

Modeling Covid-19 in UK

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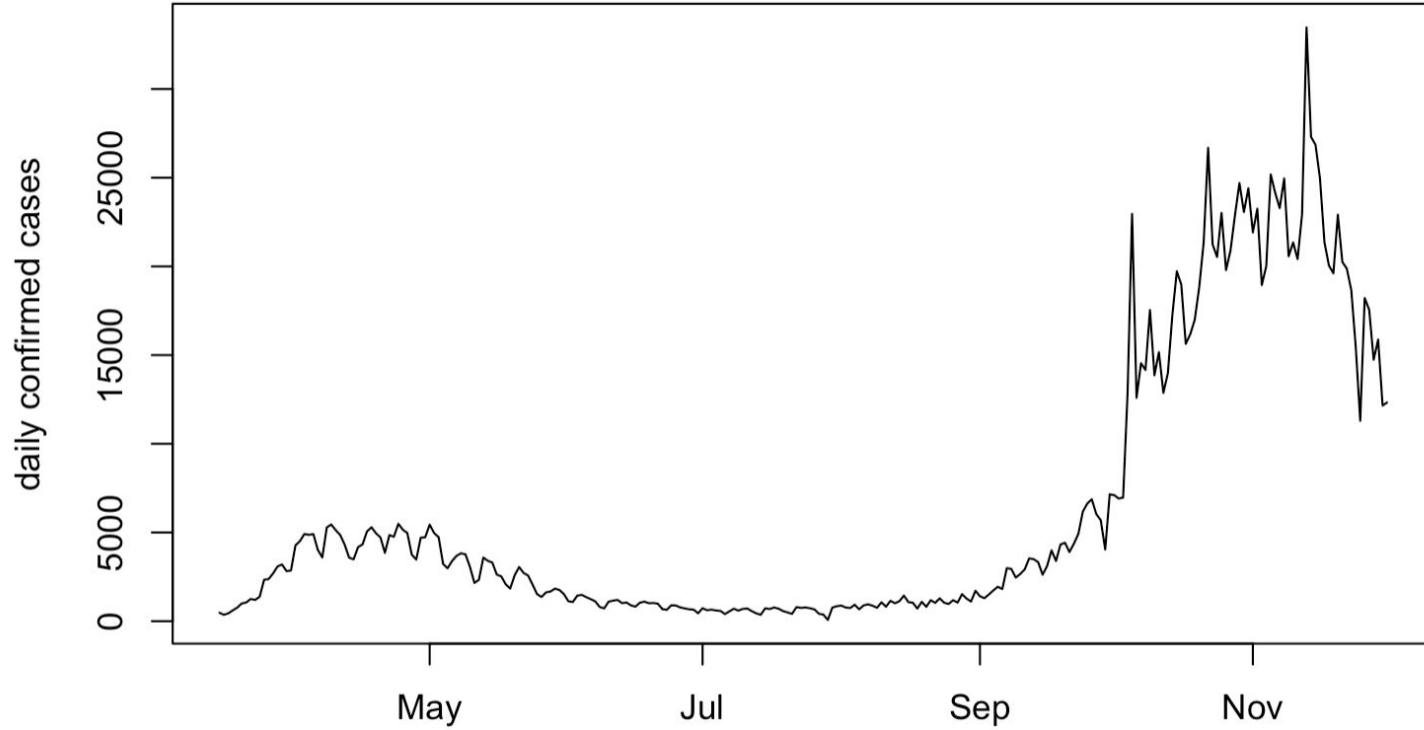
Project Objective

Covid 19 has been disrupting human health as well healthcare all over the world, and we can expect it to continue affecting us next year.

Objectives:

- Find potential leading indicators
- Make inferences on UK Covid data
- How to predict hotspots

UK Daily Confirmed Cases



* Source: ECDC. Consistent with *OurWorld Data*.

Leading Indicators - Mobility

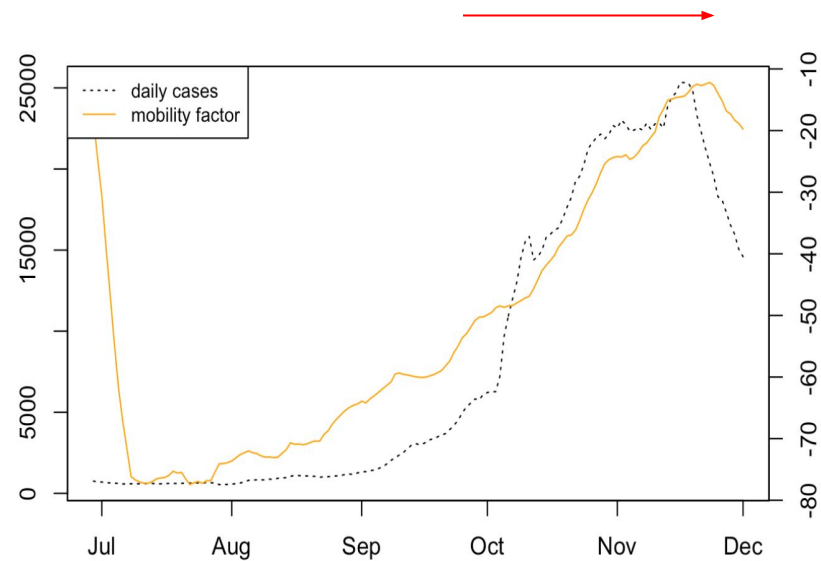
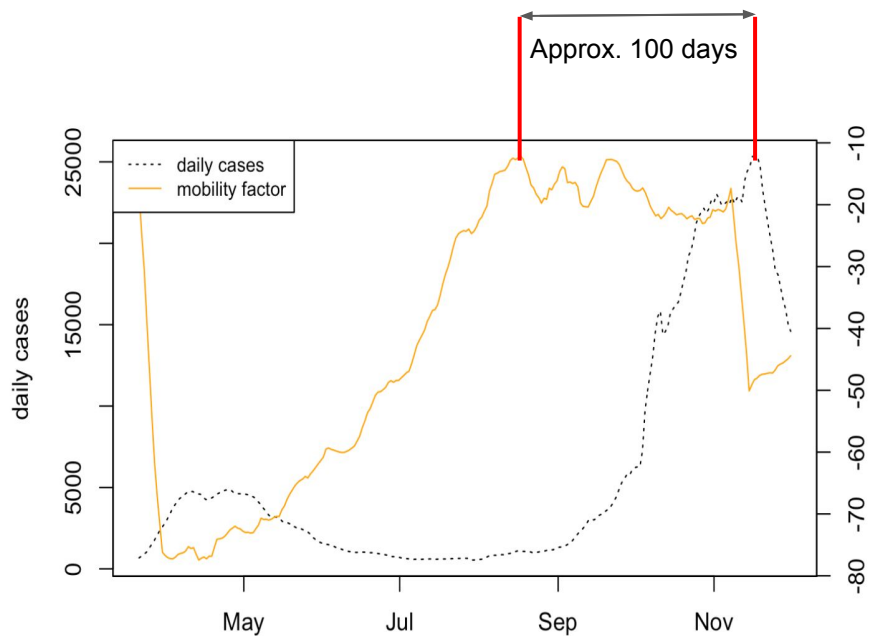
Leading Indicators - Mobility

Report mobility patterns, i.e. movement trends (% change from pre-covid baseline) over time by geography, across different categories of places such as:

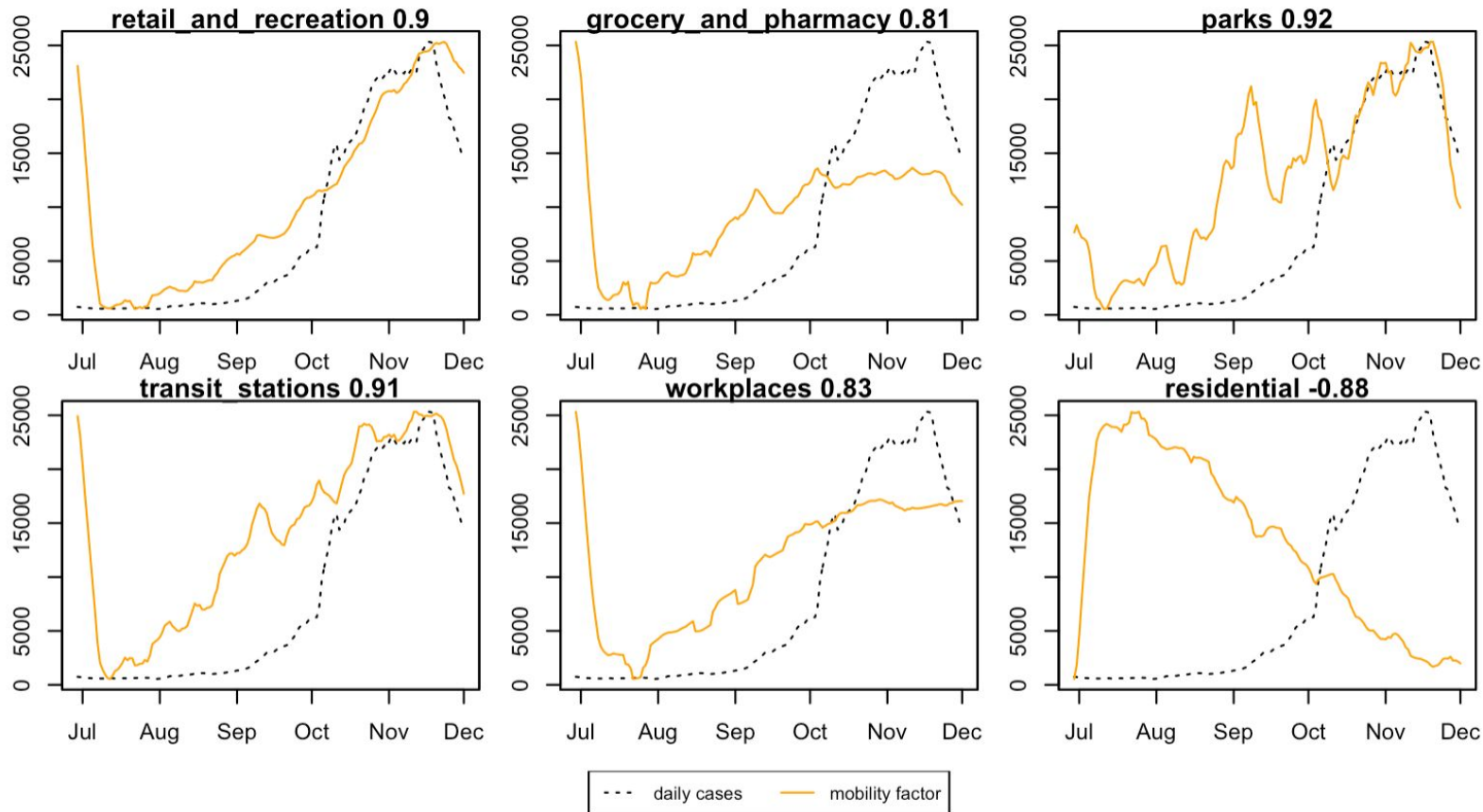
- retail and recreation,
- groceries and pharmacies,
- parks,
- transit stations,
- workplaces, and
- residential.

Using MA7 (Moving Averages) to account for any recording delays over the week.

	Optimal Lag <int>	Spearman Cross-Correlation <dbl>
retail_and_recreation	100	0.8959089



Correlation between mobility and daily cases



*Mobility data from Google Cloud BigQuery. Covid data from ECDC.

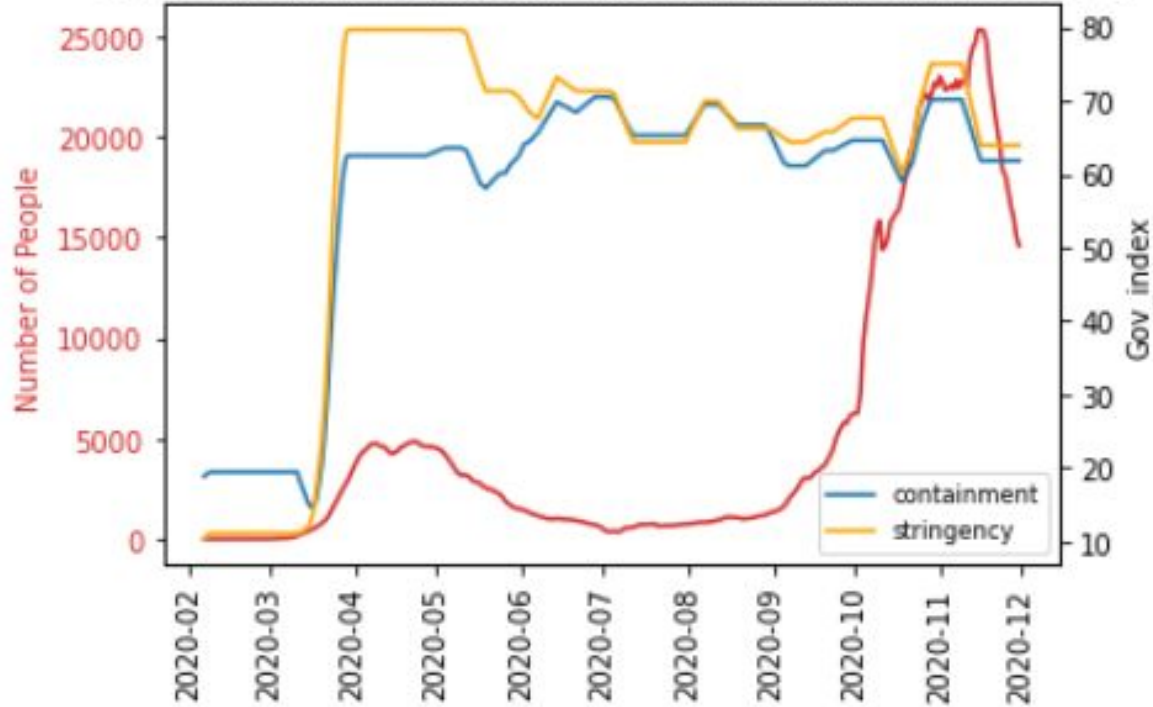
Leading Indicators - Gov. Policy Index

Leading Indicators - Gov. Policy Index

ID	Name	Type	Targeted/ General?
Containment and closure			
C1	School closing	Ordinal	Geographic
C2	Workplace closing	Ordinal	Geographic
C3	Cancel public events	Ordinal	Geographic
C4	Restrictions on gathering size	Ordinal	Geographic
C5	Close public transport	Ordinal	Geographic
C6	Stay at home requirements	Ordinal	Geographic
C7	Restrictions on internal movement	Ordinal	Geographic
C8	Restrictions on international travel	Ordinal	No
Economic response			
E1	income support	Ordinal	Sectoral
E2	debt/contract relief for households	Ordinal	No
E3	fiscal measures	Numeric	No
E4	giving international support	Numeric	No
Health systems			
H1	Public information campaign	Ordinal	Geographic
H2	Testing policy	Ordinal	No
H3	Contact tracing	Ordinal	No
H4	Emergency investment in healthcare	Numeric	No
H5	Investment in Covid-19 vaccines	Numeric	No
H6	Facial coverings	Ordinal	Yes
Miscellaneous			
M1	Other responses	Text	No

Index Name	C1	C2	C3	C4	C5	C6	C7	C8	E1	E2	H1	H2	H3	H6
Government Response Index	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Containment and Health Index	x	x	x	x	x	x	x	x			x	x	x	x
Stringency Index	x	x	x	x	x	x	x	x			x			
Economic Support Index									x	x				

Cases vs. contain/stringency Index with 7-day MA(1/31-11/30)



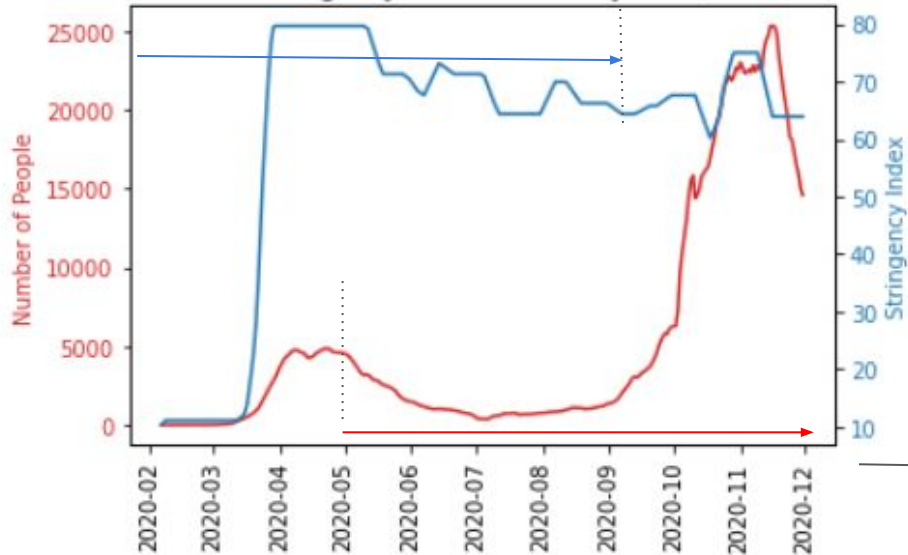
Stringency = C1~C8 + H1
 Containment = Stringency +
 H2+H3+H6

Potential Lag effect:

Overall decreasing trend in indexes (June - Oct.) ---> increase in daily cases (Aug. - Nov.)

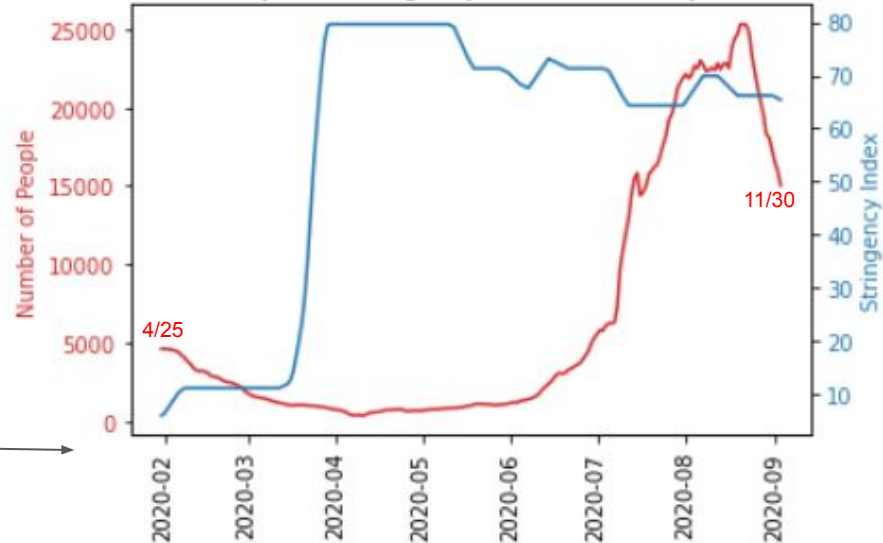
Overall increasing trend in indexes (Oct. - Nov.) ---> decrease in daily cases (Nov - now)

Cases vs. Stringency Index with 7-day MA(1/31-11/30)



0-lag correlation: 0.45

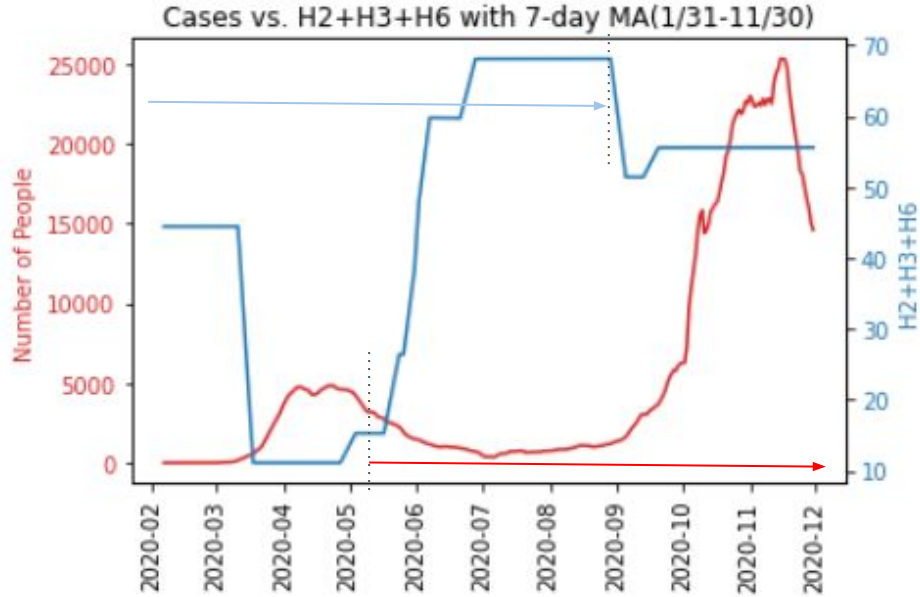
Cases after 87 days vs. Stringency Index with 7-day MA(1/31-11/30)



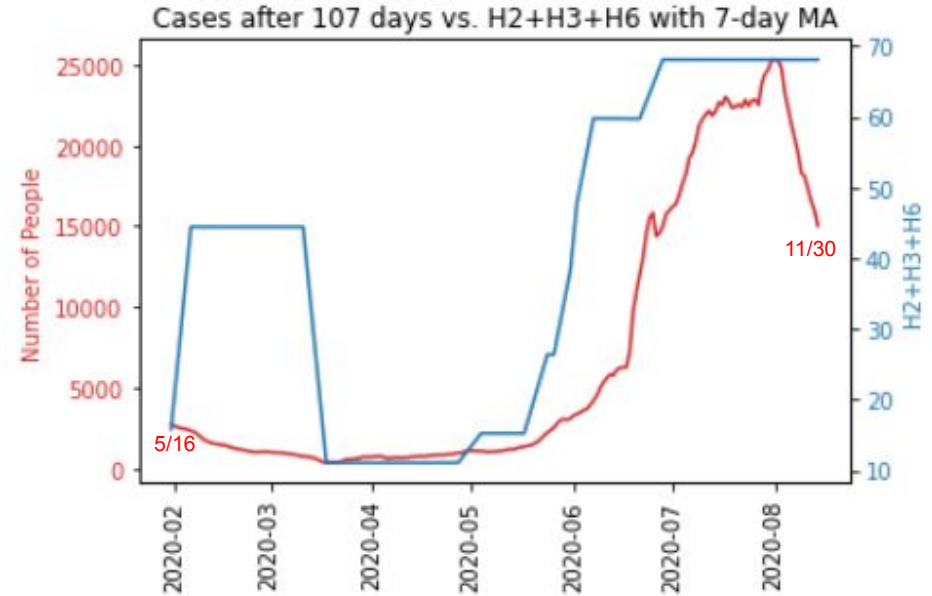
best lag: 87
window: 7
spearman corr: 0.613081328509765

Observation: cases after 87 days are corresponding better to the changes (reversely) in stringency index now.

H2: testing policy
H3: contact tracing
H6: facial coverings



0-lag Correlation: -0.18



best lag: 107
window: 7
spearman corr: -0.8727348723480409

Combined Leading Indicators

Gov. policy indicator

Workplace closing

Transit closing

Stay at home requirement

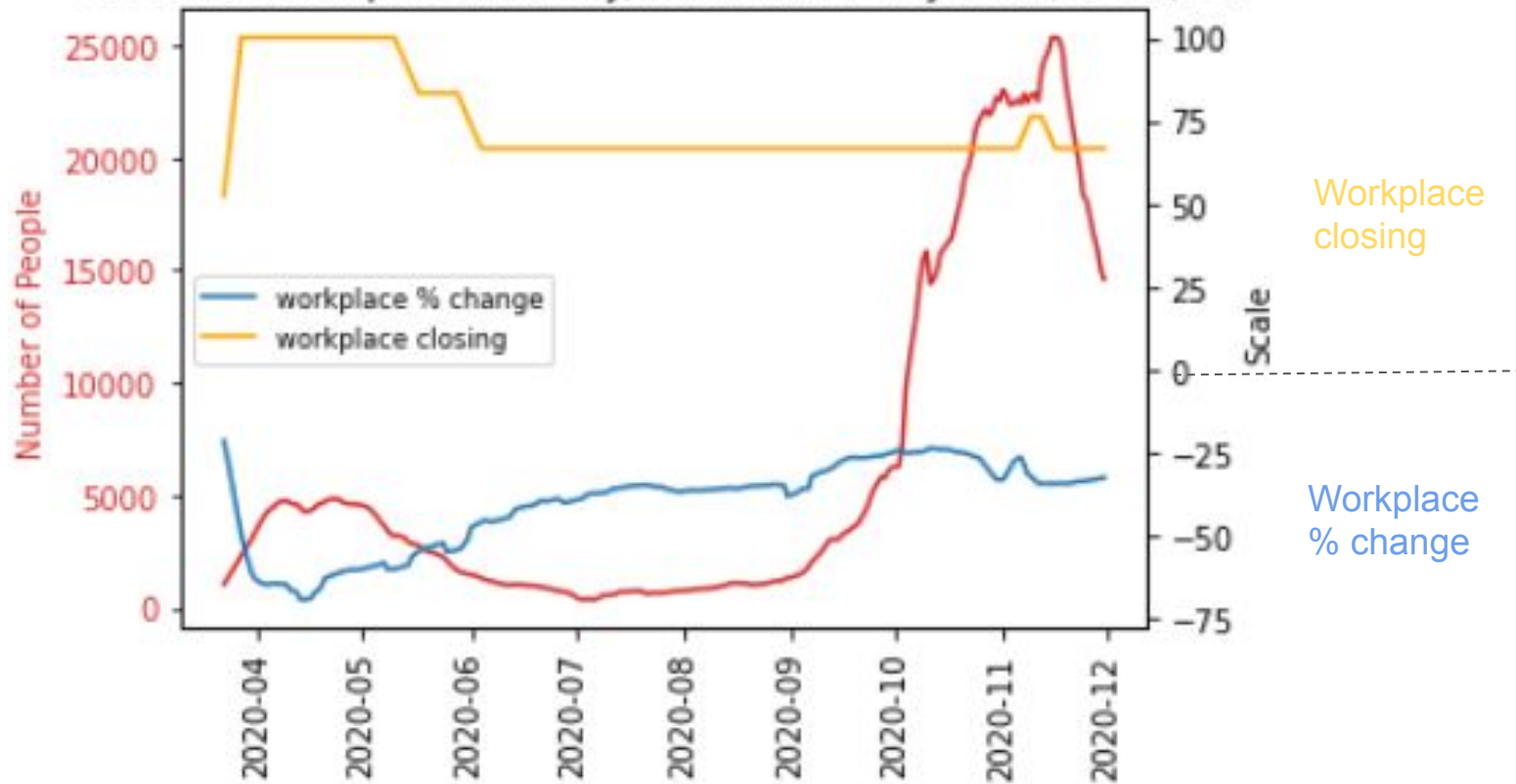
Mobility

workplace % change

transit stations % change

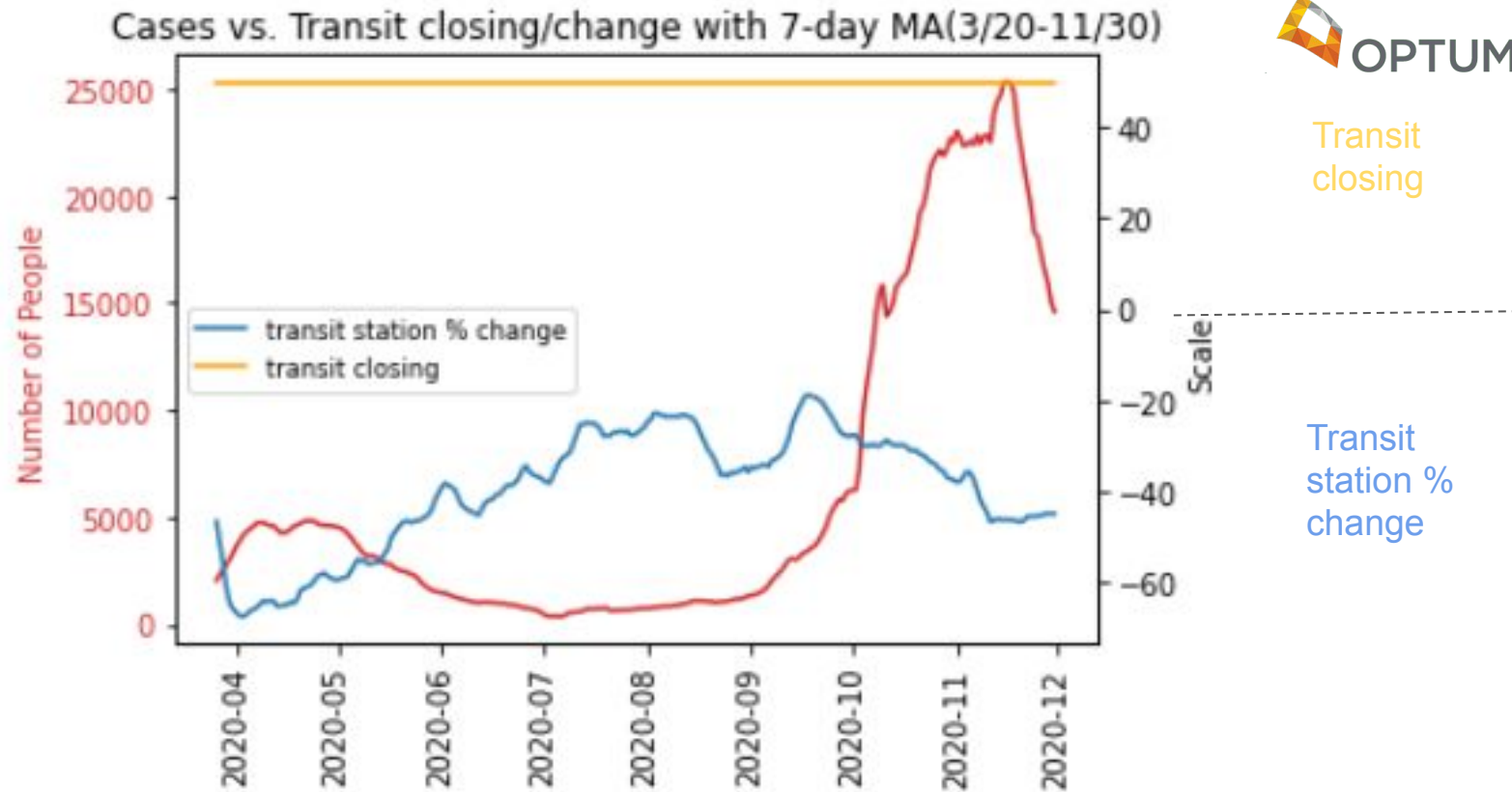
residential % change

Cases vs. Workplace mobility/index with 7-day MA(3/16-11/30)



Correlation between workplace_closing and workplace % change: -0.6731738805662277

Correlation between workplace_closing and workplace % change (MA=7): -0.7357487707371038

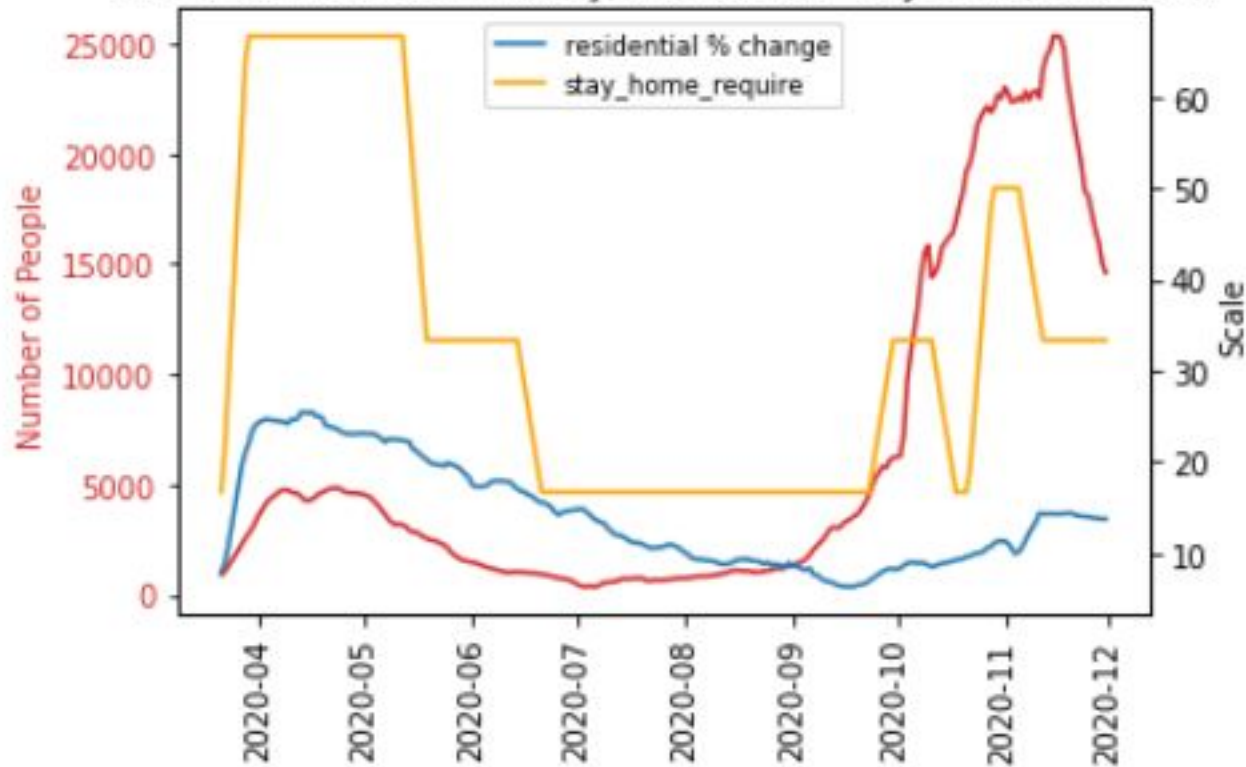


This is due to transit_closing index (C5) remains unchanged during the period

Correlation between transit_closing and transit stations % change: nan

Correlation between transit_closing and transit stations % change (MA=7): nan

Cases vs. Resident mobility/index with 7-day MA(3/15-11/30)



Correlation between stay_home_requirement and residential % change: 0.5994838285111471
Correlation between stay_home_requirement and residential % change (MA=7): 0.7319404429433023

ARIMA

ARIMA model

What is it?

- We can use trends in the past to predict Covid cases in the future

ARIMA = Auto Regressive Integrated Moving Average

- **Auto Regressive** - Fitting a regression based on several previous timesteps
- **Integrated** - Accounts for data not being stationary (constant mean and variance)
- **Moving Average** - Forecasting based on errors from previous time step predictions

Train/test

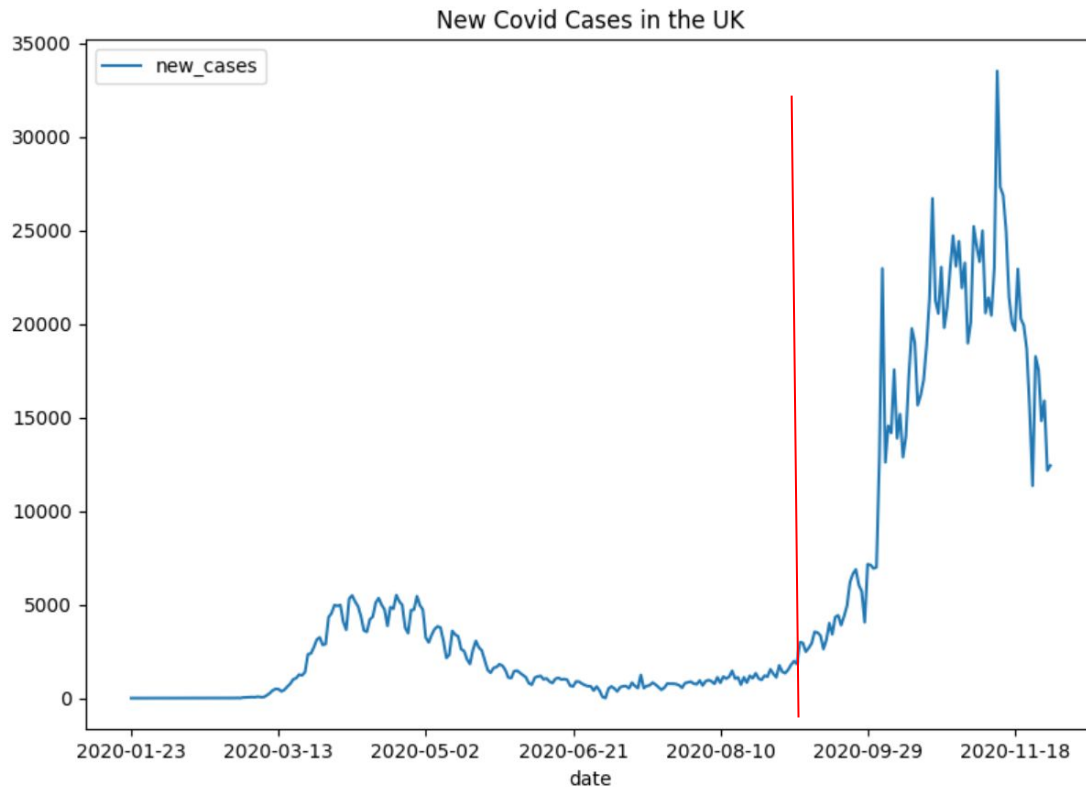
Train: 75%: 1/23 - 9/12

Test: 25%: 9/13 - 11/30

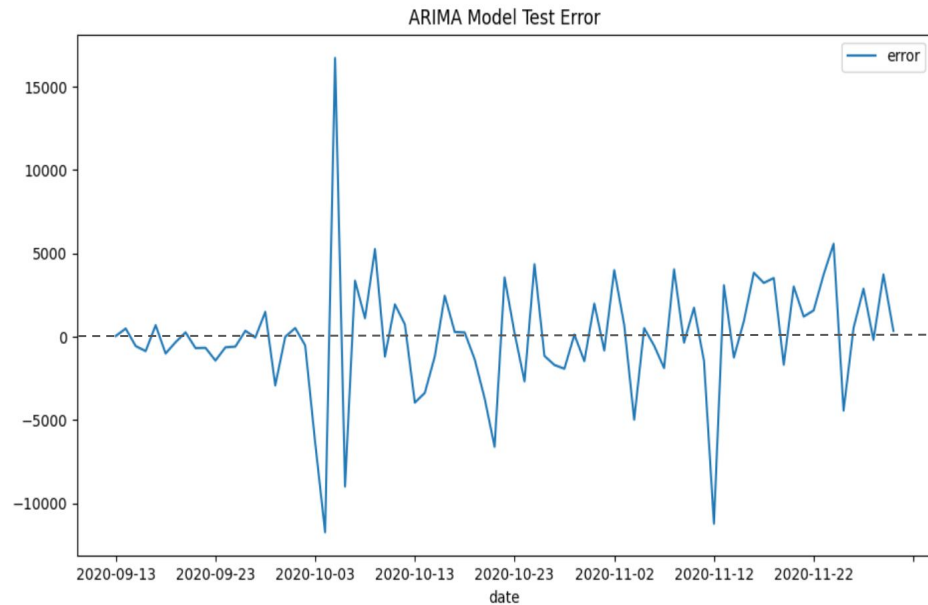
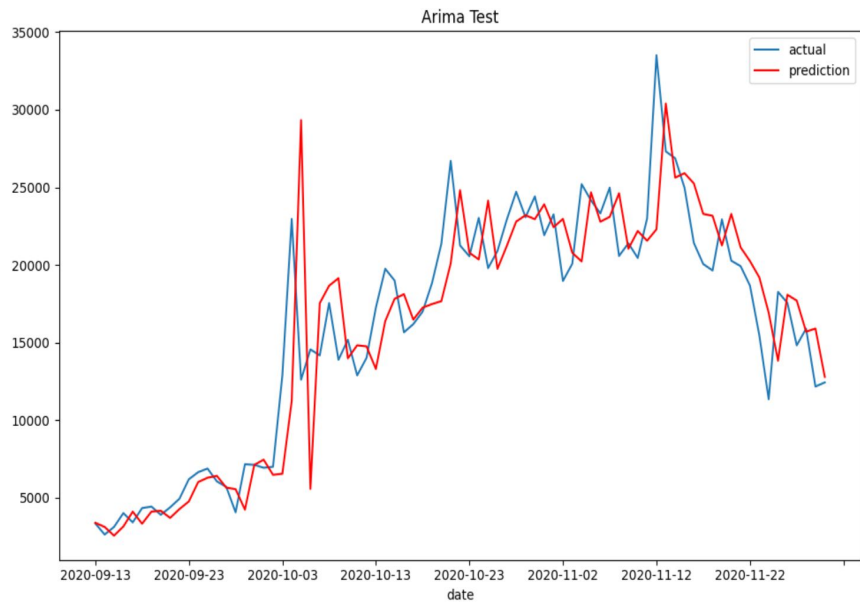
P (auto regressive) = 6

D (integrated) = 1

Q (MA window) = 6



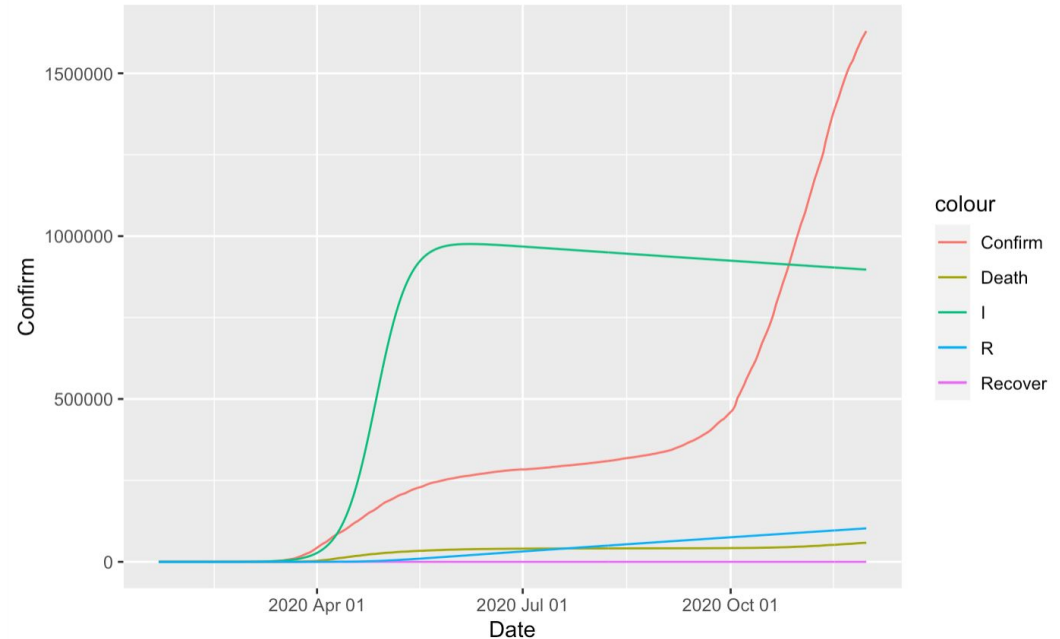
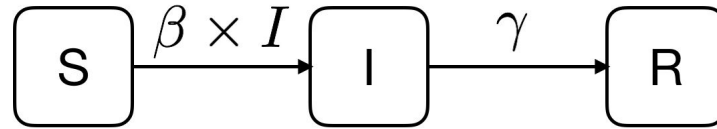
Model Results



SIR and More

SIR Model

- Modelling vs Data Mining
- JHU Novel Covid Data: include confirm, death, recover data in country level
 - Fit parameters beta and gamma to minimize RMSE
 - Poor fit due to no recover data for UK after April 13th
 - Model Assumptions not hold: close country
- Next step:
 - Adjust the model
 - Data mining approach: Bi-LSTM



Future Improvements and Acknowledgements:

- Leading indicators: Mobility and Government Indexes (using MA7) are highly correlated with daily cases after accounting for a lag.
- ARIMA: Perform well in fitting the data.
- SIR: More complete data, and model adjustments are needed to improve performance.
- Other Models: Currently doing research, may try it in the future.

We cannot express enough thanks to the Optum Team and CMU faculties for their continued support and encouragement regarding this project: Danita Kiser, Paul Nielsen and Professor Rebecca. The completion of this project could not have been accomplished without the support of them.

Thank You!
Any Questions?