



World Covid Analysis



STAT614-002

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Introduction

- We decided to do a regression analysis on COVID related data.
- Initially we were looking in to the local Montgomery COVID data on the government website, which was in the large part already analysed through tableau.
- Then we decided to find more data related to the bigger scope.
- We really wanted to focus on how multiple countries are fairing with COVID and what factors might contribute to better fight this and possible future pandemics.

Data

- We found a good dataset which is constantly updated through github.

Link: <https://github.com/owid/covid-19-data/tree/master/public/data>

- The main variables such as total death and vaccination are updated weekly from a credible sources: John Hopkins and CSSC, ECDC.
- The data is very vast and has missing values in form of NA.
- The NA values are due to the nature of using multiple global health care organizations to compile one data frame.
- Therefore we decided to clean the data first then take a random sample for data analysis and hypothesis testing.

Metrics to measure

Confirmed cases

Confirmed deaths

Tests and Positivity

Vaccination

Hospital and ICU

Policy response

Other variables of Interest

Tidying the Data.

- We used R studio to clear out as much NA values as possible.
- Then we decided to randomly select 30 samples.
- The samples were selected based on the country column.
- We did that in order to search for causation variables and make analysis based on total death as the response variable and to find out why some countries had harder time with COVID pandemic than the others.
- The R studio was an excellent tool to use for a quick data cleaning, multiple linear model analysis and visualization.

Hypothesis

- Developing countries had harder time controlling the COVID pandemic than the developed countries.
- This hypothesis focused on GDP as the main independent variable and total deaths due to covid as the response variable.

Analysis Results.

Residuals:

Min	1Q	Median	3Q	Max
-641.38	-342.33	-89.45	284.22	951.69

Coefficients:

	Estimate	Std. Error
(Intercept)	6.357e+02	6.828e+02
X30samples\$total_vaccinations	4.336e-06	2.418e-06
X30samples\$gdp_per_capita	-4.809e-03	8.232e-03
X30samples\$extreme_poverty	3.018e+02	1.197e+02
X30samples\$smoker_total	1.285e+01	6.382e+00
X30samples\$population_density	1.811e-01	3.607e-01
X30samples\$diabetes_prevalence	-4.986e+01	3.663e+01

	t value	Pr(> t)
(Intercept)	0.931	0.3615
X30samples\$total_vaccinations	1.793	0.0861 .
X30samples\$gdp_per_capita	-0.584	0.5647
X30samples\$extreme_poverty	2.520	0.0191 *
X30samples\$smoker_total	2.014	0.0559 .
X30samples\$population_density	0.502	0.6204
X30samples\$diabetes_prevalence	-1.361	0.1867

Signif. codes:

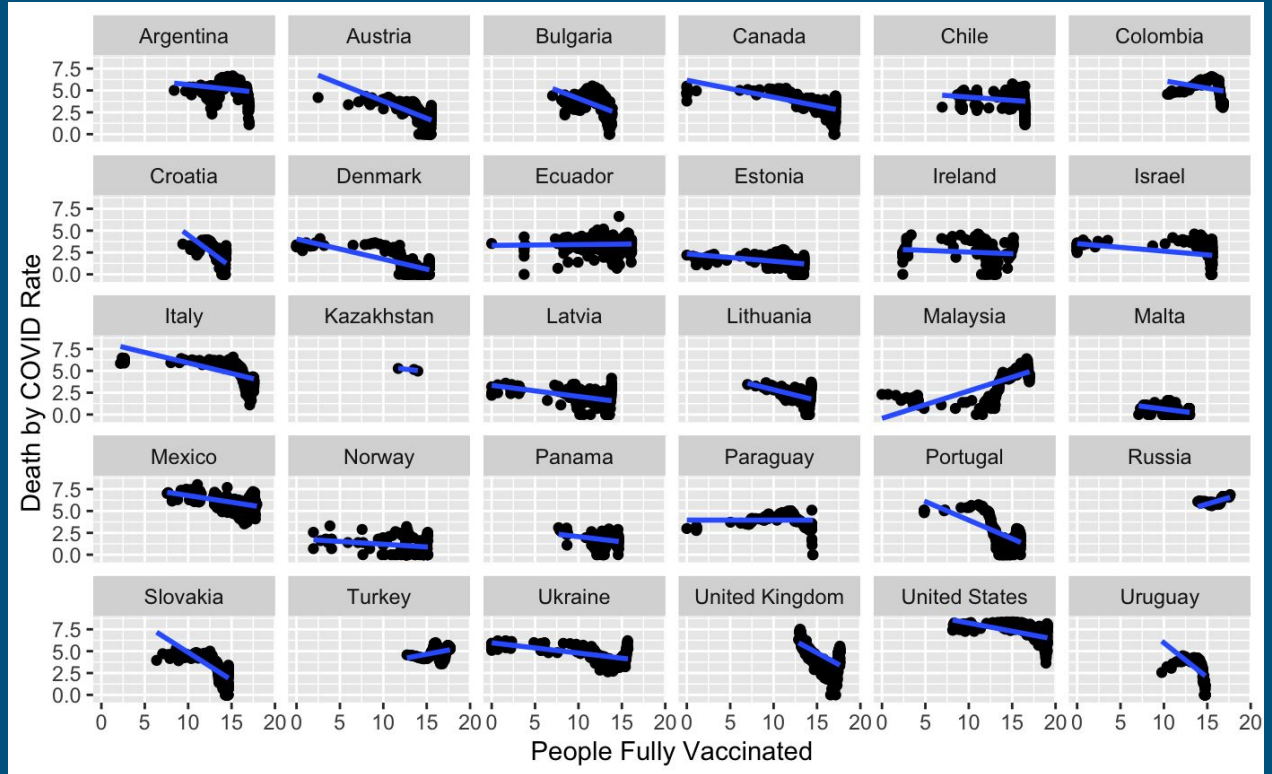
0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1

Residual standard error: 500.3 on 23 degrees of freedom

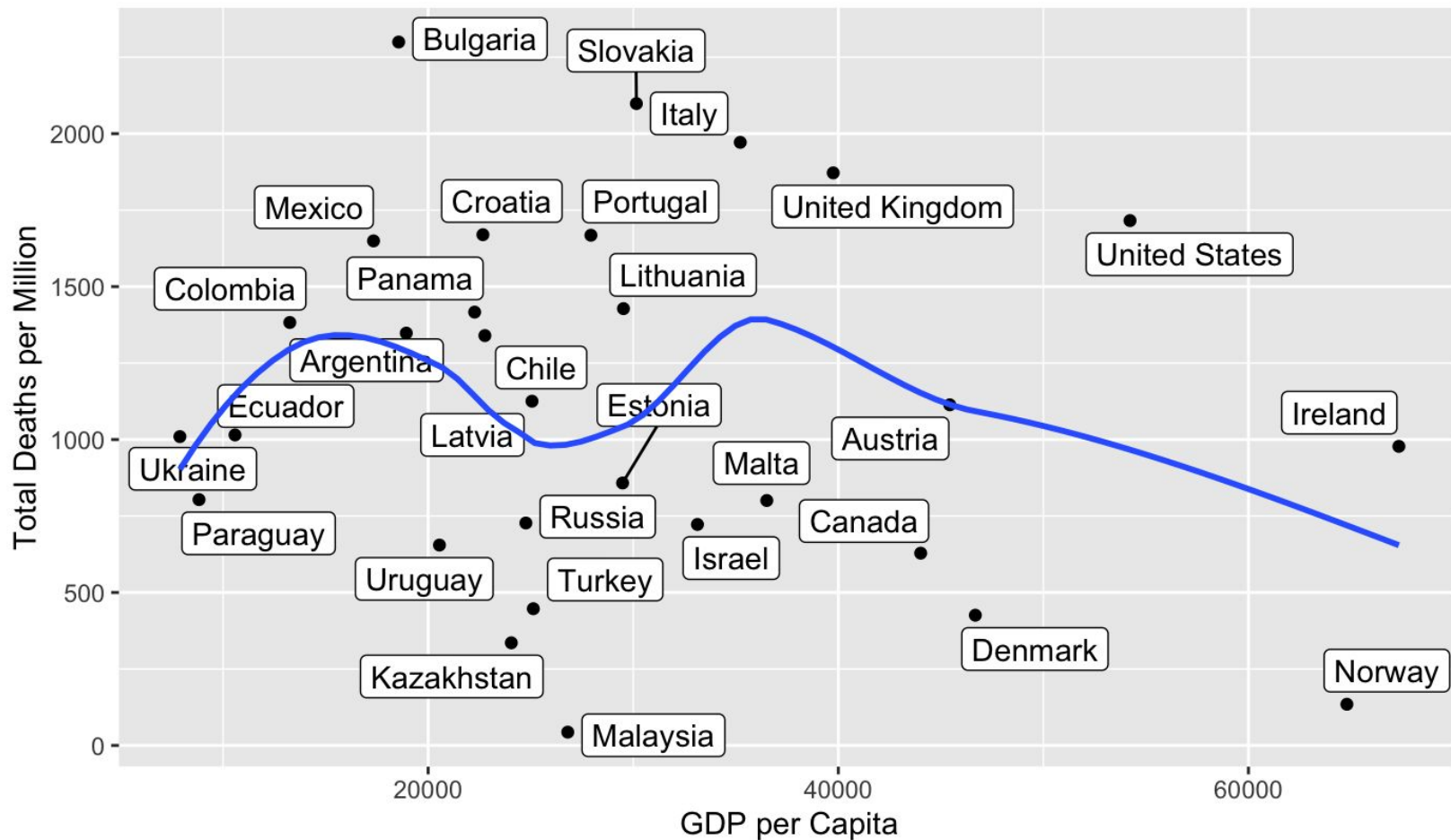
Multiple R-squared: 0.4239, Adjusted R-squared: 0.2736

F-statistic: 2.82 on 6 and 23 DF, p-value: 0.03311

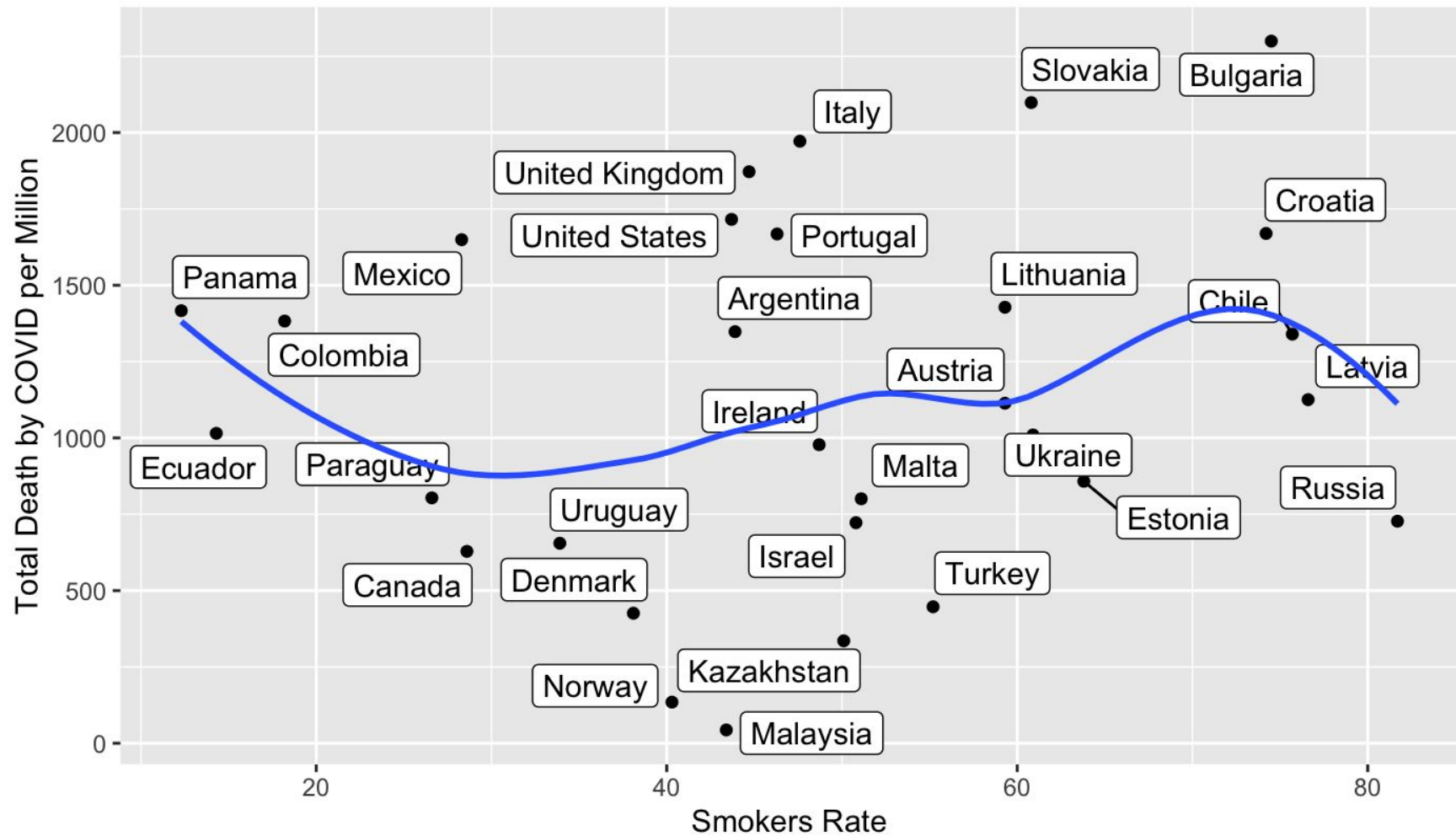
Data Visualization.



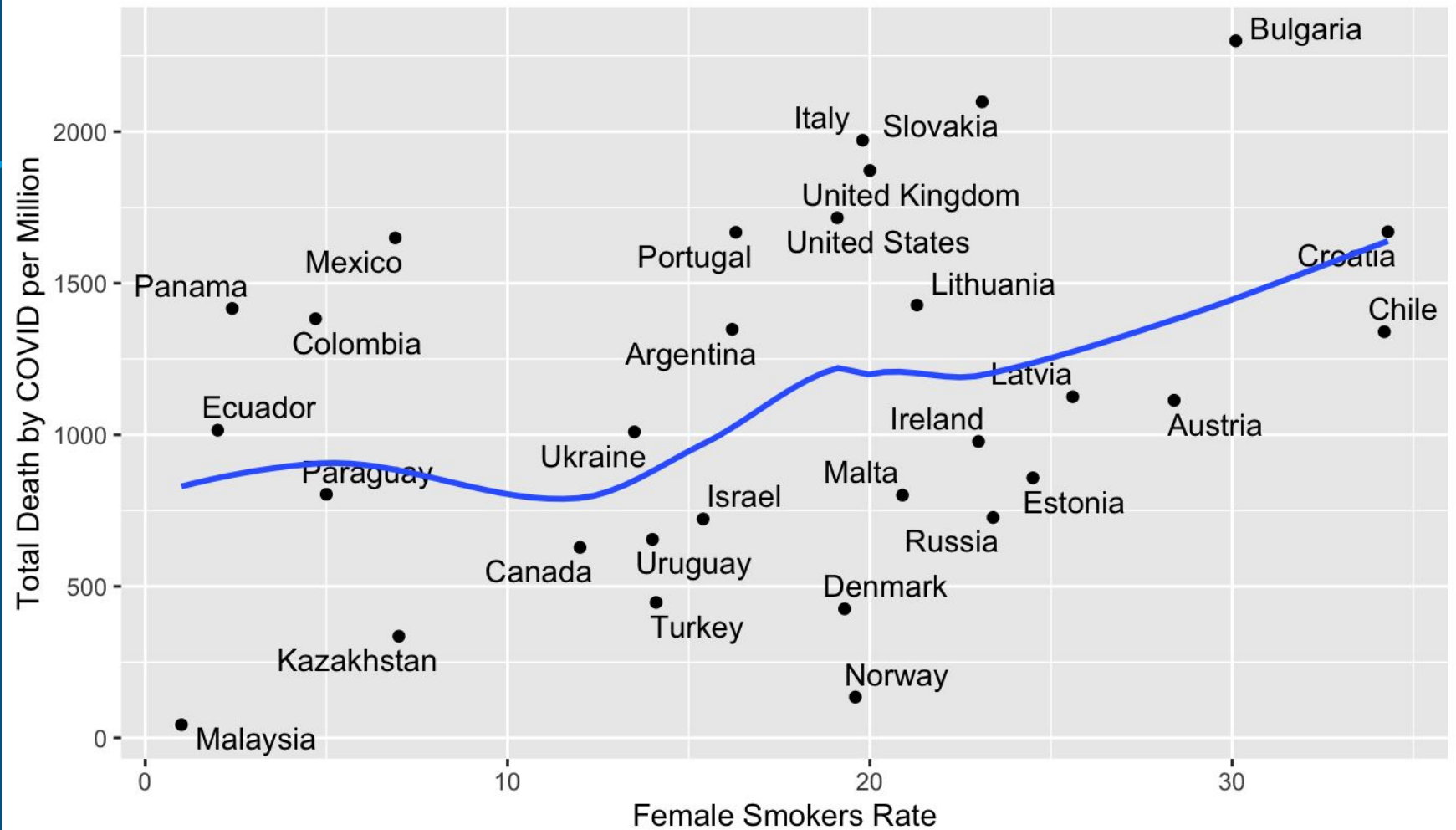
Death Numbers by COVID19 vs GDP per Capita



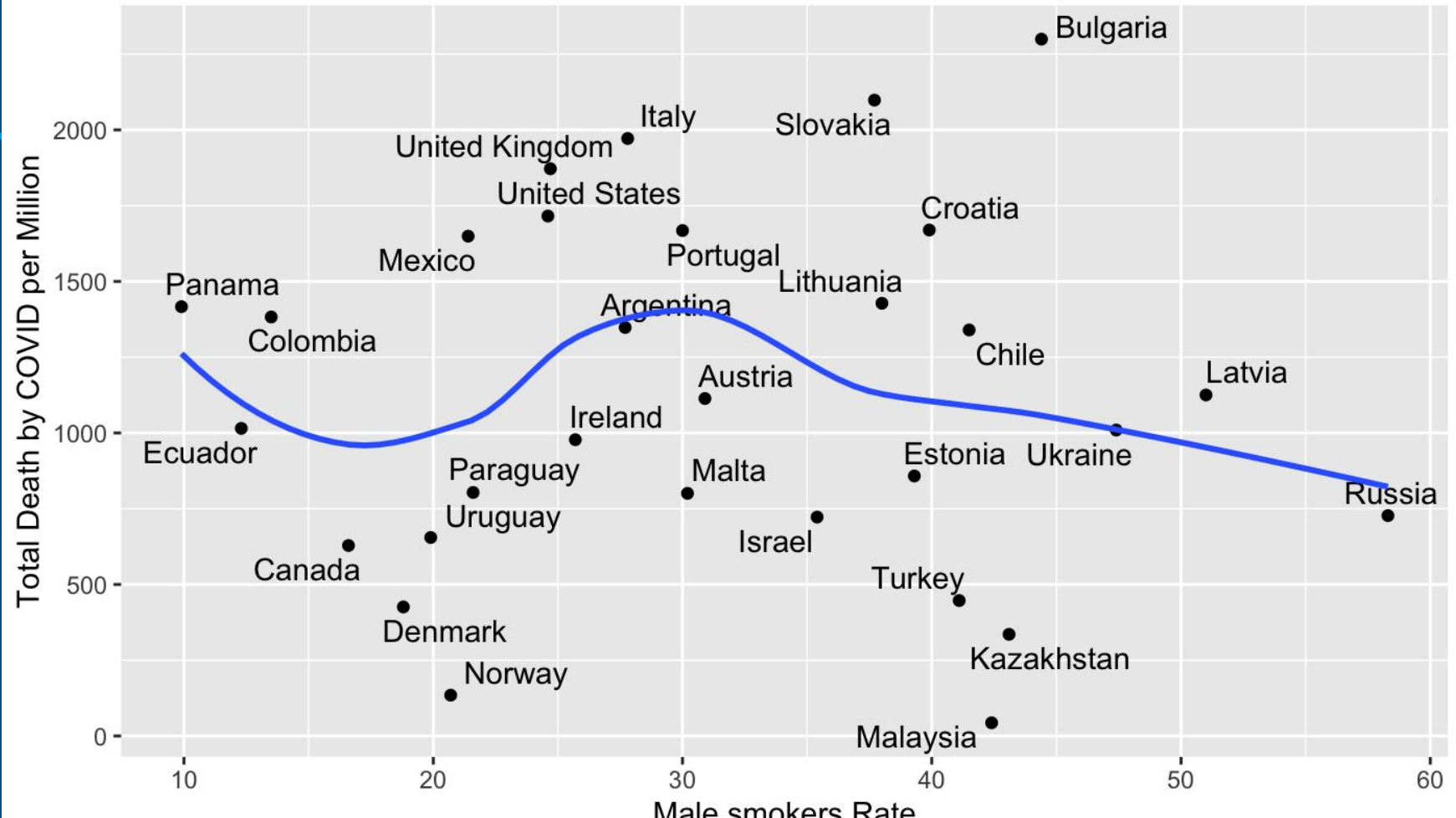
Death Numbers by COVID19 vs Smoker Population



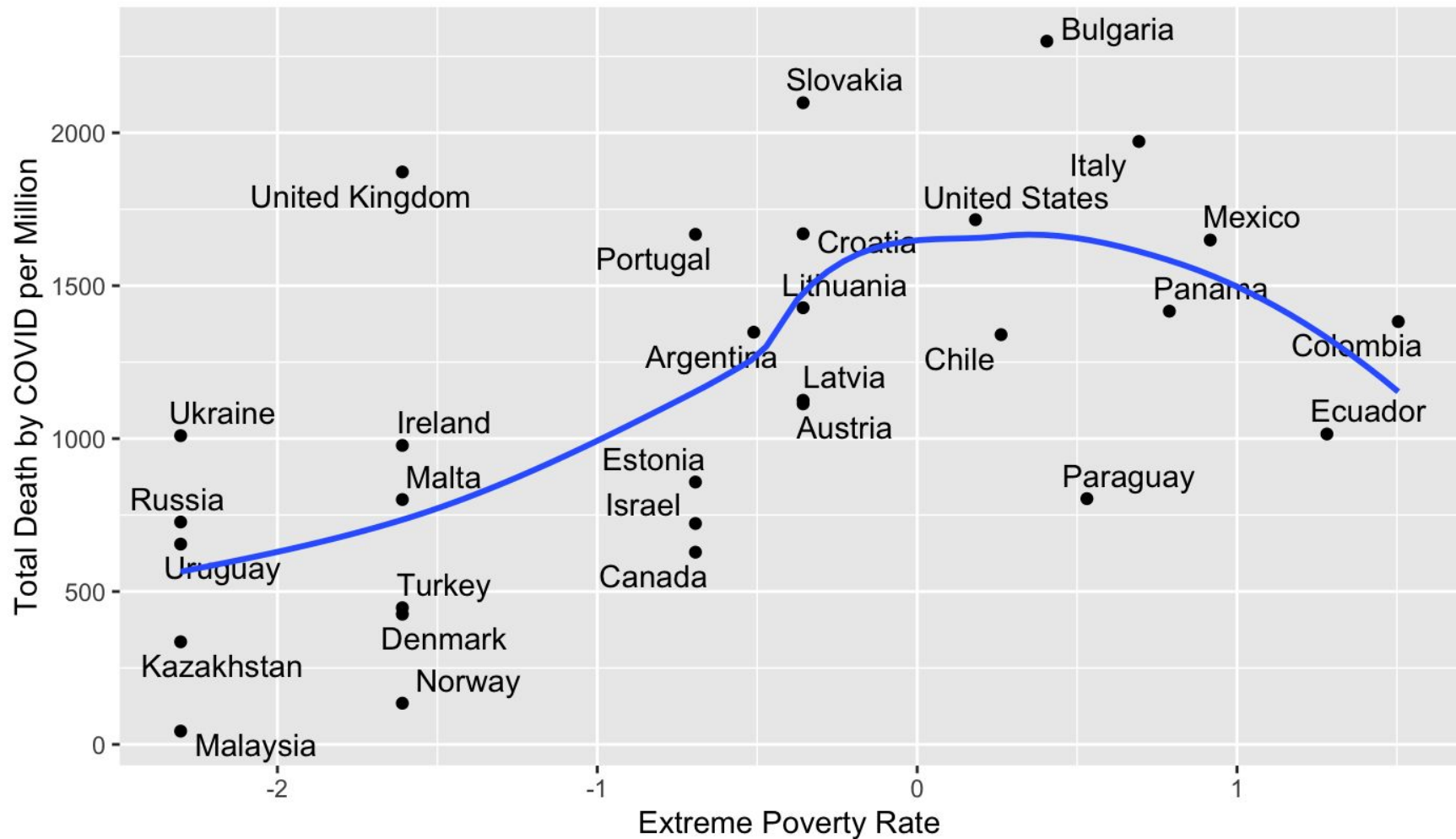
Death Numbers by COVID19 vs Female Smokers



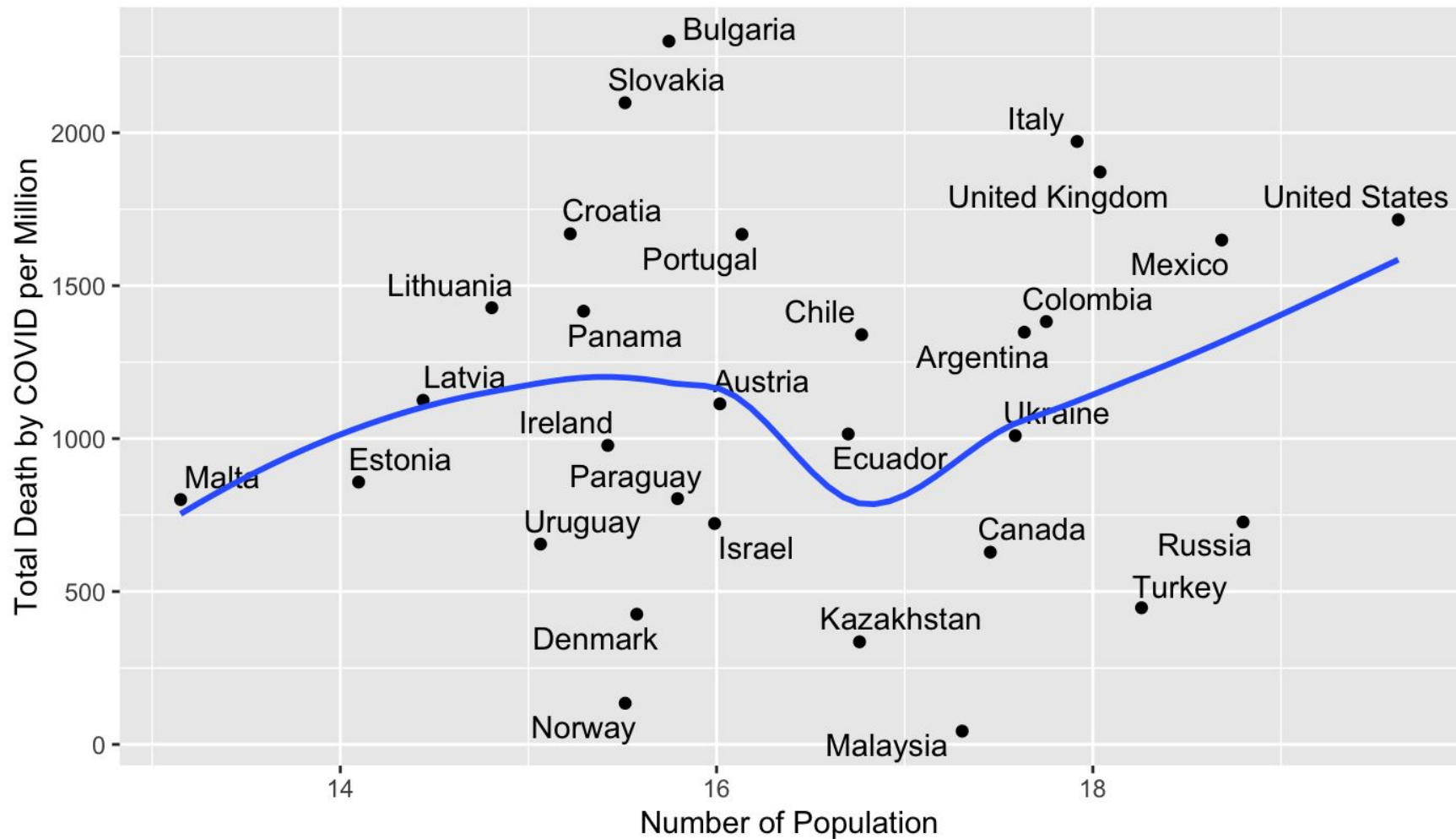
Death Numbers by COVID19 vs Male Smokers



Death Numbers by COVID19 vs Extreme Poverty



Death Numbers by COVID19 vs Population



Conclusion
