

#### Models and Data



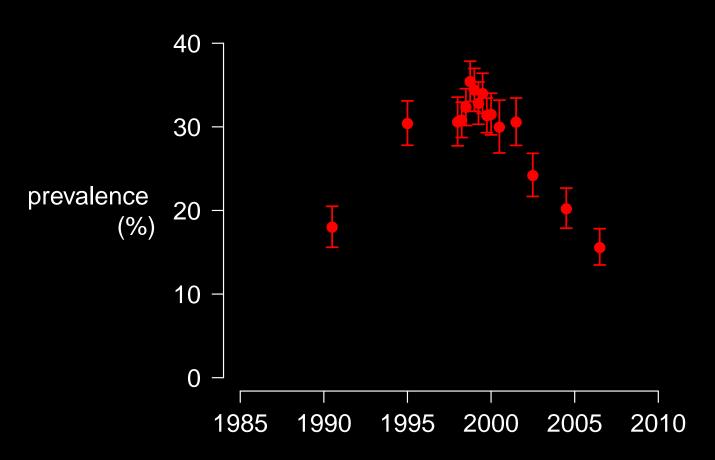
#### Introduction to Model Fitting



DAIDD 2015
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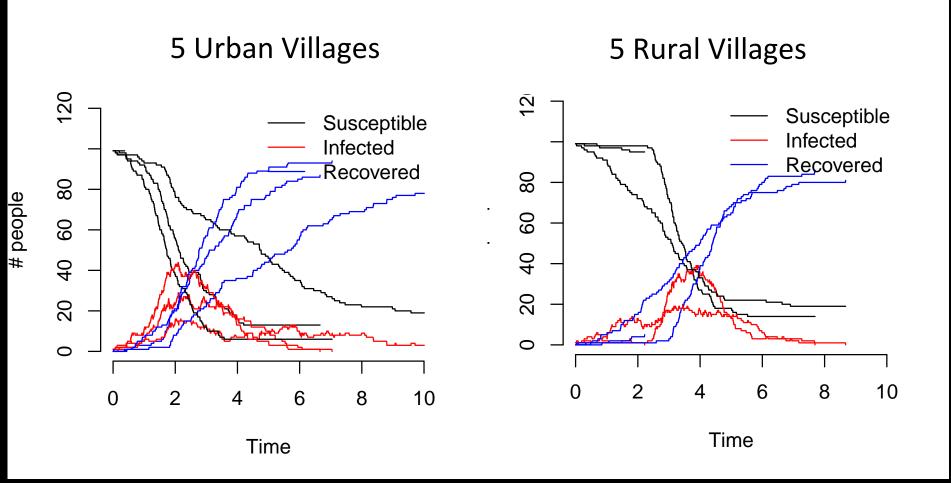
## What happened?

#### Harare ANC HIV Data



### Are these different?

#### Measles Outbreaks

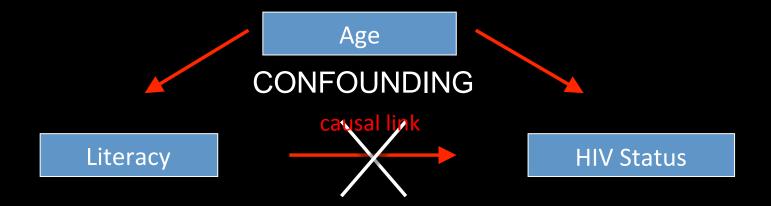


#### Classical Epidemiology

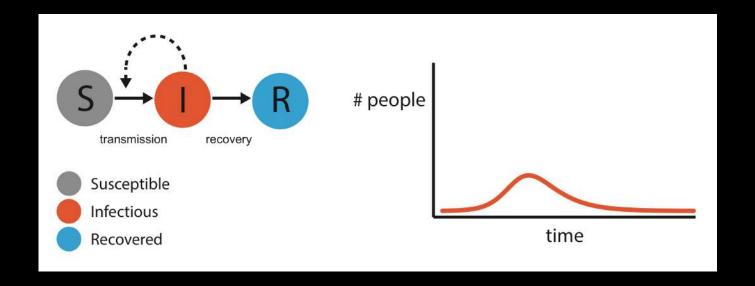
Does literacy cause HIV?

Individual	Literate	HIV infected
1	0	0
2	0	0
3	0	0
4	0	1
5	1	1
6	1	0
7	1	1
8	1	1

- Find correlations that imply causality by accounting for
  - 1. random error: do we have enough data?
  - 2. bias: are design & analysis valid?

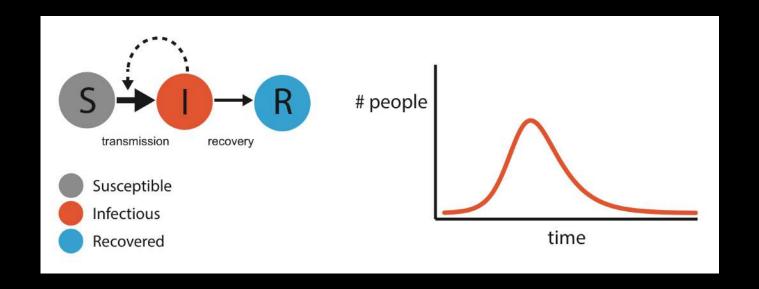


- Scale up from individual processes to population patterns
- "What if" scenarios not amenable to experimentation



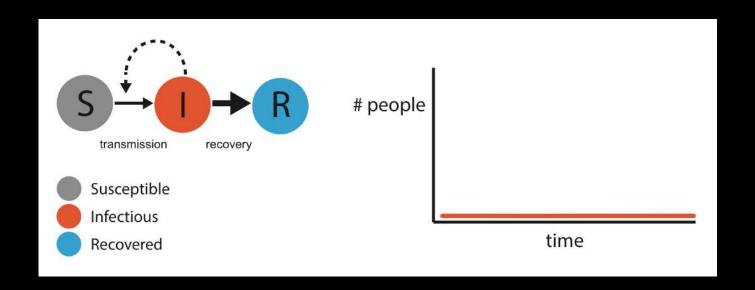
- Scale up from individual processes to population patterns
- "What if" scenarios not amenable to experimentation

What if each person exposed 50% more people?

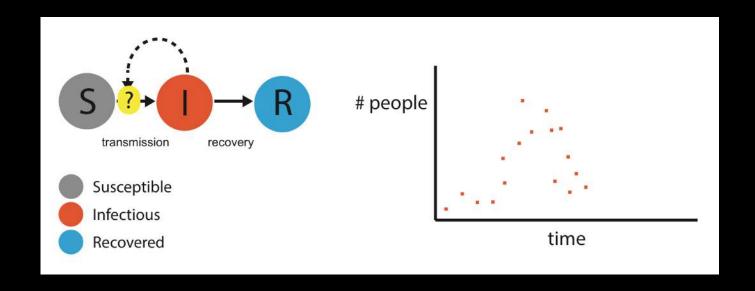


- Scale up from individual processes to population patterns
- "What if" scenarios not amenable to experimentation

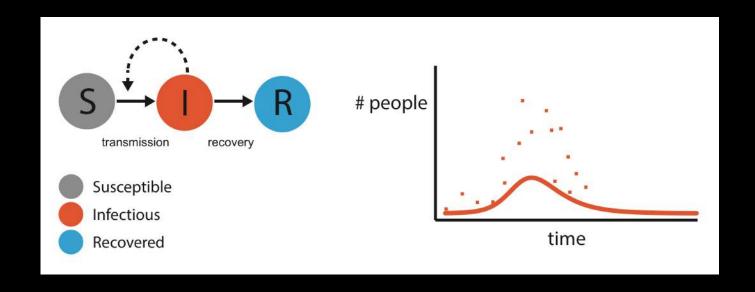
What if we treated people and doubled the rate of recovery?



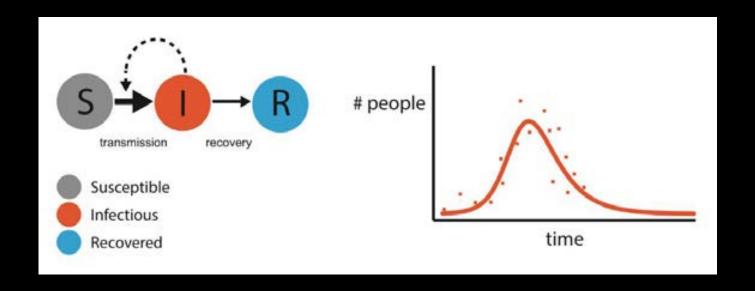
- Scale up from individual processes to population patterns
- "What if" scenarios not amenable to experimentation
- Estimating parameters by fitting available data



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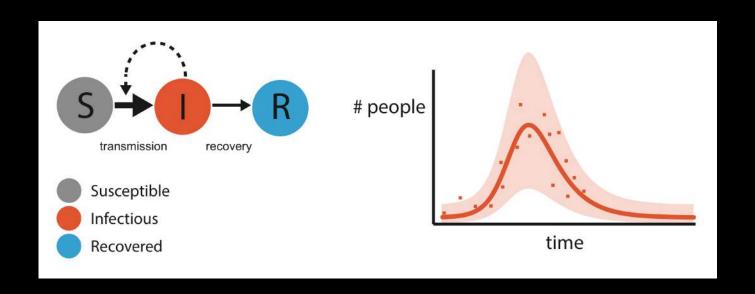


- Scale up from individual processes to population patterns
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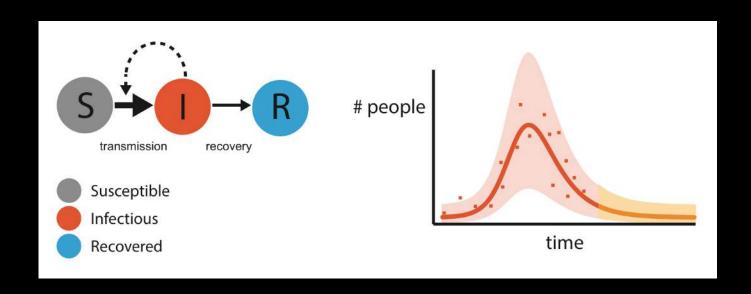


- Scale up from individual processes to population patterns
- "What if" scenarios not amenable to experimentation
- Estimating parameters by fitting available data

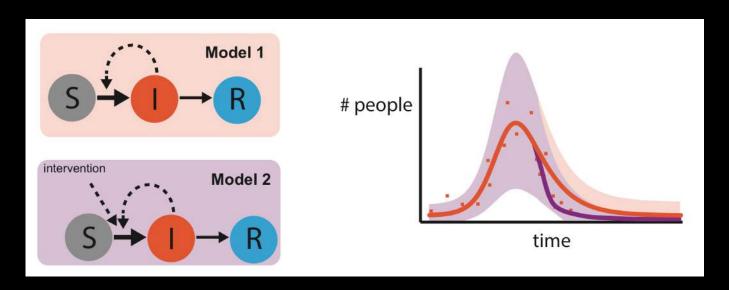
Estimate transmission rate or other model parameters (with confidence intervals)



- Scale up from individual processes to population patterns
- "What if" scenarios not amenable to experimentation
- Estimating parameters by fitting available data
- Prediction

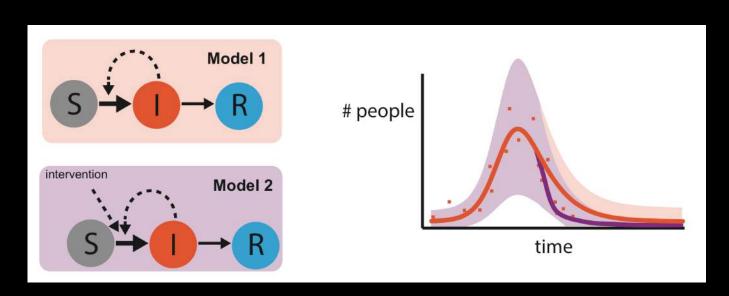


- Scale up from individual processes to population patterns
- "What if" scenarios not amenable to experimentation
- Estimating parameters by fitting available data
- Prediction
- Model selection (choosing between alternative hypotheses)



- Scale up from individual processes to population patterns
- "What if" scenarios not amenable to experimentation
- Estimating parameters by fitting available data
- Prediction
- Model selection

data focus emerged in last 10 years



### Why fit models to data?

Estimate quantities/parameters of interest

Inference: Test hypotheses

Model assessment:

Assess plausibility or model comparison

End goal: explain observed patterns or predict

#### Statistical Models

A familiar starting point



Analogous to fitting dynamical models

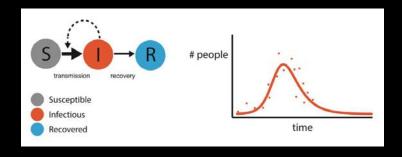
Abstraction of real relationships

 Explaining variation in data through correlational relationships (hopefully causal)

#### Dynamic Models and Time Series Data

Dynamic models evolve through time

and simulate time series



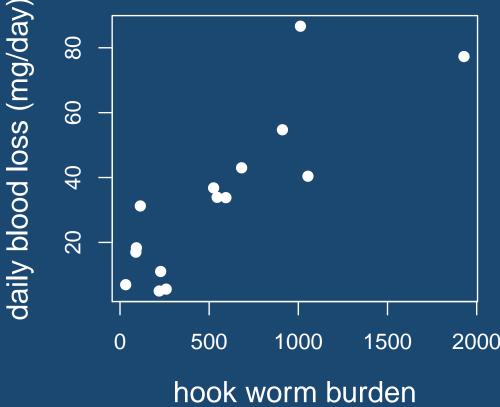
Informally compare observed time series & simulated time series

Fitting models to data formally compares them

How does hook worm burden affect blood loss?

Is there any relationship?





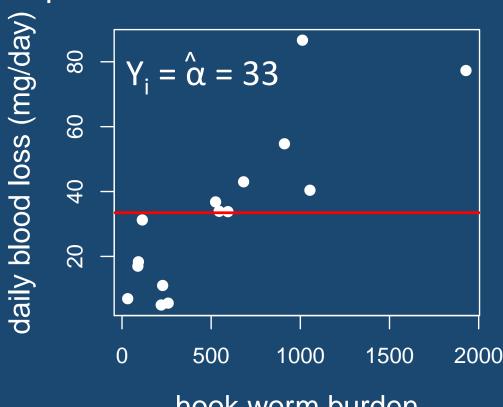
Data in Epicalc R Library taken from Areekul et al. (1970).

Null hypothesis: No relationship

$$Y = \alpha$$

Is this a good fit?

How can we get a better fit, or the best fit?



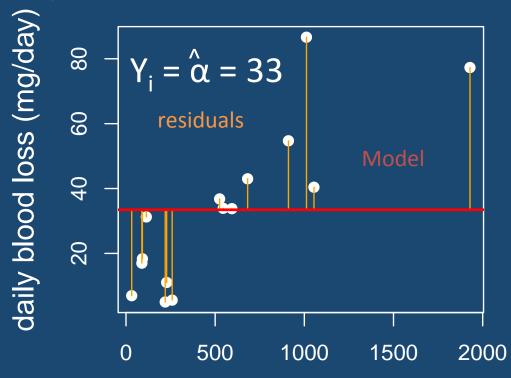
hook worm burden

Null hypothesis: No relationship

$$Y_i = \alpha + \epsilon_i$$

Is this a good fit?

How can we get a better fit, or the best fit?



hook worm burden

One option is Least Squares Fitting

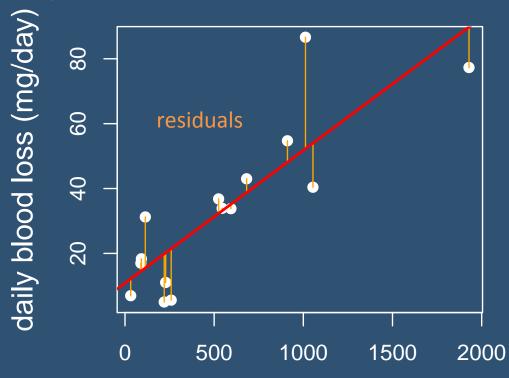
Choose a line  $Y = \hat{\alpha} + \hat{\beta}X$  to minimize  $\Sigma$ (residuals)<sup>2</sup>

Null hypothesis: No relationship

$$Y_i = \alpha + \beta X_i + \epsilon_i$$

Is this a good fit?

How can we get a better fit, or the best fit?



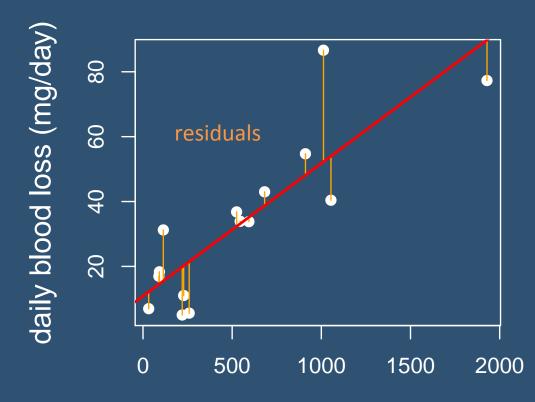
hook worm burden

One option is Least Squares Fitting

Choose a line  $Y = \hat{\alpha} + \hat{\beta}X$  to minimize  $\Sigma$ (residuals)<sup>2</sup>

### hook worm burden expected daily blood loss intercept error effect of hook worm burden

#### Linear Regression



One option is Least Squares Fitting

hook worm burden

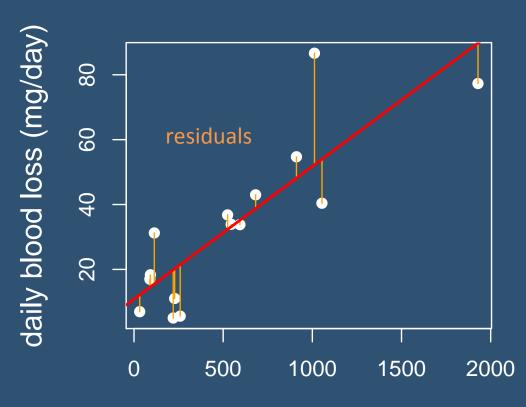
Choose a line  $Y = \hat{\alpha} + \hat{\beta}X$  to minimize  $\Sigma(\epsilon_i)^2$ 

#### Another option is

Maximum Likelihood

$$Y_i = \alpha + \beta X_i + \epsilon_i$$

$$\epsilon_i \sim N(0, \sigma^2)$$

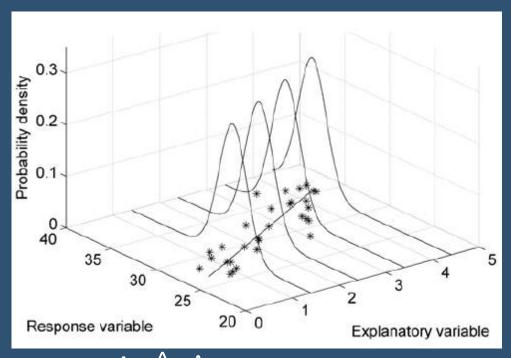


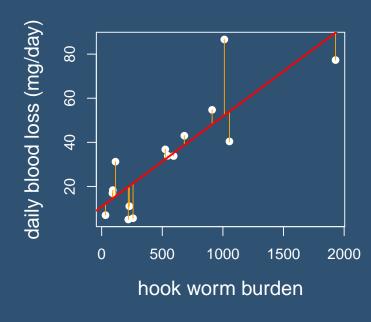
hook worm burden

Choose  $\hat{\alpha}$ ,  $\hat{\beta}$ ,  $\hat{\sigma}$  to maximize the likelihood i.e. probability of observed data given a model

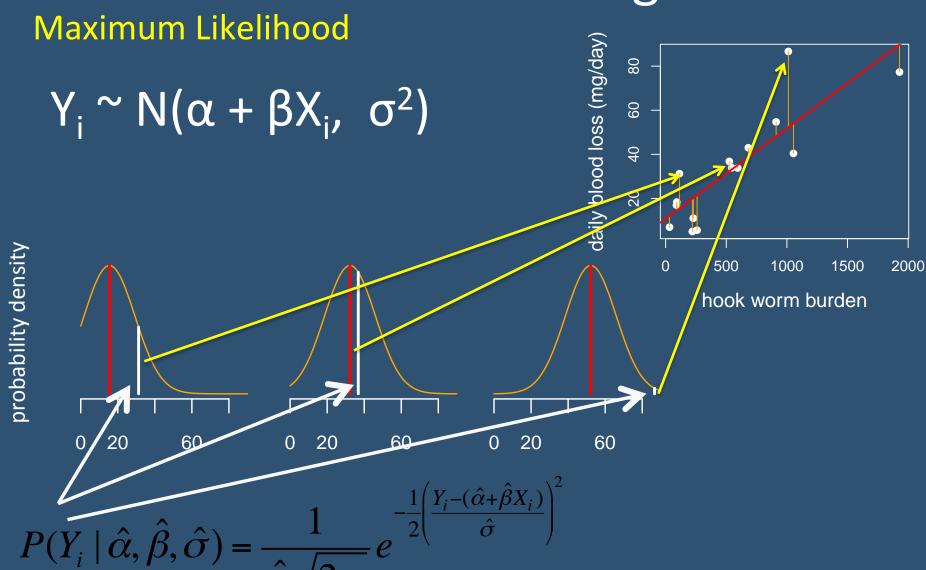
#### Maximum Likelihood

$$Y_i \sim N(\alpha + \beta X_i, \sigma^2)$$





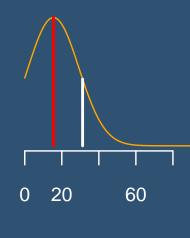
Choose  $\hat{\alpha}$ ,  $\hat{\beta}$ ,  $\hat{\sigma}$  to maximize the likelihood i.e. probability of observed data given a model

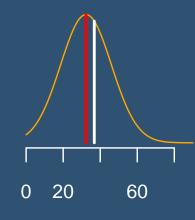


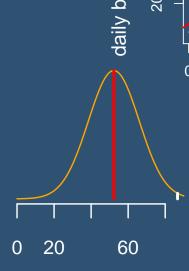
#### Maximum Likelihood

$$Y_i \sim N(\alpha + \beta X_i, \sigma^2)$$

orobability density







$$P(Y_1,...,Y_n \mid \hat{\alpha}, \hat{\beta}, \hat{\sigma}) = \prod_{i=1}^n P(Y_i \mid \hat{\alpha}, \hat{\beta}, \hat{\sigma})$$

80

90

2000

#### Maximum Likelihood

daily blood loss (mg/day 20 function of data 500 1000 1500 hook worm burden  $P(Y_1,...,Y_n \mid \hat{\alpha}, \hat{\beta}, \hat{\sigma}) = \prod P(Y_i \mid \hat{\alpha}, \hat{\beta}, \hat{\sigma})$ 

LIKELIHOOD: 
$$L(\hat{\alpha}, \hat{\beta}, \hat{\sigma} \mid Y_1, ..., Y_n) = \prod_{i=1}^n P(Y_i \mid \hat{\alpha}, \hat{\beta}, \hat{\sigma})$$
 function of parameters

## Parameter Estimation & Inference

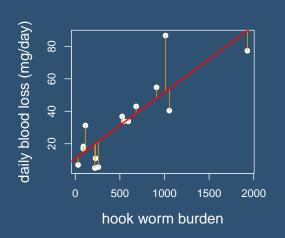
Null hypothesis:  $\beta = 0$ 

$$\hat{\beta} = 0.04$$

P(estimating a β this extreme | null)

$$P = 6.99e-05 < 0.05$$
,

so we reject the null hypothesis.

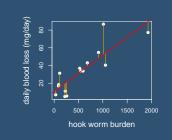


Confidence intervals

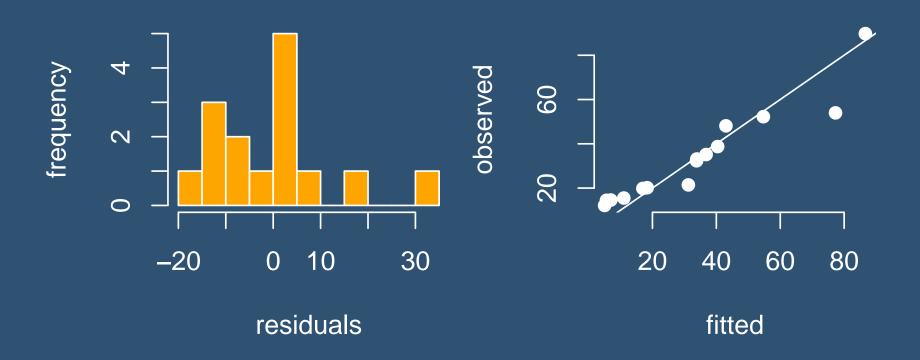
Collection of non-rejectable null hypotheses

$$\hat{\beta} = 0.04 (0.025, 0.056)$$

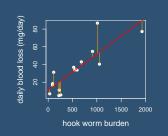
# Is it a good model: Checking Assumptions



#### **Normality**



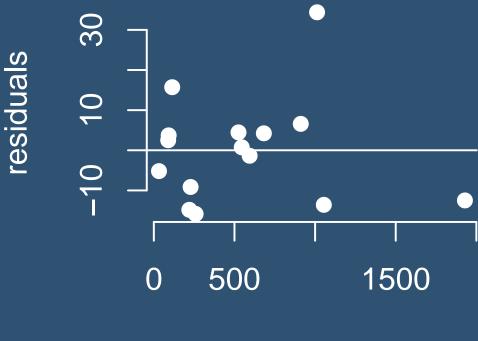
# Is it a good model: Checking Assumptions



Linearity

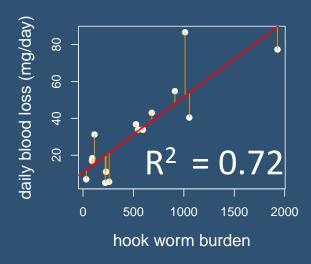
Independence

**Constant Variance** 



worm burden

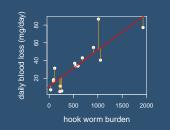
## Is it a good model: Goodness of Fit



 $R^2$  = (correlation coefficient)<sup>2</sup>

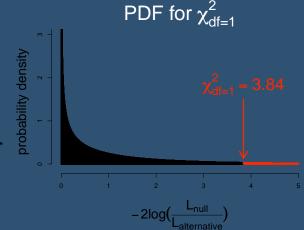
How much of the variation in Y is explained by the model?

## Is it a good model: Goodness of Fit



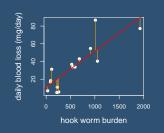
## Chi Squared Goodness of Fit Test

$$\chi^{2} = \frac{1}{n-1} \sum_{i=1}^{n} \frac{(Observed_{i} - Expected_{i})^{2}}{\sigma^{2}}$$



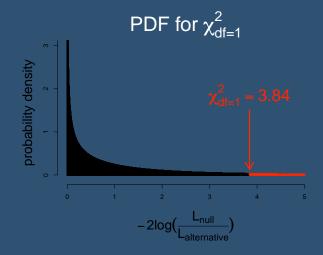
- Does the observed data differ significantly from our model?
- If not, then we cannot reject our model as a bad model.
- But we cannot accept our model (the null hypothesis)!

## Is it a good model: Goodness of Fit



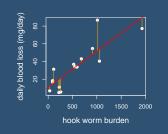
Likelihood Ratio Test (G test, Analysis of Deviance, ANOVA)

Under the null hypothesis:



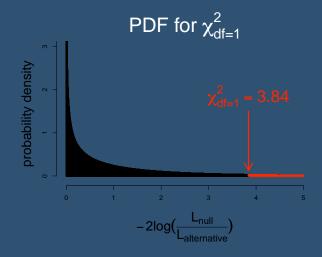
$$2\log \frac{L_{MLE}}{L_{Null}} \sim \chi_{\text{df = difference in \# of parameters}}^2$$

## Is it a good model: Model Selection



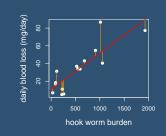
Likelihood Ratio Test (G test, Analysis of Deviance, ANOVA)

Under the null hypothesis:



$$2\log \frac{L_{\text{more parameters}}}{L_{\text{less parameters}}} \sim \chi_{\text{df = difference in \# of parameters}}^2$$

## Is it a good model: Model Selection



Akaike's Information Criterion (AIC)

Rank proposed models by AIC: lowest is best.

All models within 2 of lowest should be considered.

### Overfitting

You can always fit N data points with N parameters.

How many is too many?

Bias/Variance Tradeoff

AIC, Cross-validation

### Collinearity

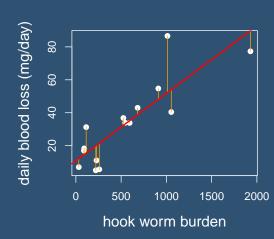
Independent variables that vary with each other

### Non-Identifiability

Multiple parameter sets fit about equally well

### What did we just do?

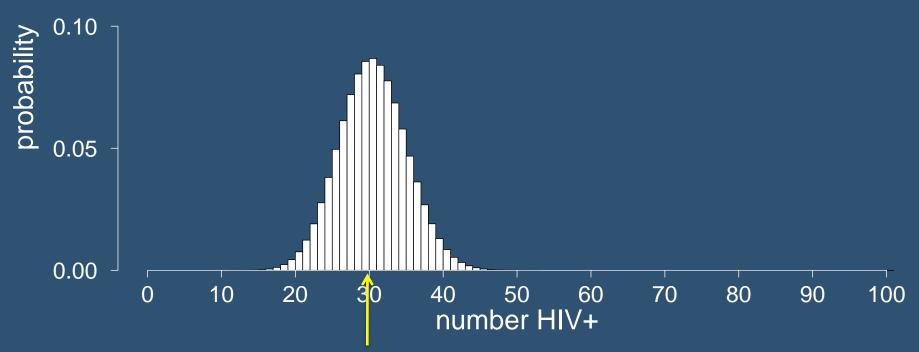
- Asked a question about a relationship
- Made some observations (data)
- Formulated the relationship into a model
- Fitted the model to data
- Assessed model fit/quality (model selection)
- Inference/parameter estimation
- Improved our understanding of the world





In a population of 1,000,000 people with a true prevalence of 30%, the probability distribution of number of positive individuals if 100 are sampled:

$$f(x) = {100 \choose x} (0.3)^x (0.7)^{100-x}$$

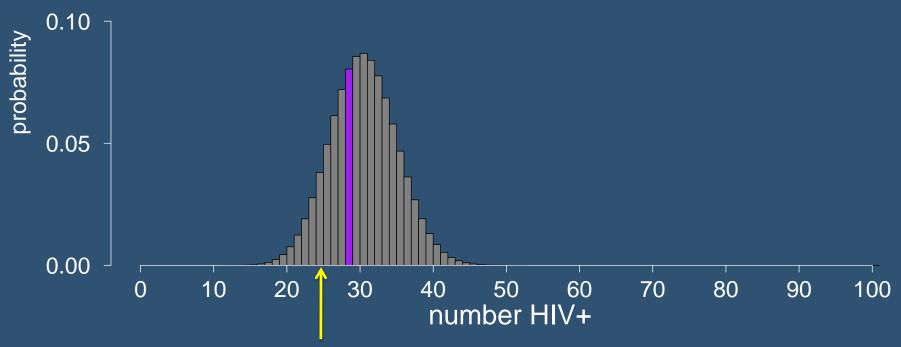


We sample 100 people once and 28 are positive:

#### Introduction to Likelihood

hypothetical prevalence: 30 %

dbinom(28, 100, 0.3) = 0.0804

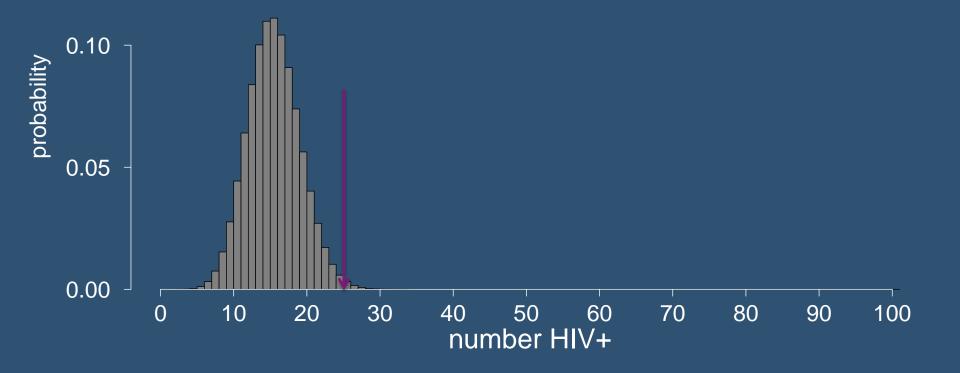


We sample 100 people once and 28 are positive:

```
> rbinom(n = 1, size = 100, prob = .3)
[1] 28
```

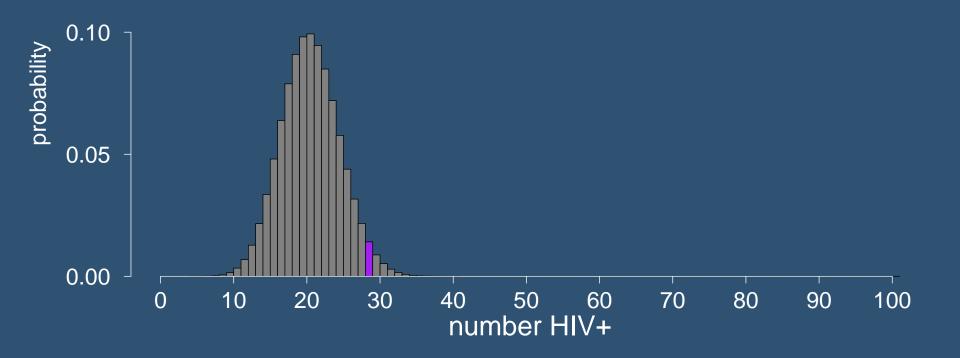
#### hypothetical prevalence: 15 %

dbinom(28, 100, 0.15) = 0.000353



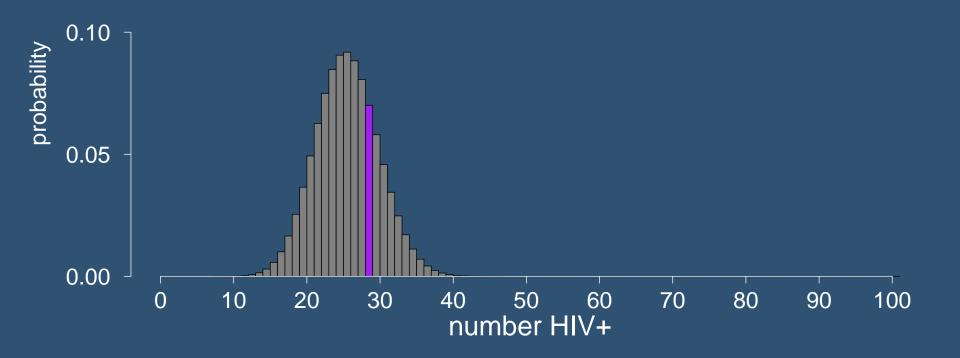
#### hypothetical prevalence: 20 %

dbinom(28, 100, 0.2) = 0.0141



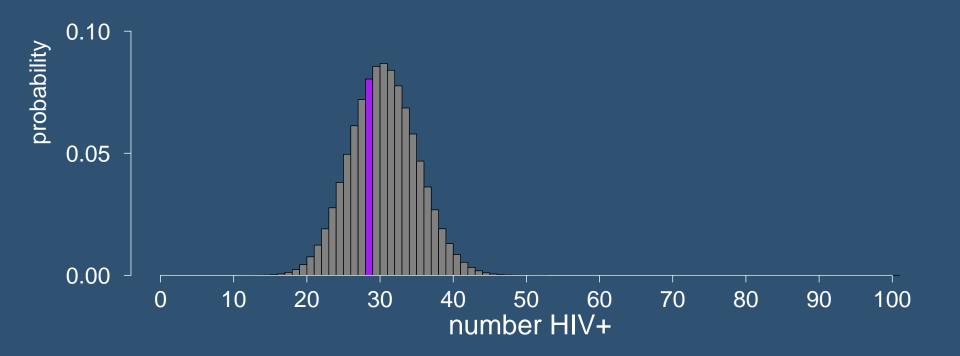
#### hypothetical prevalence: 25 %

dbinom(28, 100, 0.25) = 0.0701



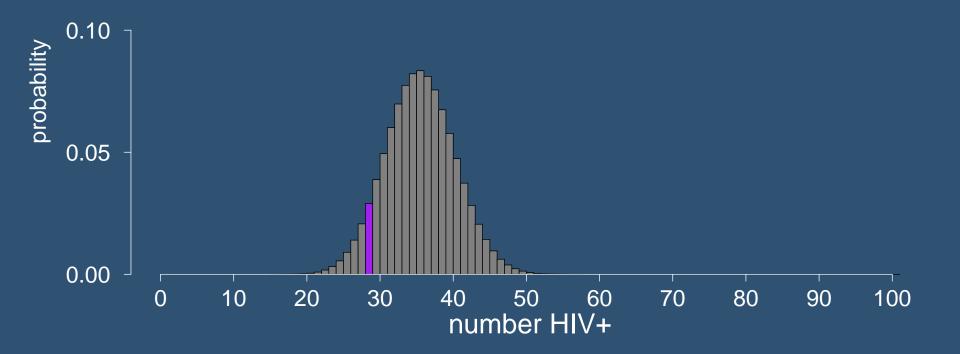
#### hypothetical prevalence: 30 %

dbinom(28, 100, 0.3) = 0.0804



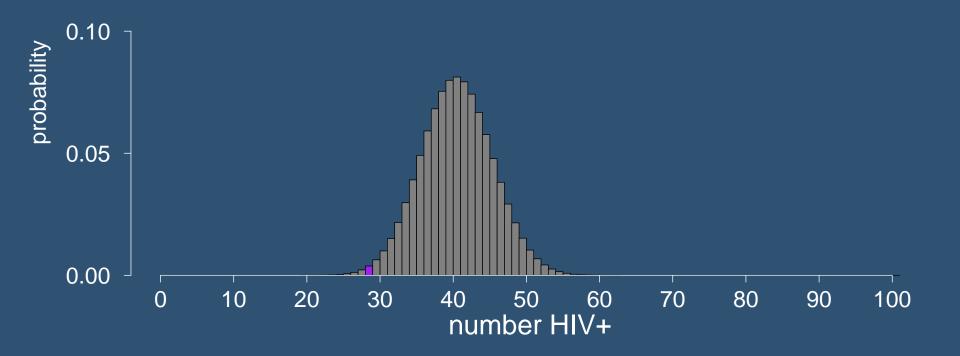
#### hypothetical prevalence: 35 %

dbinom(28, 100, 0.35) = 0.029

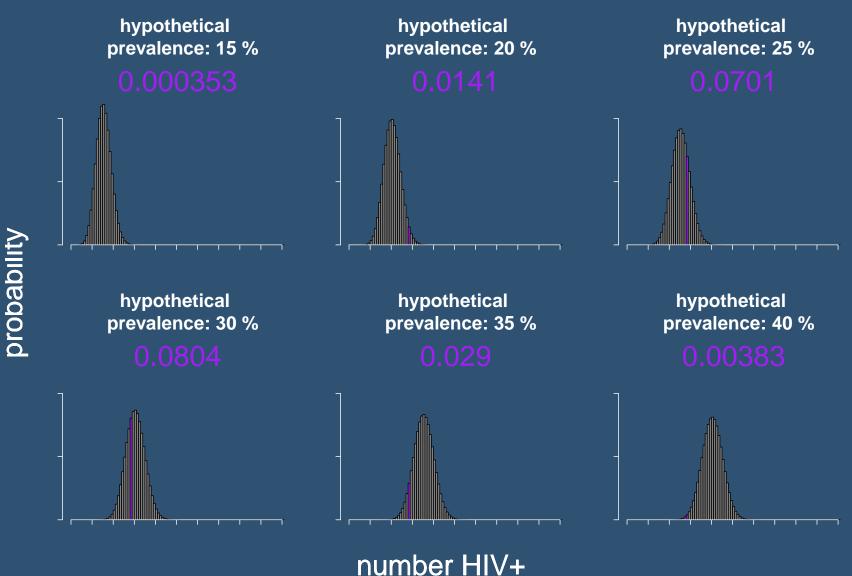


#### hypothetical prevalence: 40 %

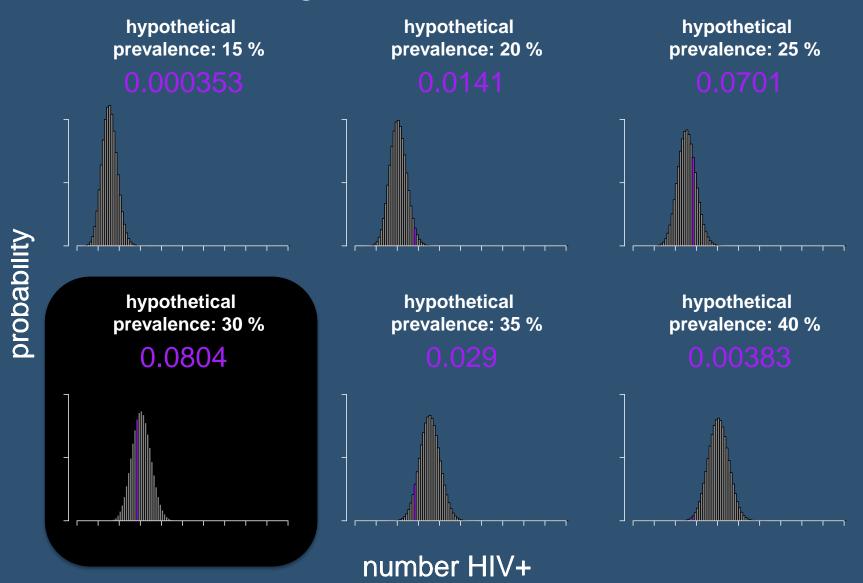
dbinom(28, 100, 0.4) = 0.00383



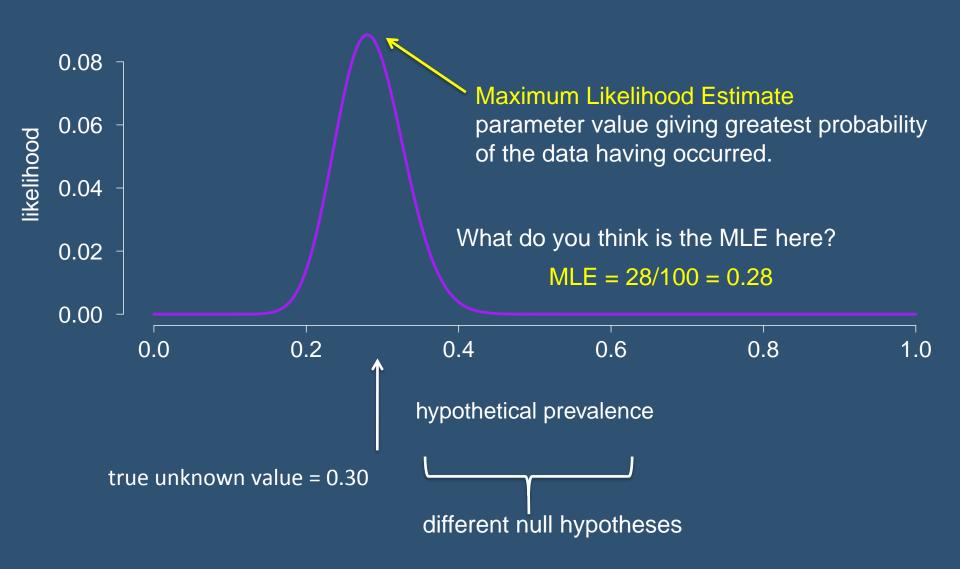
# Which prevalence gives the greatest probability of observing exactly 28/100?



## Which of these prevalence values is most likely given our data?



#### p(our data given prevalence) = LIKELIHOOD



### **Defining Likelihood**

- L(parameter | data) = p(data | parameter)
- Not a probability distribution.

function of x 
$$\downarrow \qquad \qquad \downarrow$$
 PDF:  $f(x|p) = \binom{n}{x}(p)^x(1-p)^{n-x}$ 

Probabilities

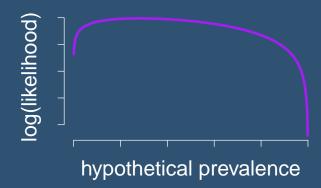
 taken from many
 different
 distributions.

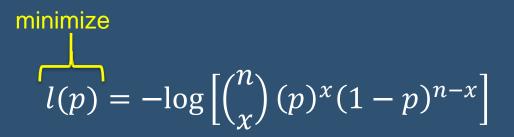
LIKELIHOOD: 
$$L(p|x) = \binom{n}{x}(p)^x(1-p)^{n-x}$$
 function of p

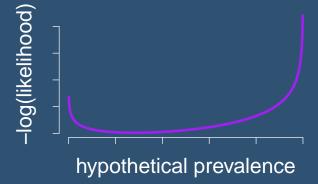
### Deriving the Maximum Likelihood Estimate

maximize
$$L(p) = \binom{n}{x} (p)^x (1-p)^{n-x}$$

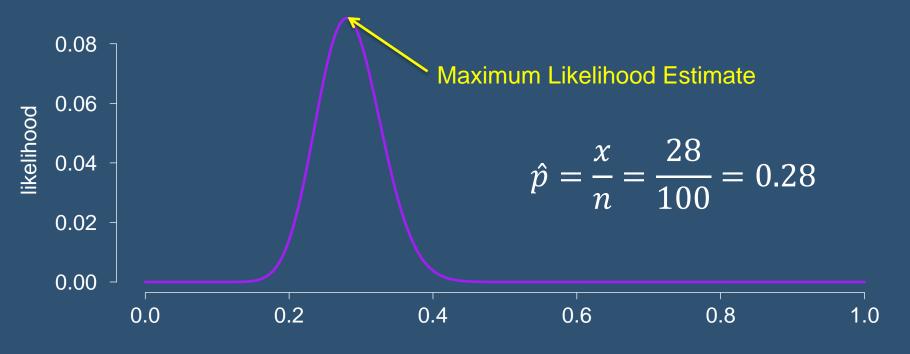
maximize 
$$\log(L(p)) = \log\left[\binom{n}{x}(p)^x(1-p)^{n-x}\right]$$



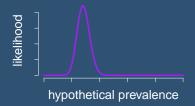




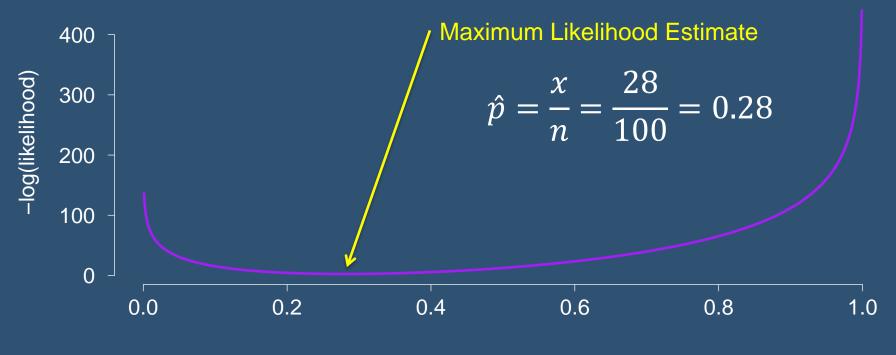
#### Likelihood



hypothetical prevalence



#### we usually minimize the -log(likelihood)

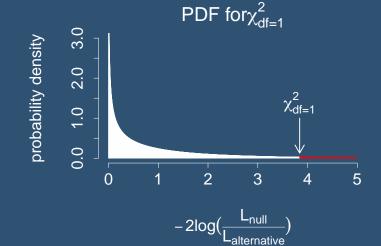


hypothetical prevalence

If the null hypothesis were true then

$$2 \log \left( \frac{L(\text{alternative hypothesis})}{L(\text{null hypothesis})} \right) \sim \chi_{df=1}^2$$

Why does this work?

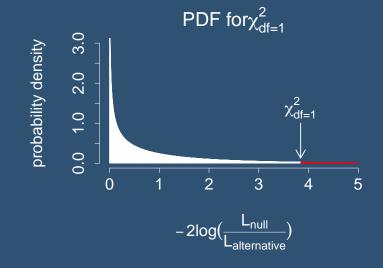


- Adding irrelevant parameters always improves the fit.
- How much should fit improve due to chance alone by adding an irrelevant parameter?
- Fit improvement, as measured above, is approximately  $\chi^2_{df}$  distributed with df = to the difference in parameters used to fit.

If the null hypothesis were true then

$$2 \log \left( \frac{L(\text{alternative hypothesis})}{L(\text{null hypothesis})} \right) \sim \chi_{df=1}^2$$

$$2 \log(L_{\text{MLE}}) - 2 \log(L_{\text{null}}) \sim \chi_{df=1}^{2}$$
$$-2l_{MLE} + 2l_{null} \sim \chi_{df=1}^{2}$$



So if our  $\alpha = .05$ , then we reject any null hypothesis for which

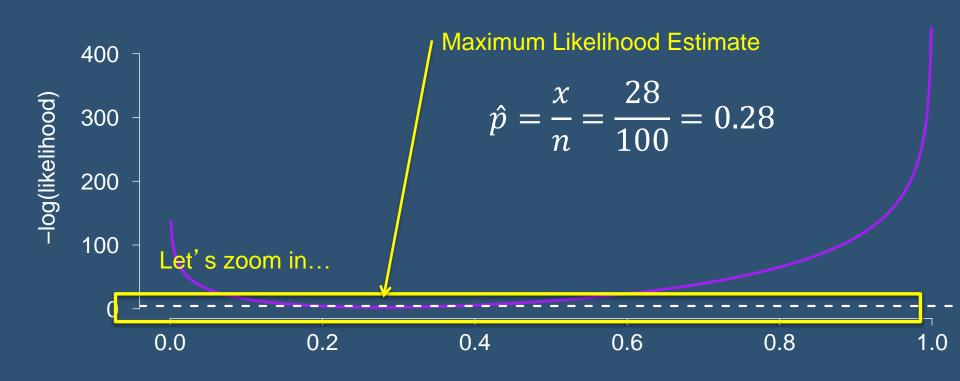
$$-2l_{MLE} + 2l_{null} > \chi^2_{df=1,\alpha=.05} = 3.84$$
 > qchisq(p = .95, df = 1) [1] 3.841459

$$l_{null} - l_{MLE} > 1.92$$

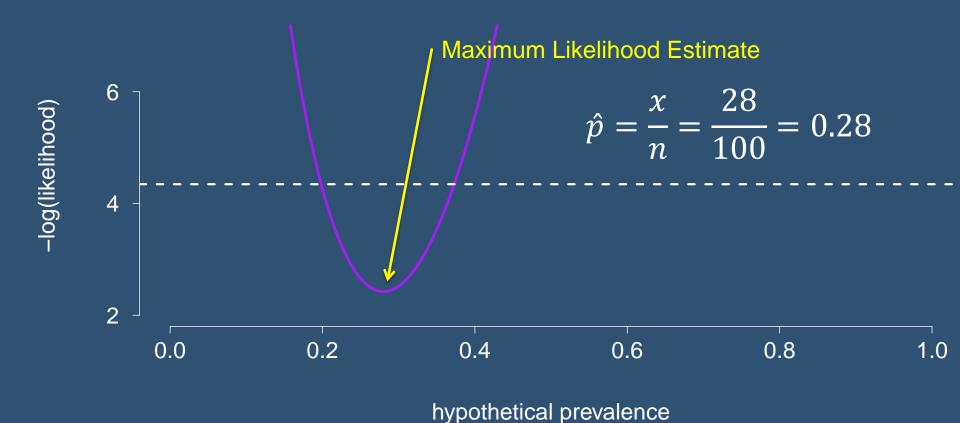
If 
$$\log(L_{MLE}) - \log(L_{null}) > 1.92$$
,

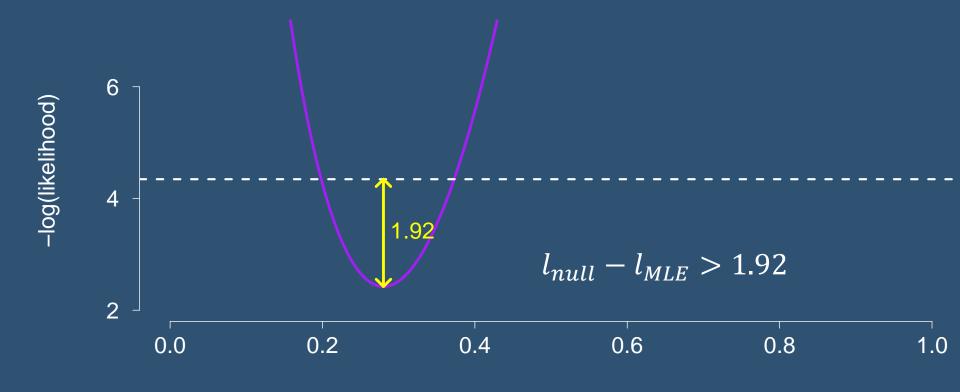
we reject that null hypothesis.

we usually minimize the -log(likelihood)

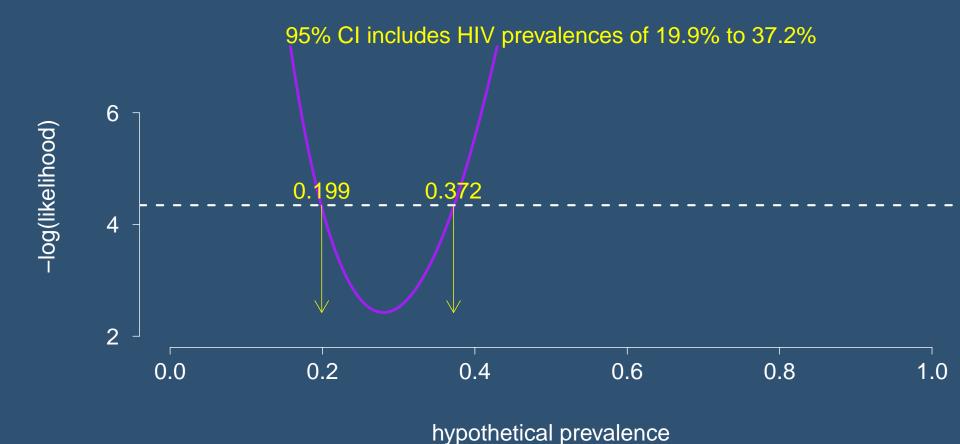


hypothetical prevalence





hypothetical prevalence



- Account for bias and random error to find correlations that may imply causality.
- Often the first step to assessing relationships.
- Assume independence of individuals (at some scale).

- Systems Approach:

   Explicitly model multiple
   mechanisms to understand
   their interactions.
- Links observed relationships at different scales.
- Explicitly focuses on dependence of individuals

By developing dynamic models in a probabilistic framework we can account for dependence, random error, and bias while linking patterns at multiple scales.

### Fitting Dynamic Models to Data

Adapt our dynamic models in a probabilistic framework so we can ask:

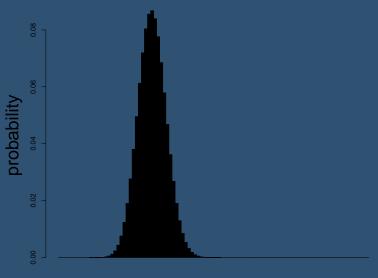
What is the probability that a model would have generated the observed data?



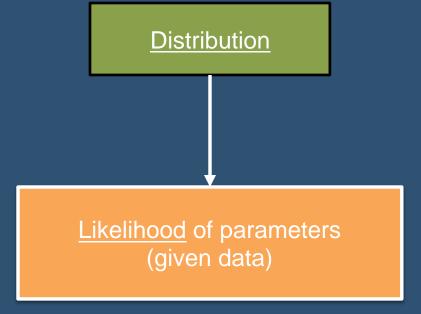
What is the likelihood of a model given the data?

<u>Likelihood</u> of parameters (given data)

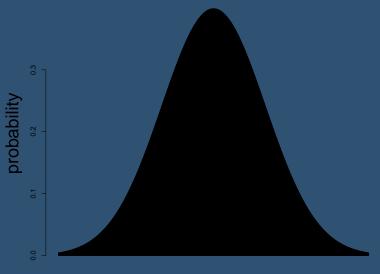
#### **Binomial Distribution**



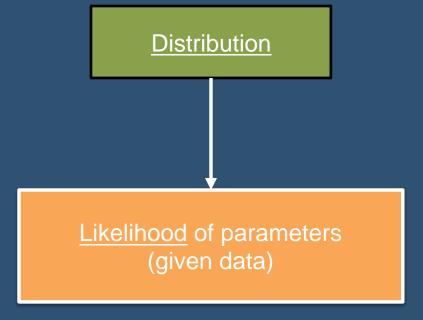
# successes in N trials



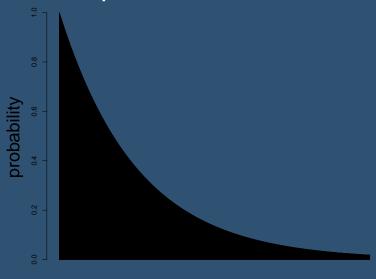
#### **Normal Distribution**



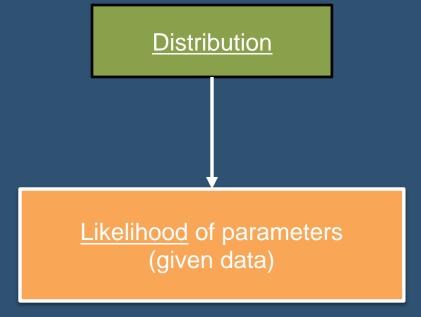
(approximately) continuous variable



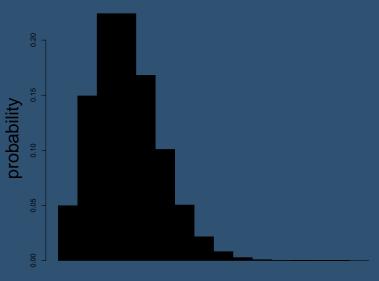
#### **Exponential Distribution**



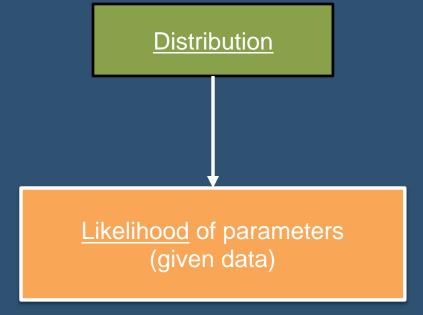
time until event



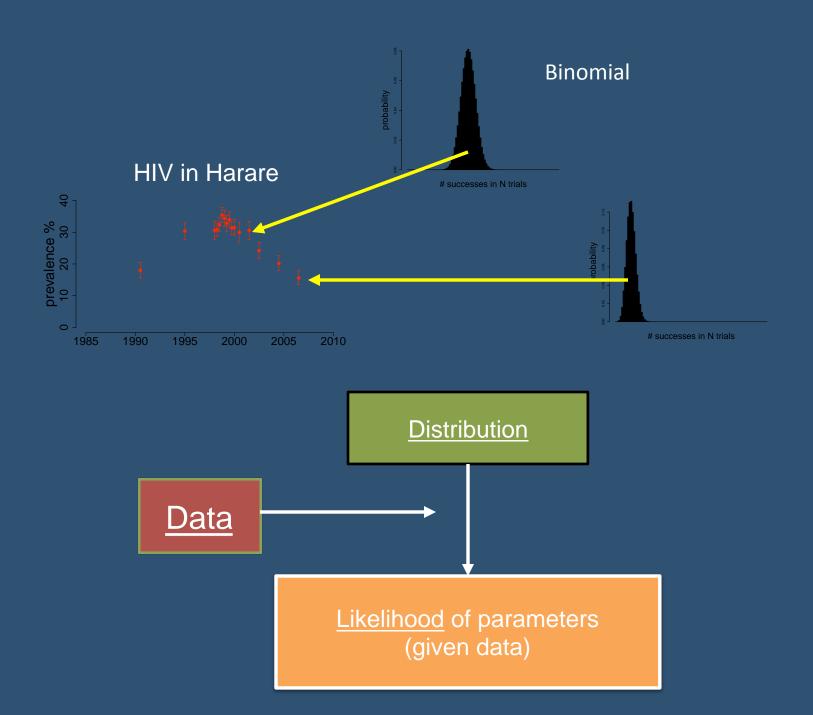
#### **Poisson Distribution**

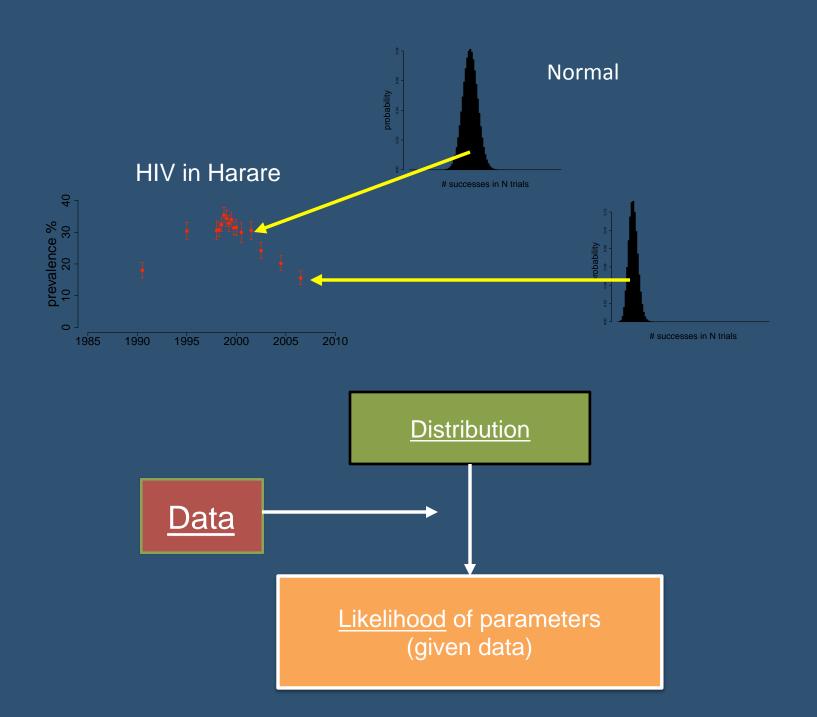


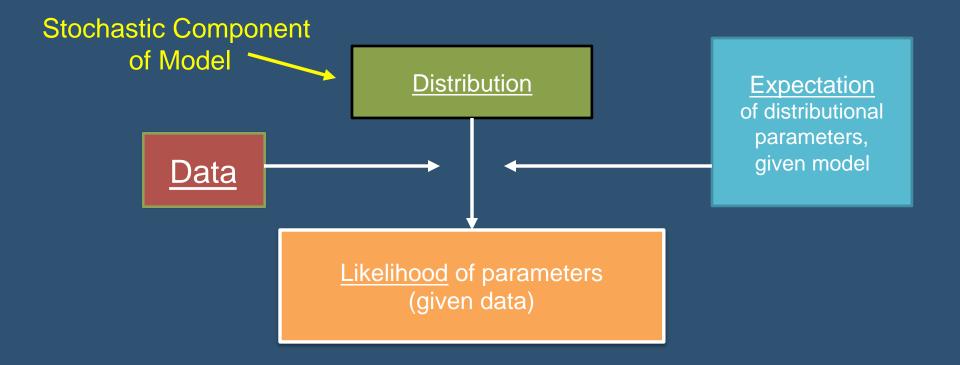
# of events in time interval

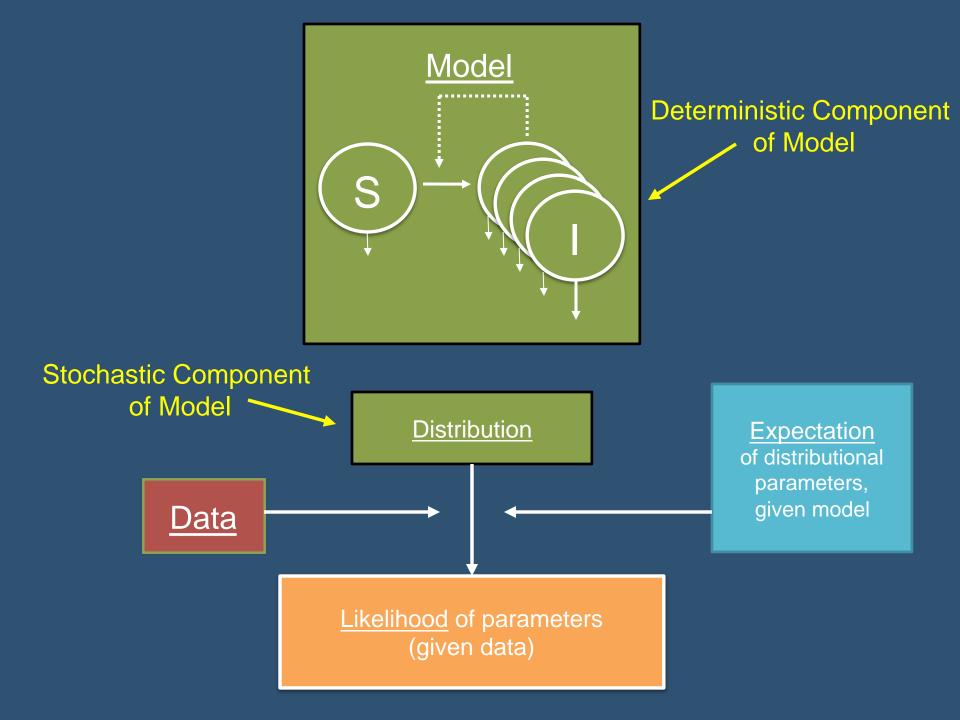


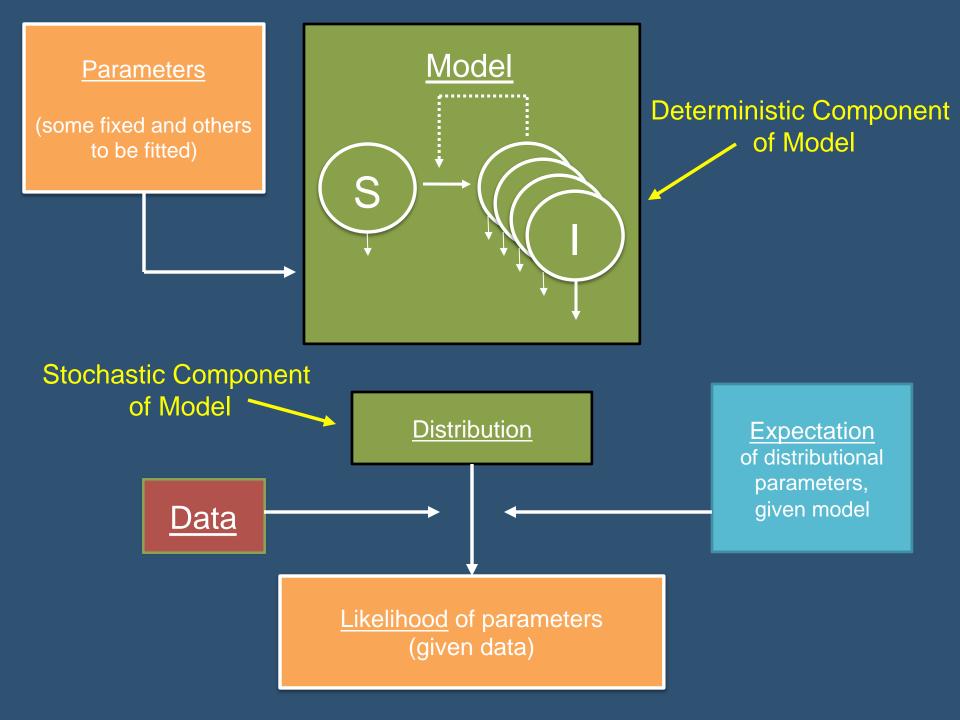
# **Binomial Distribution** probability **Stochastic Component of Model** # successes in N trials **Distribution** <u>Likelihood</u> of parameters (given data)

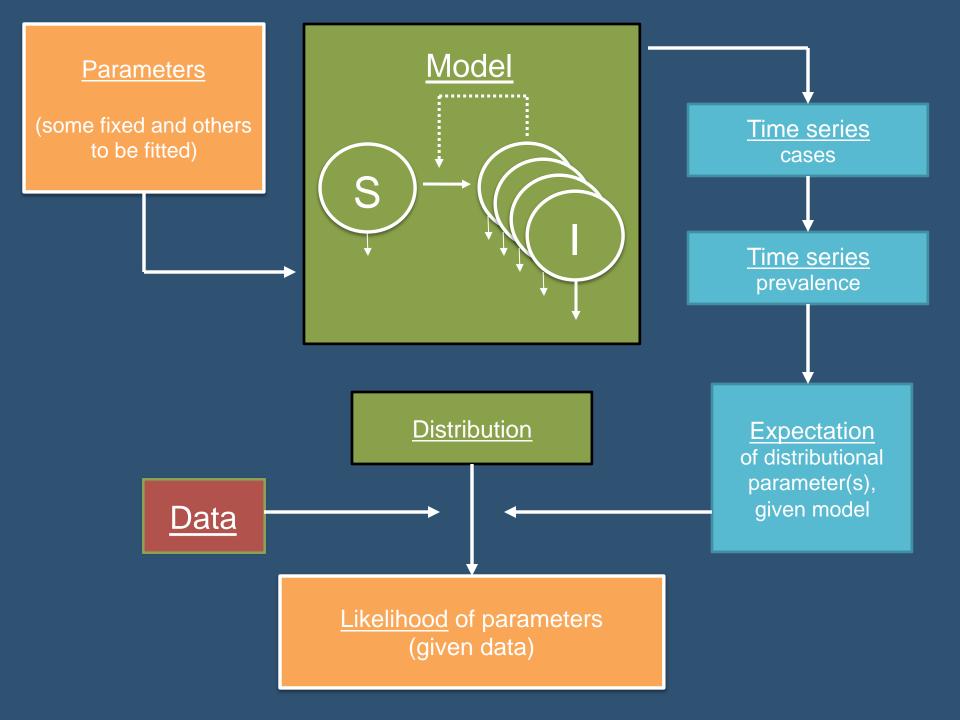












### Collinearity

Independent variables that vary with each other

### Non-Identifiability

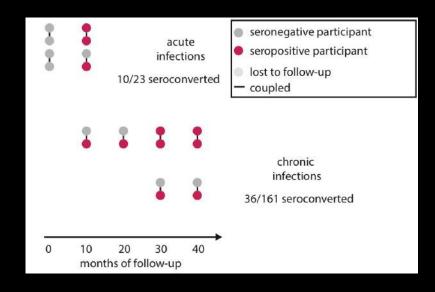
Multiple parameter sets fit about equally well

Can be informative in dynamic models

### Rakai Retrospective Couples Cohort

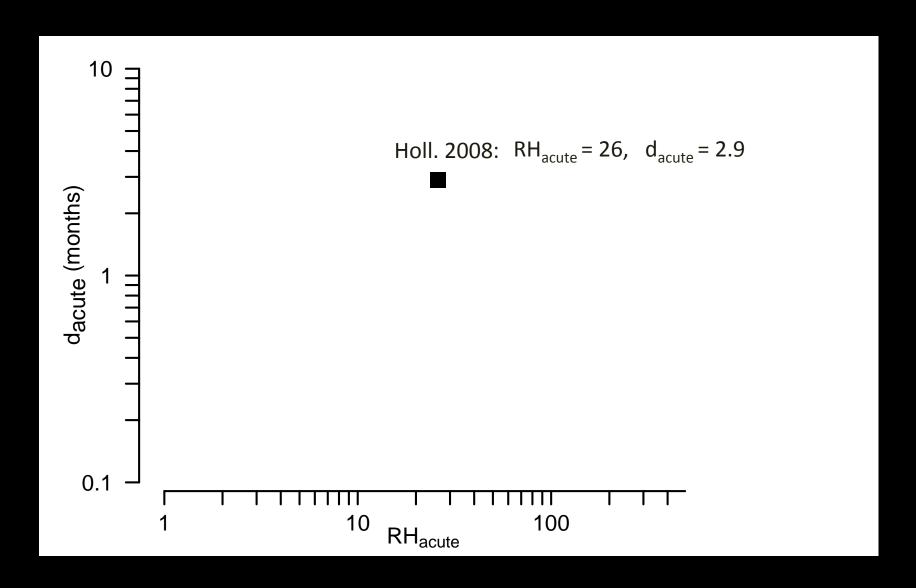
7x as infectious for first 5 month

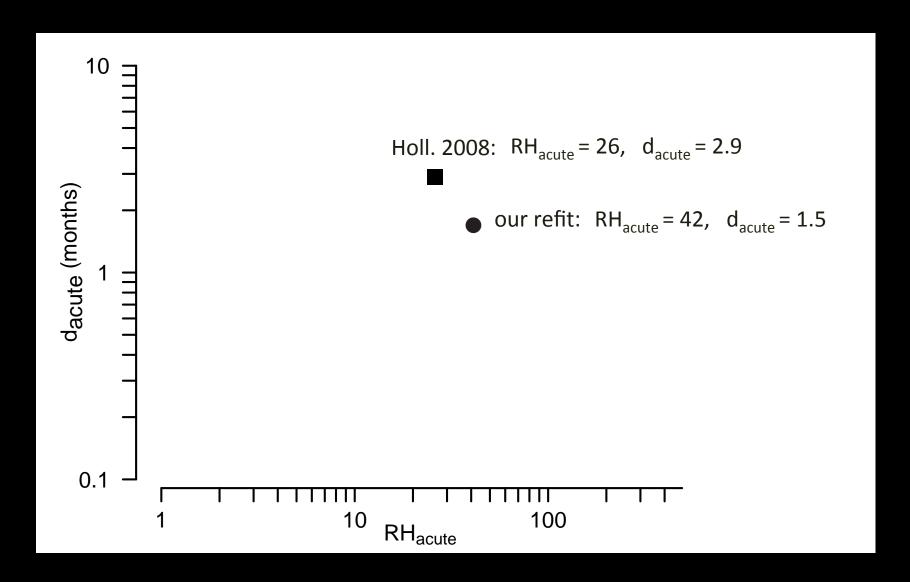
$$EHM_{acute} = 30$$

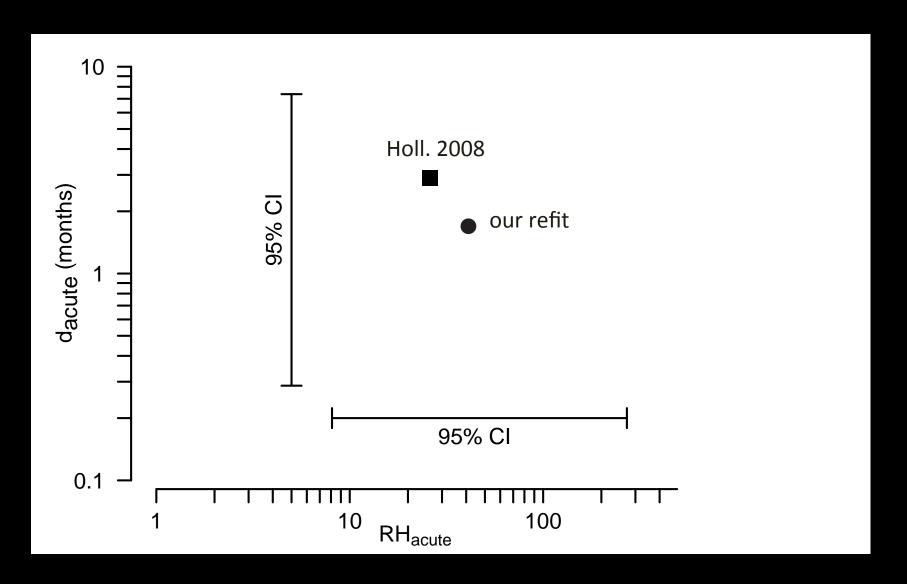


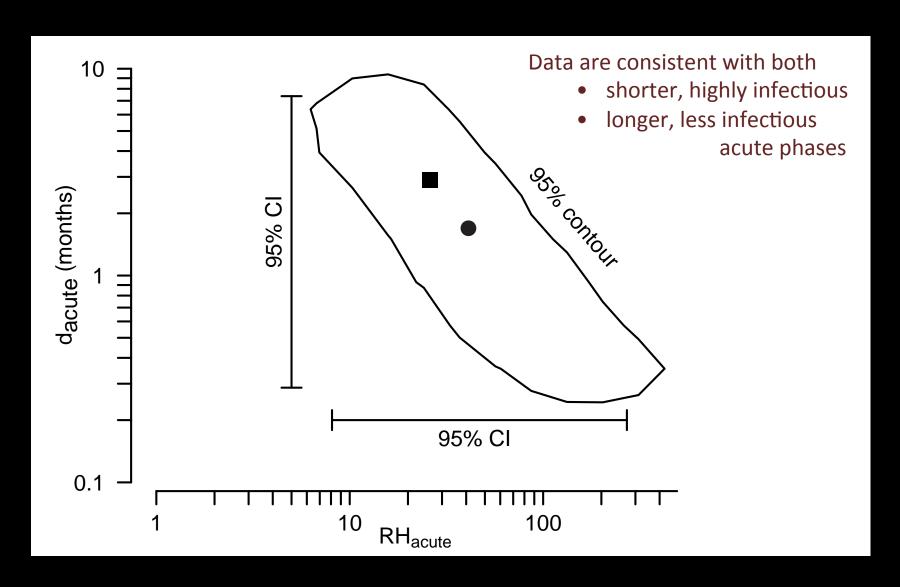
### **Comparing Results**

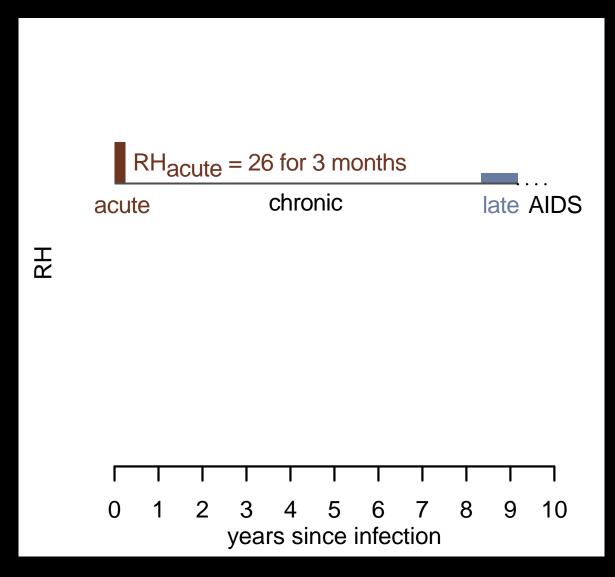
Study	RH <sub>acute</sub>	d <sub>acute</sub> (months)
Wawer et al. (2005)	7.25 (3.05 – 17.3)	5
Hollingsworth et al. (2008)	26	2.9 (1.23-6)











# What is actually Identifiable?

Excess Hazard-Months due to acute phase

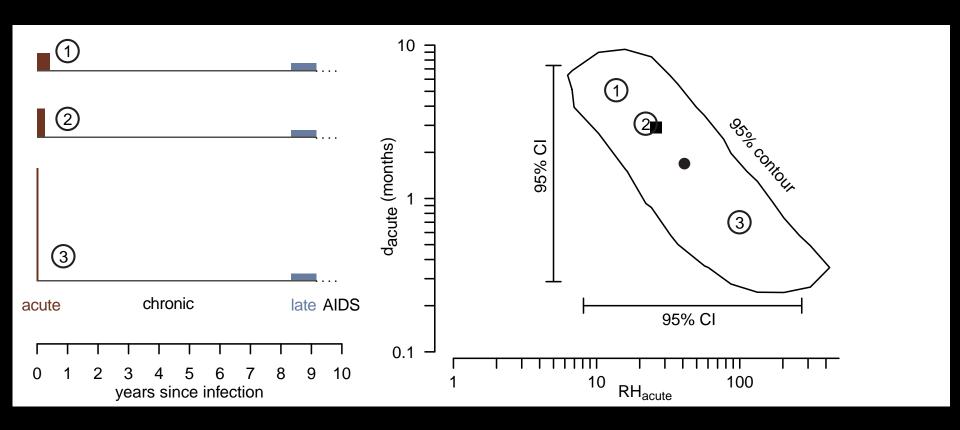
$$EHM_{acute} = (RH_{acute}-1)d_{acute}$$

$$EHM_{acute} = 25*3 = 75$$

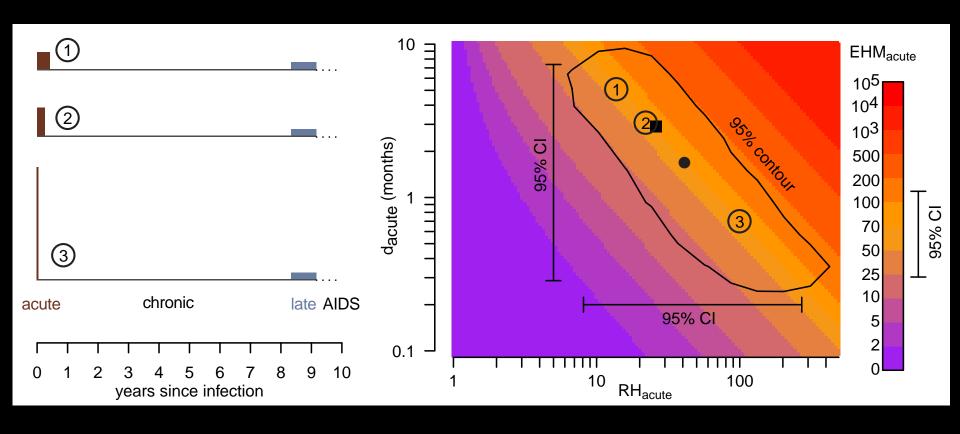
$$EHM_{acute} = 15*5 = 75$$

$$EHM_{acute} = 100*3/4 = 75$$

# Excess Hazard Months (EHM<sub>acute</sub>)



# Excess Hazard Months (EHM<sub>acute</sub>)



RH<sub>acute</sub> and d<sub>acute</sub> are not identifiable from 10-month interval cohorts

We should focus on EHM<sub>acute</sub>

### Formally vs Informally Fitting

Recently, fitting models to data expected

Unnecessary for demonstration of qualitative dynamics

Necessary for

parameter estimation

inference

formal model comparison

### Learning More: Methods for Fitting

Least Squares

Frequentist Maximum Likelihood Fitting

Bayesian Posterior Estimation (usually MCMC)

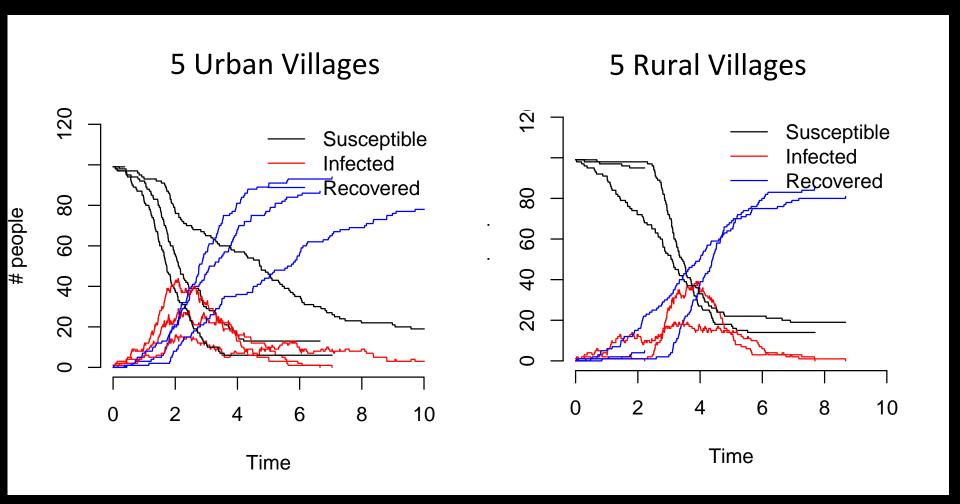
### Simulating to test methods

Create model

Simulate data

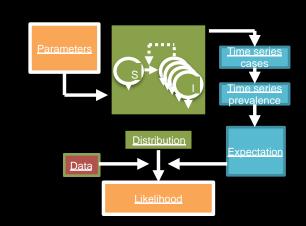
 Can you estimate the inputted parameters for the simulation by fitting?

### Simulating to test methods



### Summary

Why we fit
 parameter estimation
 inference
 formal model comparison



How we fit

Create a probabilistic framework that links our model to data—ie, write a likelihood

 What to consider when fitting Assumptions Overfitting

Goodness of fit Identifiability

## What happened?

#### Harare ANC HIV Data

