Constructing a Knowledge Graph from Open Statistical Data: The Case of Nova Scotia Disease Datasets

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Abstract

The majority of available datasets in open government data are statistical. They are widely published by different governments to be used by the public and data consumers. However, most datasets in open data portals are not provided in RDF format. Moreover, the datasets are isolated from one another while conceptually connected. Through this paper, a knowledge graph is constructed for the disease-related datasets of a Canadian government data portal, Nova Scotia Open Data. We transformed all the disease-related datasets to RDF according to the Semantic Web standards and enriched them by semantic rules and an external ontology. The ontology designed to develop the graph adheres to best practices and standards, allowing for expansion, modification and flexible re-use¹. The study also discusses the lessons learned during the cross-dimensional knowledge graph construction and integrating open statistical datasets from multiple sources.

Keywords

Open statistical data, Nova Scotia, Knowledge graph, Disease dataset

1. Introduction

The open government data movement has led to open data portals that provide a single point of access for a province or country. Open government data increases government transparency accountability, contributes to economic growth and improves administrative processes [1]. This data is published hoping that different organizations' data consumers can use it in the public and private sectors. A variety of published open datasets include multi-dimensional and statistical information such as census data, demographics, public health data (e.g., number of disease cases) [2, 3]. In itself, the data can be restrictive and not powerful enough to draw meaningful inferences. The datasets act as isolated pools of information that cannot be queried or linked. These sources are scattered in the government data portals, and users can access the information through specific searches in that data portal. The lack of meaning behind the open statistical data makes it impossible to form a network and link this kind of data to infer, create

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and query knowledge [4]. Interconnectivity between isolated datasets in open data gives a machine a lot of information to work with, thereby strengthening its ability to deduce relations and infer meaning. A knowledge graph can be constructed in this study to connect various isolated datasets in open government data, and meaningful information can be inferred and queried [5]. This study focuses on constructing a knowledge graph for Nova Scotia Open Data (NSOD) disease-related datasets, a Canadian regional Open Data portal. Overall, there are 11 provinces and territories in Canada with approximately 11,771 published datasets in different domains ranging from "Business and Economy" to "Health and Wellness" in various formats (e.g., CSV, JSON, and Excel) [5]. Most of these open datasets do not allow users to export data in RDF format and are isolated while conceptually linked. Hence, a human should manually analyze the datasets to answer questions like: "Which viral diseases had the most number of cases in a province in 2017?". This study intends to answer such questions using the Semantic Web technologies such as ontologies, RDF multi-dimensional models, deductive reasoning rules, and generate a knowledge graph with semantic relationships. We link the instances of the disease-related datasets (metadata, dimensions, measures, and attributes) semantically on a schema-level following the W3C vocabularies and enrich them with a disease ontology. After constructing the knowledge graph, a quality and refinement process is performed using a specific quality metric to measure the accuracy and precision of the created knowledge graph based on existing refinement standards [6, 7].

The structure of this paper is as follows: Section 2 explains the background and the related studies in publishing datasets, particularly in the domain of multi-dimensional data. Section 3 describes the existing NSOD dataset. Section 4 presents the designed data model, ontology, and transformation process. Transformation challenges will be presented in Section 5, followed by a conclusion.

2. Background

A multi-dimensional structure is defined for statistical data using dimensions and measures. The literature cites many examples of researchers and organizations implementing the RDF Data Cube vocabulary for statistical data [8], [9]. As an example, [10] describes the process of improving and enriching the quality of Barcelona's official open data platform employing multi-dimensional data, applying linked open data assessment process and using external repositories as a knowledge base. In another example, [11] described how the Czech Social Security Administration (CSSA) published their official pension statistics as linked open data (LOD). These LOD datasets were modelled using the Simple Knowledge Organization System (SKOS) vocabulary and the RDF Data Cube Vocabulary. The use of open statistical data in the medical industry, in health or medical reports has been used in the literature. An ontology in the health IT interventions domain, developed and published in the study [12], builds on existing health and medical ontologies. The study outlines an inductive-deductive approach to establish a glossary, define classes and instances, and finally publish the ontology as linked open data. The PubMed knowledge graph [13] is another study in this domain created from the PubMed library. The study outlines the extraction of over 29 million records from the library to generate a graph that links bio-entities, authors, funding, affiliations and articles. Subsequent data validation yielded promising results, and the graph can create and transfer knowledge, profile authors and organizations and realize meaningful links between bio-entities. The study covers familiar territory in terms of knowledge graph and generation compared to the work done in this research study. The use of Linked Data standards and patterns [14, 15] and strict adherence to well-established rules and protocols of the semantic Web prescribed by W3C ensure compatibility with past works as well.

3. Nova Scotia Open Data

Nova Scotia's government has an abundance of resources in terms of data and information, collected and stored on the Nova Scotia Open Data (NSOD) web portal 1 in the form of datasets. The main purpose of the NSOD portal is to allow individuals, particularly Nova Scotians, to efficiently access the information, understand their government, support their businesses, gain new insights, and make discoveries. The NSOD datasets are available through Socrata API². In this study, we retrieved the NSOD datasets using Socrata API using the Python³ programming language. We wrote a command-line tool to fetch the datasets and performed an exploratory analysis to understand the data. At the time of this research, there are 669 datasets in 28 categories, of which 77.8% are archived datasets, and 22.2% are currently active. The majority of the datasets were created between April 2016 and June 2016 and gradually updated each year. The majority of collected datasets were in the English language. Around 79.7% of the datasets have Nova Scotia province defined as their region, while 20.3% datasets have missing values in region metadata. The top categories of datasets are "Environment and Energy" (58), "Health and Wellness" (52), "Population and Demographics" (48), "Business and Industry" (37) and "Education" (32). Overall, we found 21 disease-related datasets in the "Health and Wellness" category by searching the NSOD web portal. Each NSOD dataset has a metadata section and an observation section that includes the statistical observations. Figure 1 shows the structure of disease-related datasets that had the same number of attributes in both metadata and observation sections. There were 13 observations in each dataset, including statistical information about disease cases in Nova Scotia between 2005 and 2017.

4. Methodology

A knowledge graph construction process can be performed based on the following steps: 1) Knowledge acquisition to collect semi-structured data from an API, 2) Knowledge extraction to extract entities and their relationships, 3) Knowledge fusaion: to construct an ontology, assigning entities and relationships and interlink entities to external ontologies and datasets, and 4) Knowledge storage to create knowledge graph in a triple store. To generate a knowledge graph for the disease datasets of NSOD, we follow the W3C standards to transform the ingested datasets to RDF using a data model, a custom ontology, a set of semantic rules, and an interlinking process. The following subsections describe the steps in detail.

¹https://data.novascotia.ca

²https://dev.socrata.com/

³https://www.python.org

Δ	About this Dataset									
About this Dataset										
	Detailed Metadata									
	Department	Health and W	Health and Wellness							
	Geographic Re	e Nova Scotia	Nova Scotia							
	Language		eng	eng						
	Frequency		Annually	Annually						
	Time Period Coverage		2005-01-01 t	2005-01-01 through 2017-12-31						
	Year	:	Disease :		Number o \downarrow 🚦	Rate per 10 :				
	2014		Clostridium diffi		609	64.9				
	2007		Mumps		2 595	63.7				
	2016		Methicillin Resist		570	60				
	2017 Methicillin		Methicillin Resist		522	54.7				
	2012		Clostridium diffi		501	52.8				
	2015		Hepatitis C		341	36.2				

Figure 1: A disease dataset in the NSOD web portal (1: metadata, 2:observations)

4.1. Data Model

An open government dataset includes statistical information corresponding to a defined structure. The data dictionary or metadata of each NSOD dataset consists of information about that dataset, such as name, publisher, publication date, category, department, etc. which can be transformed to RDF using VoiD[16], DCMI ⁴, DCAT ⁵, and RDFS vocabularies.

The observation of an NSOD dataset includes a collection of dimensions, measures and attributes. The dimension, measures, and attributes of a dataset comprise the observation structure and are thus apply stored in the Data Structure Definition (DSD). Figure 3 shows an example of observation in an NSOD dataset.

To model the multi-dimensional NSOD datasets, the RDF Data Cube vocabulary⁶ is used based on the W3C recommendation [17]. The RDF Cube allows publishers to integrate and slice across their datasets [18] and enables the representation of the statistical data in standard RDF format and publishes the data conforming to the principles of linked data [19].

4.2. Ontology

To the best of our knowledge, there were no existing ontologies to be re-used based on the nature of the NSOD dataset. However, we re-used a current data model for describing multidimensional data (RDF Cube vocabularies), an external disease ontology (DOID), and the best practice vocabularies such as SDMX to develop a custom ontology for disease-related datasets of NSOD. The datasets were coded as entities with distinct data structure definitions, slices and observations.

All the datasets in the ontology are all instances of class DataSet and the nomenclature used

⁴https://dublincore.org

⁵https://www.w3.org/TR/vocab-dcat-2/

⁶https://www.w3.org/TR/vocab-data-cube/



Figure 2: An example of observation in an open statistical dataset [5]



Figure 3: An example of observation in an open statistical dataset [5]

for datasets is *dataset-dataset_name*. Each dataset has one associated data structure definition (*DataStructureDefinition*), which defines the dataset's dimensions, measures, and attributes and is linked with *DataSet* by *structure* property. The dimensions, measures and attributes are linked with the data structure definition by properties *dimension*, *measure*, and *attribute* respectively. Also, class qb:*Slice* and *ObservationGroup* are used to group observations by one or more dimensions. Each slice is linked to the data structure definition using *sliceKey* property. The observations are attached to a dataset by the *observation* property and the respective slices by the *observationGroup* property. Figure ?? illustrates a sample observation based on the defined ontology.

Table 1Re-used vocabularies

Vocabulary	Prefix/Usage
PDF Cube	http://purl.org/linked-data/cube#
KDI Cube	Multi-dimensional, observations
Dublin Coro	http://purl.org/dc/terms/
Dubini Core	Metadata of datasets
	http://purl.obolibrary.org/obo/doid#
DOID	The disease ontology
CooNomos	http://www.geonames.org/ontology#
Geomaines	Geographical information
SDMY	http://purl.org/linked-data/sdmx/2009/code#
SDMA	Dimensions and measures
SW/DI	http://swrl.stanford.edu/ontologies/3.3/swrla.owl#
3 WILL	Semantic rules
VoiD	http://rdfs.org/ns/void#
VOID	Dataset description

Table 1 also shows the prefixes used in the ontology.

4.3. Interlinking to External Ontology and Datasets

We used an external ontology (DOID⁷) to enrich the knowledge graph with domain knowledge. We imported the DOID ontology into the knowledge graph. We linked the disease name and the super-classes of each disease to the disease ontology based on the similarity of the disease names. The interlinking of datasets through their parent class is carried out, which enriches the datasets to create a sound knowledge base. We also used Geonames⁸ to represent regional dimension information instead of literal adds another possibility for knowledge inference and creation. This allows the addition of semantics to statistical data in case the other datasets are joined.

4.4. Rules

Complex formal semantics in a knowledge graph allows a reasoner to infer the relationship between data items in different datasets [20]. This step was carried out to add more meaning to data from a dense knowledge graph and add another layer of complexity to the graph. This helps add another semantic layer and links the data together. The Semantic Web Rule Language (SWRL⁹), an example of a Rule Markup Language, was used to standardize the publishing and sharing of inference rules. As a proof of concept, we designed a SWRL rule to infer the transitive relationship of diseases in a dataset using Protege¹⁰ rule engine. This implies that if an observation includes a disease x which is a form of disease y (in the disease ontology), the

⁷https://disease-ontology.org/

⁸https://www.geonames.org

⁹https://www.w3.org/Submission/SWRL/

¹⁰https://protege.stanford.edu

graph will infer that observation x includes disease y implicitly.

The rule states that:

 $has disease(?x, ?y) \land doid: is_a(?y, ?z) \implies has disease(?x, ?z)$

Another semantic rule example is related to the observations with the highest number of cases for a particular disease. Based on the current number of cases in each disease in the Nova Scotia province, we considered 1,000 disease cases per 100,000 population is high in the Nova Scotia province. Those observations are defined in the following rule:

 $Observation(?obs) \land numberOfCases(?obs, ?n) \land swrlb:greaterThan(?n, 1000)$

 \implies HighDiseaseCases(?obs)

The rule can be made highly specific by using constraints on threshold N (number of disease cases) serving as a cut-off to classify common diseases as well as other dimensions such as region, period, gender and disease.

4.5. Transformation Process

A knowledge graph can be constructed in a) top-down approach where the entities are added to the knowledge-base based on a predefined ontology, or b) bottom-up approaches where knowledge instances are extracted from knowledge base systems and then, the top-level ontologies are built based on the knowledge instances to create the whole knowledge graph [21]. In this study, we followed the top-down approach to construct a disease knowledge graph from NSOD disease datasets (see Figure 4). We gathered data and transformed it into RDF triples using the designed ontology and data model described in the previous sections. The ontology was then extensively processed to enrich data through internal and external linking and dimensional and logical relations. The structural metadata about the dimensions and measures of the NSOD datasets are different in general. We developed a configuration setting to specify the dimensions and measures of each dataset, in case other datasets with various dimensions and measures are added. This allows semi-automatic updating of the graph with input data and makes the datasets semantically and dimensionally connected to the external ontologies and the Linked Open Data cloud. For example, several disease datasets had *number of cases* property that could be used as one predicate (*eg:numberOfCases*) across the knowledge graph.

In the transformation process, the Dublin Core Metadata, the most widely used metadata schema, was used to describe the metadata elements of datasets such as published date, dataset title, subject or category, source, contributor, etc. The corresponding elements of each observation were mapped to RDF triples based on the vocabularies mentioned in Table 2).

The defined rules are also translated into the constructor component to enable semantic reasoning over the knowledge graph. Finally, the datasets are added onto the graph as observations, ensuring that they conform to prescribed metadata, structure, and semantic web protocols. The graph was subjected to a quality and refinement check, and it is checked against well-received field works in terms of concept, schema, entity instances, and relations. This is followed by

Table 2Mapping vocabularies

Section	Element	Mapping voacbulary
Metadata	Dataset licence	dct:license
Metadata	Dataset language	dct:language
Metadata	Department	:department
Metadata	Dataset description	rdfs:comment
Metadata	Dataset keyword	dcat:keyword
Metadata	Dataset suject	dcat:theme
Observation	Year of observation	sdmx-dimension:refPeriod
Observation	Region of observation	sdmx-dimension:refArea
Observation	Number of cases for each disease	:numberOfCases
Observation	An observation belongs to a disease	:hasdisease
Observation	Case rate per 100,000 population	:rateper100kpopulation
Observation	Gender in observation	sdmx:sex
Observation	Geolocation of dataset	dct:spatial

query retrieval to answer questions using SPARQL. The implemented Python program used for the knowledge graph construction is available at 11 .



Figure 4: Knowledge graph construction pipeline [5]

¹¹https://github.com/erajabi/Nova_Scotia_Open_Data

4.6. Queries

We used the built-in SPARQL tab in Protege to pose a set of designed queries against the knowledge base through additional semantics, which cannot be explicitly expressed through linkage. The questions were designed with the help of Nova Scotia health stakeholders. In designing the question, we considered the semantic rules developed in Section 4.4 in the knowledge graph. For example, some disease datasets were the sub-classes of the infectious disease class in the disease ontology, and we can use this property to retrieve the results. The queries are outlined below.

Figure 5 shows two questions that we defined along with the sample results. In both queries, we leveraged the rules that we defined before.

Query 1: List of viral infectious diseases along with their number of cases in Nova Scotia in different years.

In this query, we use *doid:is_a* relationship rule to identify all the disease classified as "viral infectious diseases".

Query 2: List of viral infectious diseases with a high number of cases (more than 1,000 cases) in Nova Scotia in 2017.

In this question, we use the *HighDiseaseCases* class to infer the results based upon the rule defined in Section 4.4.



Figure 5: Query ¹²

The results of queries were cross-checked and validated for accuracy and completeness. We also performed a knowledge graph refinement process to enhance the overall quality of the knowledge graph. It includes identifying and subsequently adding the missing knowledge and correcting erroneous information. The metrics to determine the quality of a knowledge graph have been theorized based on the various refinement techniques. To determine some of these metrics, the tool OntoMetrics¹³ has been utilized. The results show that the knowledge graph quality checked passed all the tests (see Table 3).

4.7. Knowledge Graph

The final knowledge graph included 2,883 triples with 24 classes, 23 object properties, and two data properties. All 21 disease datasets were transformed to the knowledge graph successfully with the total of 252 observation. Each observation includes Gender (*sdmx:sex*), disease information (*eg:hasdisease*), observation year (*dimension:refPeriod*), disease label (*rdfs:label*), disease rate per 100k population of disease (*eg:rateper100kpopulation*), area of observation (*dimension:refArea*) and number of disease cases (*numberofcases*) properties. The knowledge graph is publicly available at Zenodo ¹⁴ under Creative Commons Universal Public Domain Dedication (CC0

¹²An online SPARQL editor was used to improve the readability of the SPARQL Queries.

¹³ https://ontometrics.informatik.uni-rostock.de/ontologymetrics/

¹⁴ https://doi.org/10.5281/zenodo.5517236

Quality Check	Description	Metric	Value
	The correctness and validity of		0%
Acquirect	the information presented,	Spelling	
Accuracy	verified against a legitimate	Error Rate	
	source.		
	A horizontal or shallow ontology		77%
Domain-specificity	(high) covers more domains but	Inheritance Richness	
Domain-specificity	not in-depth and a vertical or	inneritance, Richness	
	deep ontology (low) domain specific.		
Consistancy	The adherence to a structure		007
Consistency	i.e. precision.	inconsistent, terms katio	070
	The information conveyed by		64%
Informative	ontology on the basis of	Relationship, Richness	
	relationships.		

Table 3Quality Check Metrics With Values

 $(1.0)^{15}$ license.

5. Conclusion and Lessons Learned

The study demonstrates the integration of disease-related datasets of an open government data portal. Due to certain limitations identified below, there is a hindrance in completing automatic constructing a knowledge graph. Although we developed a tool to retrieve open datasets from the NSOD portal, identifying the disease-related datasets was done manually, making the knowledge graph construction process semi-automatic. One of the challenges in transforming open statistical data to RDF was having different dimensions with various data types. Some of the disease-related datasets in the NSOD portal contain the same number of dimensions with the same data type, though this might not be true for all the datasets. Lack of descriptive metadata that explicitly enlist each dataset's dimensions, measures, and attributes was another significant hurdle towards achieving complete automation. Alternatively, the lack of a vocabulary that supports properties (e.g., ex:numberOfCases) that convey this information is another issue that prevents us from addressing it in a standardized manner. During the exploratory analysis of the extracted dataset, we noticed that different provincial open data portals across Canada publish datasets with the same structure and related topics. A Linked Data strategy, similar to what we described in this article, can be used to build a SPARQL endpoint (e.g., in the Canada Open Data portal ¹⁶) to link similar open statistical datasets across a country and facilitate query answering for data consumers and the linked open data community.

¹⁵https://creativecommons.org/publicdomain/zero/1.0/
¹⁶https://open.canada.ca/

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