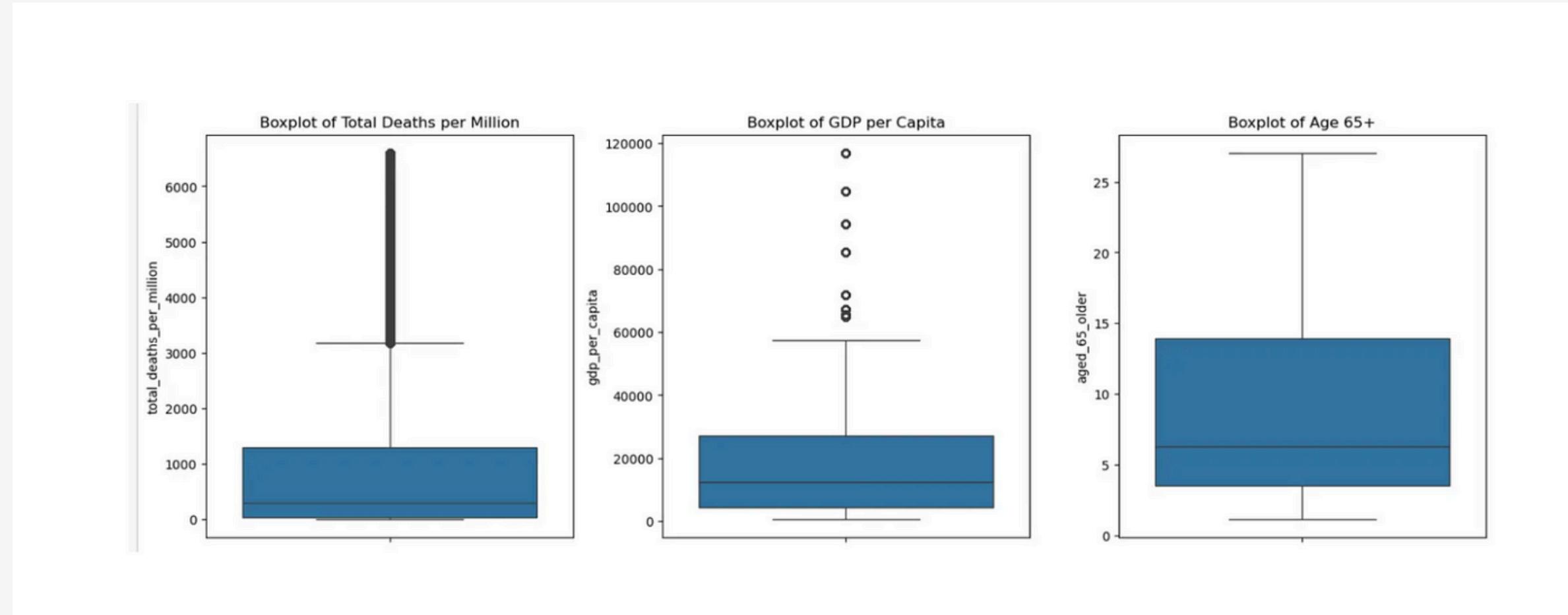
Data Analysis



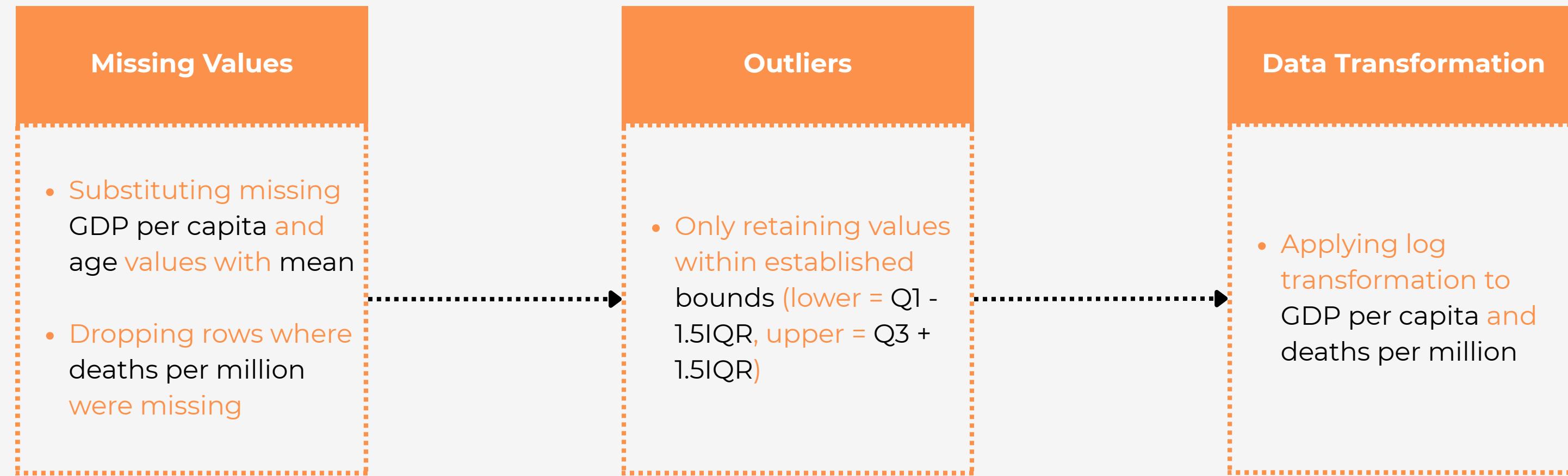
Total deaths per million: **strong right skew**, with most countries experiencing lower death rates

GDP per capita: **right-skewed distribution**, with most countries clustered at lower to mid-range values

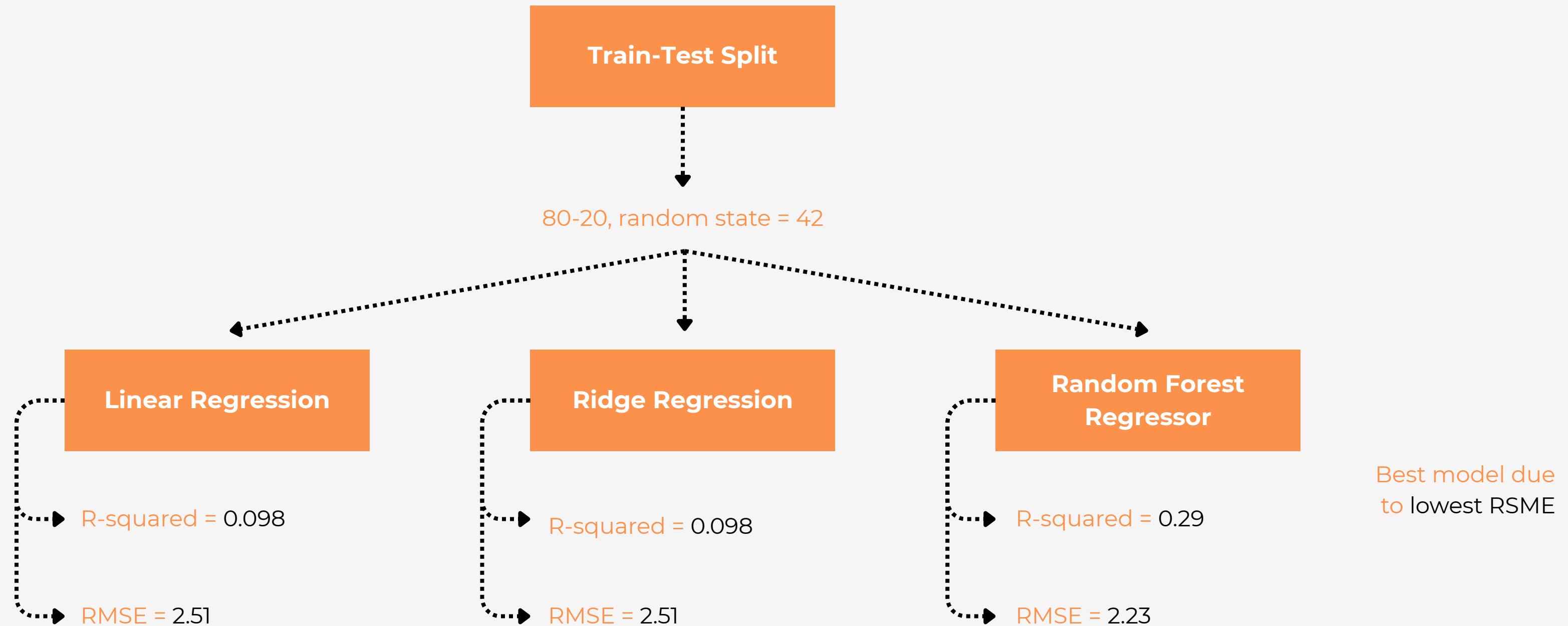
Population aged 65 or above: **multimodal distribution**, with different demographic stages **for different countries**



Data Cleaning



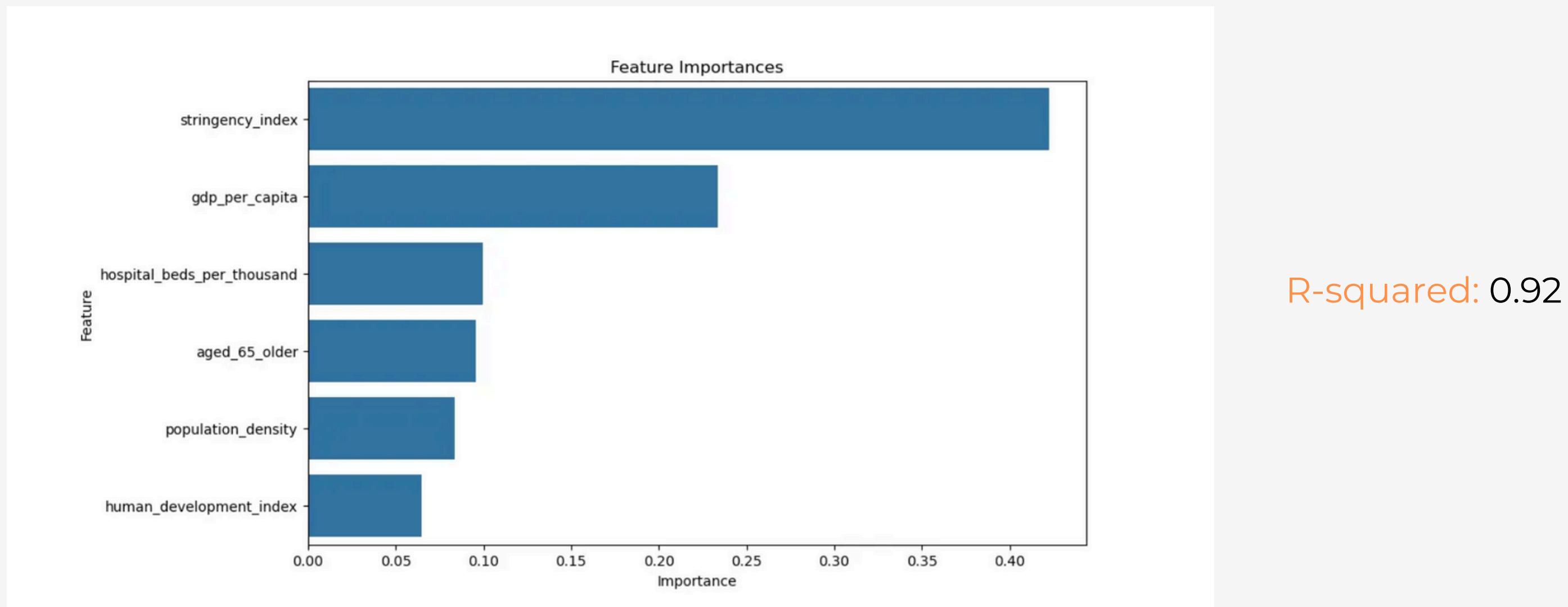
Defining Model



Including the following additional features to boost the robustness of the model:

- hospital_beds_per_thousand
- human_development_index
- population_density
- stringency_index

the target remains total_deaths_per_million as before



Key Findings

Rank	Feature	Importance
1	Stringency Index	0.422433 (42.2%)
2	GDP Per Capita	0.233479 (23.3%)
3	Hospital Beds Per Thousand	0.095572 (9.6%)
4	Aged 65 Older	0.095916 (9.6%)
5	Population Density	0.083601 (8.4%)
6	Human Development Index	0.064998 (6.5%)

- Limited predictive power of basic models: The low R-squared values (around 9.8) for linear models indicated that simple GDP and age relationships cannot adequately explain COVID-19 mortality patterns
- Complex factor interplay: The superior performance of the Random Forest model (R-squared 0.92) suggests that mortality prediction requires accounting for complex, non-linear interactions between multiple factors
- Policy matters most: The high importance of the stringency index (42.2%) suggests that government policy responses were the single most influential factor in determining mortality outcomes
- Age vulnerability confirmed: The substantial importance of the aged 65+ population (23.3%) aligns with clinical observations of higher COVID-19 risk in older demographics
- Economic factors are less critical than expected: GDP per capita's relatively modest contribution (9.6%) challenges assumptions that economic development was a primary protective factor

Prioritise rapid
government action

Develop specialised
strategies for vulnerable
demographics

Optimal Pandemic Measures

Address density-related
transmission risks

Focus on economic
indicators in tandem with
demographic indicators

Collectively establish
linkages between all
metrics

Limitations

Temporal
Dynamics

Variable
Selection

Geographic
Factors

Model
Exploration

Causality vs.
Correlation

Thank
You