**Impact of covid-19 across multiple facets**

# INTRODUCTION

The term "excess mortality" is used in the fields of public health and epidemiology to describe a death toll that is greater than what would be expected in the absence of a crisis.  Specifically, I am interested in how much less mortality has occurred than was predicted during the COVID-19 epidemic.

The number of deaths attributed to COVID-19 may be fewer than what is really the case. Those whose deaths may have been attributable to COVID-19 but were either unreported or misdiagnosed are included in the count.

From religion to politics to economics to the arts, the World Values Surveys (Inglehart & Welze, 2010) try to put a number on it all. The secular-rational versus traditional values on the y-axis and the self-expression versus survival values on the x-axis together account for nearly 70% of the cross-national variation, as determined by a component analysis with 10 indicators. There are several connections between these traits and other key aspects (Inglehart and Welze, 2010).

By comparing the scores of the 24 countries that were included in both Schwartz's and Hofstede's data sets, Steenkamp (2001) was able to derive four new national-cultural traits. For his national cultural aspects, Steenkamp has relied solely on data from Schwartz and Hofstede; however, his investigation reveals connections between the two, proving the lasting validity of these older cultural theories. Based on an examination of the relationships between COVID-19 cases and mortality in counties across the United States, Desmet and Wacziarg (2021) identified four primary factors. These factors contribute to an understanding of the variation in COVID-19's impact throughout the nation. To start, effective density is essential since it may be used as a long-term indicator of how severe COVID-19 will be. On addition, it has a more detrimental impact in areas that are predominantly home to members of minority groups, such as African Americans and Chinese. Third, although characteristics like population density and accessibility to major airports may seem to have a large impact on their own, this impact often decreases as other variables are considered. To sum up, counties that voted for Trump saw less immediate loss but saw far greater long-term consequences. Republican strongholds fared better than Democratic strongholds during the epidemic. Potentially reducing the likelihood of social isolation, mask-wearing norms, and lockdown procedures, this formative experience may have influenced later behaviour and policy decisions associated with political involvement. This theory posits that in Trump strongholds, residents' pre-existing preferences and attitudes prevented them from responding more forcefully as the outbreak worsened. As a result, areas where support for Trump is higher have been struck harder by the COVID-19 pandemic (Desmet and Wacziarg, 2021).

Liu et al. found that while persons in high HDI locations had lower smoking rates and higher average annual incomes, they also had a larger proportion of the population who suffered from several chronic conditions (2020). Using multivariate logistic regression, scientists have shown that these three factors explain why the HDI is associated with death and infection rates. To what extent does Italy's HDI correlate with the rate of COVID-19 infection and mortality? Liu et al. (2020) There is still a favourable correlation between the human development index (HDI) and the COVID-19 illness and death rates. Medical and social progress in the West have made it possible for individuals to anticipate a high standard of living far into their advanced years, strengthening the link between longevity and prosperity. Only Japan, one of the top 30 nations with the highest percentage of citizens aged 65 and over, is not in the Western Hemisphere.

In Western Europe, the elderly population is disproportionately affected by the COVID-19 pandemic (Levin et al., 2020). Wu et al. (2020) found, after accounting for a wide range of geographically specific factors, that greater historical PM2.5 pollution exposures in the United States were linked to higher COVID-19 death rates at the county level. Their results show that current air pollution limitations are essential to protecting human health during and after the current COVID-19 outbreak. To evaluate the effects of climate change on precipitation, temperature, and biodiversity, Fernández et al. (2021) used spatio-temporal models using data from 160 countries. Also, a count time series was used to characterise the relationship between air quality factors and the spread of COVID-19. All the research took similar precautions to exclude the influence of potential confounding variables, such as GDP per capita, population size, and government policies. Pollution (PM10, PM2.5, and O3), air quality, and the national biodiversity index were shown to have significant regional and national connections with coronavirus epidemics. These connections provide valuable data for directing national environmental and health policy as a different strategy for dealing with future waves of COVID-19 and averting catastrophes. Bashir et al. (2020) did a study in New York City, USA, and found a significant correlation between average temperature, lowest temperature, air quality, and the spread of the COVID-19 pandemic. Temperature and precipitation weren't the only environmental parameters highlighted; humidity and air quality were also highlighted. For instance, New York City's continuously moist environment contributed to the rapid spread of the COVID-19 virus (Sajadi et al., 2020). Bashir et al. (2020) argue that supporting environmentally friendly legislation is essential since clean air helps stop the development of diseases like COVID-19.

# METHDOLOGY

In this report, I analysed the data sets Covid-19Activity and Price History from two different data sources called <https://data.ct.gov/> and from <https://www.kaggle.com/>.

the data sets consist of the tables Date, % Change, C Vol, Change, Cumulative Return % (Gross, Unhedged), High, Low, Open Price, Total Return (Gross, Unhedged).

I gathered the relevant information in Excel, cleaned it up according to the need of the project that I aimed to do, and then imported it into Tableau tool making inner connections with tables like S&P, Unemployment, GDP.

# ANALYSIS

A picture containing chart

Description automatically generated

* The data analysis reveals that the Top 10 Countries that have been affected by the Covid name are the United States of America, Brazil, India, Russia, the United Kingdom, Italy, France, Germany, Turkey, and South Korea; however, the United States of America has the highest death count with approximately 0.99 million people.

Map-Positve


* The map displays the total number of people with new positive cases.
* Count in the details of countries such as Russia, France, Turkey, Japan, and a great many more countries that are shown on this map.
* The big blue dot on the top left is USA with the highest number of people positive new cases count 81.2M and followed by 43.1M with INDIA.

A map of the world

Description automatically generated with medium confidence

* This map displays the range of mortality rates in the nations between 0.14 million and 0.99 million people.
* Russia, Indonesia, France, and a few more are among the countries that fall inside this range, which has a total of 277 members.
* It also shows highest number of positive cases is with USA (the red dot on the top left) with cases 0.99M and followed by Brazil with 0.66M.

Application

Description automatically generated with low confidence

* This Results statics table displays the number of people who are positive about new cases in each country.
* The marks are labelled by the sum of the number of people who are positive about new cases in the Top 10 Countries, which reveals that the United States is at the very top of the list with 81.2M and followed by India 43.1M.

Chart, line chart

Description automatically generated

* The line graph depicts an upward trend in the overall number of people who have passed away over the course of the most recent three months.
* According to these findings, the number of deaths that will occur during the second quarter of the year 2022 will be no more than 1.04 million.

Chart

Description automatically generated

* The dashboard is created based on the positive cases, deaths, death by country, The graph and statistical analysis show that there were 513,000,000 confirmed cases that were reported in the year 2020.
* Of those, there were 6.23,000,000 deaths that occurred in the top countries, with the United States of America coming in first place.

**Chart, histogram

Description automatically generated**

* Due to its position as number one on the list of countries studied, the United States of America is analysed further in this graph, which shows the COVID-19 cases in the United States starting in January.
* The graph also shows that the number of cases reached its highest point on January 1, 2021 and will continue to rise in the months that follow until its effects become visible in March 2022.

**Chart, line chart

Description automatically generated**

* This graph depicts the effect that has been having on unemployment; more specifically, it demonstrates that beginning on January 1, 2020, there will be an increase in the rate of unemployment, which will continue to rise until January 20, 2021, and then begin to fall again beginning in 2022.
* This graph also demonstrates that beginning on January 1, 2020, there will be an increase in the rate of unemployment.

**Graphical user interface, application

Description automatically generated**

* This graph illustrates the global trend of COVID-19, which shows that the first phase of COVID Panic Mode will begin in 2022 Q1 with a difference of -4.56% from 2020 Q1 levels.
* It requires a difference in the first quarter of 2020 that falls between -4.56% and 5.21%, and there must be at least one show in the second quarter of 2022.

**Chart, line chart

Description automatically generated**

* This graph demonstrates that the trend is a moving average of people who are optimistic about the number of new cases counted from the previous seven to zero along the table and price for report data.
* Additionally, the orange colour demonstrates that the moving average of people who are optimistic about new cases from January 1, 2020, to April 1, 2022, along with the report date and the price.
* The blue colour demonstrates the moving average of people positive new cases count from the previous 7 to the next 0 along table across.

**Chart, line chart

Description automatically generated**

* The fluctuating patterns of the Moving Average of People Positive New Cases Count along Table (Across) and Unrated for Report Date from the Previous 30 to the Next 0.
* The colour offers information on the Moving Average of People with Positive New Cases Count as well as the Unrated from the previous 30 to the following 0 along the table (across). The observation date and year for the of Unrated is written on each of the markers.
* The information is filtered in accordance with the abbreviated name of the nation, which continues to preserve the United States.

**Chart, line chart

Description automatically generated**

* It shows that GDP QUARTLEY % Changes with Covid 19 Cases the rising trend of the overall number of people who test positive for the virus throughout the most recent quarter.
* The colour indicates the total percent of difference. The total of the percentage difference is used to designate the marks.
* The information was filtered based on the country's short name, which preserved the United States. The analysis is based on the Report Date Quarter, which covers the period from 2019Q1 to 2022Q2 inclusive.

**Chart, histogram

Description automatically generated**

* This graph shows the moving cases in all states of US Trends in the Moving Average of People with New Positive Case Counts and Moving Average of People with New Positive Case Counts for Report Date.
* Colour provides more information about the Province/State Name for the Moving Average/People/Positive New Cases metric.
* Blue provides information about California, sky blue- New York, Green provides information about Texas, orange provides information about Florida, red provides information about Illinois.

**Map

Description automatically generated**

* This visualisation shows all United States affected area due to Covid -19

# CONCLUSION

In this Report, I conducted an analysis of the data set pertaining to the effects of Covid-19 on Multiple Facets and present our findings the Confirmed cases are 513.0M and Deaths was 6.23M. It has been determined that Covid-19 did not have any effects on any of the countries that were investigated; however, the United States of America did have the most significant impacts of any of the countries that were examined in this study. According to the analysis of the collected data, the United States of America, Brazil, India, Russia, the United Kingdom, Italy, France, Germany, Turkey, and South Korea are among the Top 10 Countries that have been affected by the Covid name. Other countries on the list include Turkey and South Korea. Despite this, the United States of America has the highest death count, with approximately 0.99 million people having lost their lives because of the disease. Other countries have also been affected.

# REFERNCES

Donthu, N. and Gustafsson, A. (2020). Effects of COVID-19 on Business and Research. *Journal of Business Research*, 117(1), pp.284–289. doi:https://doi.org/10.1016/j.jbusres.2020.06.008.

‌

Crocetto, F., Buonerba, L., Scafuri, L., Caputo, V., Barone, B., Sciarra, A., Verde, A., Calogero, A., Buonerba, C. and Lorenzo, G.D. (2022). COVID-19 and prostate cancer: a complex scenario with multiple facets. *Future Science OA*, 8(1). doi:10.2144/fsoa-2021-0113.

‌

Harper, L., Kalfa, N., Beckers, G.M.A., Kaefer, M., Nieuwhof-Leppink, A.J., Fossum, M., Herbst, K.W. and Bagli, D. (2020). The impact of COVID-19 on research. *Journal of Pediatric Urology*, [online] 16(5), pp.715–716. doi:10.1016/j.jpurol.2020.07.002.

‌

Singh, S., Roy, D., Sinha, K., Parveen, S., Sharma, G. and Joshi, G. (2020). Impact of COVID-19 and Lockdown on Mental Health of Children and Adolescents: A Narrative Review with Recommendations. *Psychiatry Research*, [online] 293(113429). doi:10.1016/j.psychres.2020.113429.

‌

Hasegawa, Y. and Lau, S.-K. (2022). A qualitative and quantitative synthesis of the impacts of COVID-19 on soundscapes: A systematic review and meta-analysis. *Science of The Total Environment*, [online] 844, p.157223. doi:10.1016/j.scitotenv.2022.157223.

‌

González, L.-M., Devís-Devís, J., Pellicer-Chenoll, M., Pans, M., Pardo-Ibañez, A., García-Massó, X., Peset, F., Garzón-Farinós, F. and Pérez-Samaniego, V. (2021). The Impact of COVID-19 on Sport in Twitter: A Quantitative and Qualitative Content Analysis. *International Journal of Environmental Research and Public Health*, 18(9), p.4554. doi:10.3390/ijerph18094554.

‌

Meyer, J., McDowell, C., Lansing, J., Brower, C., Smith, L., Tully, M. and Herring, M. (2020). Changes in Physical Activity and Sedentary Behavior in Response to COVID-19 and Their Associations with Mental Health in 3052 US Adults. *International Journal of Environmental Research and Public Health*, [online] 17(18), p.6469. doi:10.3390/ijerph17186469.

‌

Ahmed, M.Z., Ahmed, O., Aibao, Z., Hanbin, S., Siyu, L. and Ahmad, A. (2020). Epidemic of COVID-19 in China and associated Psychological Problems. *Asian Journal of Psychiatry*, 51, p.102092. doi:10.1016/j.ajp.2020.102092.

‌

Piccarozzi, M., Silvestri, C. and Morganti, P. (2021). COVID-19 in Management Studies: A Systematic Literature Review. *Sustainability*, 13(7), p.3791. doi:10.3390/su13073791.

‌

Alam, L., Alam, M., Kazmi, S.K.H. and Kazmi, S.A.H. (2021). Impact of COVID-19 pandemic on the residency programs of the country: A multicentre study. *Pakistan Journal of Medical Sciences*, 37(2). doi:10.12669/pjms.37.2.3496.