INDO-PAK COMPARISON AND FORECASTING OF COVID-19 EPIDEMIC: A SECONDARY DATA ANALYSIS

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Abstract

Background: The world has historically faced and recovered from many pandemics. The most recent global pandemic that the whole world is facing is Novel Coronavirus – Covid-19. The objective of current study is to compare and forecast COVID-19 trends for Pakistan and India.

Methods: The data set for this research is obtained from the World Health Organization (WHO) online repository (https://covid19.who.int/). The time period we have considered since the first corona related case and death were observed in both countries. This research paper analyzes corona related cases and deaths in Pakistan and India till 28th February 2021, a total of 578,797 cases in Pakistan and 11,096,731 cases in India has been confirmed including 128,37 and 1,570,51 deaths respectively. The Auto-Regressive Integrated Moving Average (ARIMA) model is used to forecast the variables cumulative cases and deaths. It is simple to use and more predictive than any other regression model.

Results: Based on the current trend, the forecast graph reveals that the number of cumulative corona cases could reach 999,767 in Pakistan and 16,481,122 in India up to 31st December 2021.

Conclusion: This research found that corona related cumulative cases and deaths are on the rise in both countries. The pandemic situation in India is worse than in Pakistan nevertheless both countries are at high risk. There is a sudden increasing pattern in the number of corona related cases in both countries. Both governments must impose effective policies to control this pandemic.

Keywords: ARIMA modeling, COVID-19, forecasting

Introduction

The world has historically faced and recovered from many pandemics. The most recent global pandemic that the whole world is facing is Novel Coronavirus – Covid-19. The Virus has spread in almost every country at a rapid pace after initiating from China. (1) Although the virus has a low mortality rate, it is highly contagious due to which the response of the country dealing with the Covid-19 pandemic can be termed as a significant determinant of the consequences of this disease. (2) There are many articles for different countries around the world in regard to their responses to Covid-19. The current article has been aimed at sketching a comparison between the prevalent situation of Covid-19 in India and Pakistan which has resulted from their response to the pandemic.

Both the countries, India and Pakistan, can be regarded as being in the same phases of development.
and expenditure on healthcare with respect to their GDPs and they also have similar climatic condition. (3) India and Pakistan had their first cases within a month of each other as Pakistan had its first case on 26th February 2020 in Karachi whereas India got its first case on 30th January 2020 in Kerala. (3) Comparing the response of the two countries, it is known that India was quick to ban travels starting from early February and the country also issued the orders of a rapid lockdown in March for the purpose of containing the spread of Coronavirus. (4) In contrast, Pakistan responded slowly to the threat of Covid-19 as it’s Prime Minister Imran Khan did not see the virus as a potential life-endangering threat and addressed the country downplaying the danger of Covid-19 stating that only old age people are affected by it. (5) He also encouraged the people to return to their work and mentioned that most cases of the virus can be resolved through self-quarantine. Nevertheless, realizing the danger of the virus, a lockdown in Pakistan was imposed in late March.

Moving on, it can be observed that the fast response of India to the Covid-19 pandemic was significantly effective in containing the danger and destruction of the virus as in May, the reported cases of India were one-third and mortality was almost half than that of Pakistan. (6) If a comparison is drawn between the stimulus package of India and Pakistan, it can be noted that the stimulus of Pakistan was much larger than that of India in terms of GDP percentage as Pakistan offered a stimulus of 2.5% of GDP and India offered a stimulus of 0.8% of GDP. (7) However, the economic situation of Pakistan has been estimated to be more affected than that of India as according to IMF (8), the economy of Pakistan is estimated to contract by 1.5% whereas India’s economy is estimated to grow by 1.9% in the year 2020. Hence, it can be stated by comparing both the countries that India dealt with the Covid-19 pandemic in a quick and effective manner while Pakistan was slow in taking actions due to which India’s situation is comparatively that of Pakistan.

**Methodology**

**Data Collection Methodology**

The data set for this research is obtained from the World Health Organization (WHO) online repository (https://covid19.who.int/). The time period we have considered since the first corona related case and death were observed in both countries. The dataset for Pakistan covered the time period from 28th February to 28th February 2021 and for India 30th January to 28th February 2021.

The following table 1 provides the summary of corona infected cases and deaths in both countries up to 28th February 2021.

**Table 1. Summary of corona infected cases and deaths in both countries (Jan. 2020 – Feb. 2021)**

| Country | Max Cases on a single day | Max Deaths on a single day | Cumulative cases | Cumulative deaths |
|---------|--------------------------|---------------------------|-----------------|-----------------|
| Pakistan | 13,709 | 313 | 578,797 | 128,37 |
| India | 194,121 | 2,410 | 110,967,31 | 157,051 |

The highest number of individual cases (13,709) was recorded on Sunday, 14th June in Pakistan. The individual cases keep on declining after this date. In India, the highest number of individual cases (194,121) was recorded on Saturday, 12 September 2020 with an overall increasing trend. The highest number of individual deaths (313) per day was observed on Monday 21th November 2020 in Pakistan while 2,410 deaths were observed on Saturday 12 September 2020 in India. The above table 1 clearly reveals the fact that the number of cases and deaths in India keeps on high relative to Pakistan.

**ARIMA Model**

The R-package “Forecast” is used to forecast the number of corona infected cases and deaths in Pakistan and India. R is an open-source programming platform that is used for analysis and model development. (9, 10) The Auto-Regressive integrated moving average (ARIMA) model, available in the package, is run on our dataset. The analysis and results are given in the next sections. The ARIMA model is the mixture of autoregressive and moving average processes and is specified by three parameters \(p, d, q\); where ‘p’ represents the order for an autoregressive part, ‘d’ represents the degree of integrated order difference I(d), and ‘q’ represents the order for Moving average part.

The ARIMA model is represented by the following linear equation:

\[
Y_t = \delta + \alpha_1 y_{t-1} + \alpha_2 y_{t-2} + \ldots + \alpha_p y_{t-p} + \beta_1 e_{t-1} + \beta_2 e_{t-2} + \ldots + \beta_q e_{t-q} + e_t (1)
\]
The above equation is assumed to be a non-seasonal time series model. See (11, 12) for seasonal components and other details about ARIMA modelling.

**Model Estimation and Analysis**

In this study, four separate ARIMA models are run for countries Pakistan and India. Two is for the number of corona infected cumulative cases and two for the number of corona related cumulative deaths. Figure 1 below is the graph of confirmed cumulative corona cases in Pakistan and India for the period January 2020 to February 2021.

![Cumulative Cases Graph](image)

*Figure 1. Number of corona infected cumulative cases in Pakistan and India*

The above Fig. 1 represents the graph of cumulative corona infected cases in both countries. The corona infected cases are growing faster in India than Pakistan as clearly seen in the above figure. The same pattern is observed in the variable of death in both countries.

**Results**

The Forecast package in R is used to estimate the four ARIMA models for the number of corona related cumulative cases and deaths. Table 2 represents the best-fitted models based on minimum AIC and BIC criterion. Table 3 represents the estimates of accuracy parameters for the best-fitted models.

The 360 days forecast graph (1st March 2021 to 31st December 2021) of cumulative corona cases and death are given in Figure 2. The grey shaded area represents 80% confidence interval and white shaded area represents a 90% confidence interval in the figure. The forecast graph reveals that the number of cumulative corona cases could reach 999,767 in Pakistan and 16,481,122 in India up to 31st December 2021. The number of cumulative deaths could reach 25,849 in Pakistan and 192,017 in India. The forecasted values are given in the table 4 below.

**Table 2. Best ARIMA Model Estimates based on minimum AIC and BIC**

| Variable   | Model       | AR(1) | MA(1) | MA(2) | MA(3) | MA(4) | AIC  | BIC  |
|------------|-------------|-------|-------|-------|-------|-------|------|------|
| Cases (Pak.) | ARIMA (2,2)  | 0.7770(0.0975) | -1.9828(0.1146) | 1.3074(0.1730) | -0.2527(0.0857) | 6292.39 | 6311.92 |
| Deaths (Pak.) | ARIMA (2,2)  | 0.4703(0.2279) | -1.5075(0.1986) | 0.6161(0.1614) | -0.2527(0.0857) | 2549.48 | 2564.85 |
| Cases (India) | ARIMA (0,2,2) | -2.317.954 | 19688.18 | 1963.402 | 0.3903549 | 1.847057 | 0.3226218 | 0.3086722 | -0.1262017 |
| Deaths (India) | ARIMA (0,2,4) | -21.9967 | 2701603 | 197.716 | 0.3364716 | 1.762018 | 0.3086722 | -0.1262017 |
### Table 1: Number of COVID-19 cases and deaths in Pakistan and India

| Date       | Cases (Pakistan) | Deaths (Pakistan) | Cases (India) | Deaths (India) |
|------------|------------------|-------------------|--------------|----------------|
| 31-May-21  | 12,560,234       | 16,720            | 17,056,234   | 21,825         |
| 30-Jun-21  | 13,065,792       | 17,086,5          | 17,411,5     | 22,624         |
| 31-Jul-21  | 13,602,921       | 18,478,1          | 18,065,792   | 23,411,5       |
| 31-Aug-21  | 14,155,247       | 18,832,3          | 18,629,8     | 24,205,9       |
| 30-Sep-21  | 14,704,450       | 19,232,4          | 19,115,8     | 25,017,4       |
| 31-Oct-21  | 15,287,380       | 19,681,3          | 19,767,5     | 25,849,4       |
| 30-Nov-21  | 15,866,653       | 20,132,3          | 20,232,6     | 26,484,3       |
| 31-Dec-21  | 16,481,122       | 20,481,3          | 20,767,5     | 27,171,9       |

The standardized Q-Q plot and histograms for all models reflect normal curve distribution. The Ljung-Box test for all models indicates independence of residuals at 1% level of significance.

The accuracy of the forecast is assessed by the following formula:

**Accuracy = (100 – MAPE)%**

The best fitted models ARIMA(1,2,3), ARIMA(1,2,2), ARIMA(0,2,2) and ARIMA(0,2,4) have accuracy of 98.188%, 98.734%, 98.059%, and 98.237% respectively.

**Forecast Comparison Graph**

![Forecast graphs for the number of cumulative corona cases and deaths for Pakistan and India.](image)

**Discussion**

We used the WHO COVID-19 dataset for Pakistan and India. The purpose is to forecast the number of cumulative corona related cases and deaths in both countries. The AUTO ARIMA technique is used, which is available in the R package “forecast”. The forecast model ARIMA is simple to use and more predictive than other regression models. It is due to the fact that the ARIMA model only considers the past

### Conclusion

This research found that corona related cumulative cases and deaths are on the rise in both countries. The pandemic situation in India is worse than in Pakistan nevertheless both countries are at high risk. There is a sudden increasing pattern in the number of corona related cases in both countries. There are several effective policies that both governments could put in place, such as smart lockdowns, work from home,
subsidized pandemic-related products, or issuance of Corona relief funds.

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Ethical approval: Ethical approval for the analyses presented in this was not sought as the paper is based on de-identified data provided by World Health Organization for the purposes of secondary analysis research.

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