

## Formulier Informatieverzoek Coronadata

Project Coronadata, datum 13 oktober 20

Nummer

INFORMATIEVERZOEK -  
VRAAG GESTUURDE

[TERUG NAAR STATUSOVERZICHT](#)

ONDERDEEL:
REFERENTIENUMMER:
ONTVANGSTDATUM:
NAAM:
ORGANISATIE:
FUNCTIE/ROL:
E-MAILADRES:
TELEFOONNUMMER:
HOOFDVRAAG:
DEELVRAAG 1:
DEELVRAAG 2:

<p>CONTEXT:</p>
<p>RISICOANALYSE:</p>

ADVIES WERKGROEPEN
PRIORITEIT:
STATUS:

Time Travel

---

**ANTIEVERZOEK - VRAAG-GESTUURDE CORONADATA**


---

SOVERZICHT

<b>BESCHRIJVING:</b>
20211013-001
13th of october
5.1.2e
Delft University of Technology
5.1.2e
5.1.2e <a href="mailto:5.1.2e@tudelft.nl">@tudelft.nl</a>
06 5.1.2e
How can Machine-learning approaches help identify socio-spatial patterns in corona-related datasets (spread of corona virus, spread of impact of vaccination) over time by avoiding (pre-)selection? Which approaches are suitable and what kind of insights can they produce on socio-spatial patterns generated by the project help the medical community predict the spread of corona, COVID-19 and vaccination take timely and space-specific measures? For example: how does the fact of having an elevator (high-rise dense housing) influence the what measures can be taken to prevent/slow down the spread of the virus through temporary measures or architectural interventions?
What socio-spatial disparities and patterns can we identify on neighborhood/urban/regional scales when using the Machine-learning during the project on both social-spatial and to corona related datasets (spread of corona virus, spread of Covid-19 disease, impact cases of Germany and The Netherlands)?
How can we derive a transferable and scalable framework from the analysis of the socio-spatial datasets of corona-related data in the Netherlands for use in other countries or at different scales (note: a similar research did start in Germany by the HafenCity U operation with the Robert Koch Institute)?

**Background:**

-Existing research on corona-related data tends to focus on studies on individual health risk factors and their identification. (For other diseases such as pneumonia and influenza the influence of spatial and socio-economic factors were analyzed in addition to individual risk.)

-Existing research focuses on predetermined data (epidemiological and socio-economic).

**Aim:**

-This study focuses on analyzing the spread of the corona virus, the COVID-19 disease and the impact of vaccination at the scale of the neighborhood and the region.

-It uses Machine learning to display diverse non-pre-determined spatial, socio-cultural as well as COVID-19 related datasets in space to help overcome knowledge-related biases.

-It therewith aims to uncover less known or expected relationships between the socio-spatial and corona-related data. These findings can be used to inform prevention measures, to set up in-depth research on these findings etc.

**Methodology:**

-Using Machine learning to cross open access socio-spatial data (some hundred indicators) with corona-related data to identify demographic and cultural factors exploring how COVID-19 spreads, its development over time and what the implication for vaccination is. Existing research on corona-related data tends to focus on studies on individual health risk factors and their identification. This approach. It aims to investigate the relationship of a large collection of socio-spatial factors and different COVID-19 factors, like hospitalization, or vaccination rates. In contrast to traditional correlation-based approaches, we aim at predicting such COVID-19 factors that have already passed ("time travel") using supervised machine learning. A machine learning model trained for such an historic prediction task can uncover such relationships between the input data (social-spatial factors) and the labels (COVID-19 factors) in a novel way. With the use of explainable machine learning we can uncover such relationships for subsequent analysis.

-Using non-predetermined, multi-source and fine scale data sets to help reveal unexpected correlations between spatial forms, social factors, the spread of COVID-19 disease, the takeup of vaccination and their spread over time (complementing the results from the traditional methodology).

-Analyzing computer generated data to assess the relevance and meaning of the findings

**Goals:**

-Draw conclusions from large multisource datasets at diverse scales and administrative levels to understand health-related factors and spatial inequalities (e.g. density of inhabitants, commuting distance).

-Develop a transferrable and multi-scalar framework/methodology in which spatial factors (e.g. living close to a harbor, living in a skyscraper) are included in corona-related data analysis

-To support planners, decision-makers as well as civil society with evidence-based planning strategies to promote adaptive and livable neighborhoods.

Results will be available within 6 months for assessment by the medical community in an interpretation session hosted by the research team, inviting relevant stakeholders.

1) The research project relies on the availability of socio-spatial and temporal data at the scale of the neighborhood that can be cross-checked with other datasets: Most socio-spatial data is available open access. We also have access to corona-related data as long-term aggregates. The research team would like to use CBS microdata to be analyzed which was discussed with CBS

2) Patterns and relationships uncovered in a data-driven fashion using machine learning can potentially be not meaningful. Before conclusions are drawn from such results, they need to be externally verified with stakeholders.

3) As with most data-driven approaches, there is a risk to uncover also meaningless correlations. We will take this into account when analyzing data and will verify and validate any results discovered from Machine Learning based analysis.

4) The scale and granularity of data available to us might simply not be enough to uncover meaningful correlation between corona incidence and socio-spatial factors.

5) There might be many factors muddying the observable relationships between socio-cultural data and corona incidents: personal mobility, social distancing, the progressing vaccination campaign (which we try to include but which is still hard to model), etc. We would like to use temporally fine-grained Covid-19 related datasets for Netherlands and Zuid Holland, including specifically information on the (evolving) number of cases, hospitalization, intensive care, death, vaccination rate and further Covid-19 related datasets as for example preliminary datasets from the RIVM. These datasets can help to improve the precision and quality of our analysis. To best address our research questions, temporal (daily, weekly or monthly) and spatial (neighborhood, city, regional) scale levels are needed for the whole of the Netherlands and for South Holland in particular.

Communicatie werkgroep:

In later stadium

Vraagarticulatie werkgroep: Positief want

- o Relevant en mooi onderzoek.
- o Goed dat TU Delft een voorstel indient met mogelijkheden tot internationale vergelijking
- o Biedt mogelijkheden tot meer dan statische kaartjes: Bijv geografische patronen en daarmee levert het gegarandeerd nieuwe informatie name een interessante onderzoeksvraag voor een volgende pandemie
- o Suggestie om ook rioolwateronderzoek meenemen.
- o Hebben de onderzoekers beschikking over contactnetwerken?
  
- o Het heeft niet de hoogste urgentie heeft.

2

Intake informatieverzoek