# Project Assignment Bayesian Inference 2023-2024 Group 14

# 1st year Master of Statistics Hasselt University

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# 1 Introduction

The Centers for Disease Control and Prevention (CDC) monitors the vaccination rates for Varicella, also known as chickenpox, among young children. Chickenpox is a highly contagious disease caused by the varicella-zoster virus (VZV). The introduction of the chickenpox vaccine has significantly reduced the frequency and severity of the disease. In the United States, the chickenpox vaccine has been included in the standard childhood immunization schedule since the mid-1990s. Since its implementation, there has been a substantial decline in chickenpox cases, hospitalizations, and fatalities. The CDC aims for a vaccination coverage rate of approximately 90% or higher among children to achieve herd immunity and prevent chickenpox outbreaks. The accompanying table summarizes data from a survey conducted in 2020, showing the number of children who received at least one dose of the Varicella vaccine. The data includes the number of vaccinated children compared to the total number of children surveyed, categorized by age and region across five U.S. regions.

# 2 Questions and Answers

# 2.1 Question 1

Investigate the trend in the vaccination coverage with age using the model  $Y_{ij} \sim Binom(\pi_{ij}, N_{ij})$  with

$$logit(\pi_{ij}) = \beta_0 + \beta_1 \cdot Age_j, \tag{1}$$

where i is the location, j is age and  $\pi_{ij}$  is the vaccination coverage. Assume non-informative priors for the parameters to be estimated. Write the code in BUGS language.

#### Answer

```
vaccinemodel <- function() {
  for (i in 1:J) {
    for (j in 1:M) {
       Y[i,j] ~ dbin(pi[i,j], N[i,j])
       logit(pi[i, j]) <- beta0 + beta1 * Age[j]
    }
  }
  # Non-informative priors
  beta0 ~ dnorm(0, 1.0E-2)
  beta1 ~ dnorm(0, 1.0E-2)
}</pre>
```

#### 2.2 Question 2

Question: Run the MCMC method and check convergence of the MCMC chains. Give the details on how you checked convergence.

#### **Answer**

To investigate the trend in the vaccination coverage with age using the model formulated above (in question 1), normal non-informative priors were used. The MCMC method used three Markov chains with both parameters set to 0.1, 0.3 and 0.5 for each chain. All the chains used 2000000 iterations and left out 1000000 burn-in iterations. The analysis was performed in JAGS 4.3.1.

Convergence of the MCMC chains was checked graphically by analysing the trace plots, autocorrelation plots, and running mean plots for all parameters ( $\beta_0$  and  $\beta_1$ ). A formal diagnostic test was also conducted with Gelman-Rubin plots and Heidelberger and Welch's convergence diagnostic.

**Trace plots:** Monitoring the Markov chains jointly, the trace plots in figure 1 exhibited rapid mixing for all parameters and therefore indicated that the posterior distribution was

rapidly explored. The stable pattern shown for all parameters indicated good chain mixing and therefore stationarity.

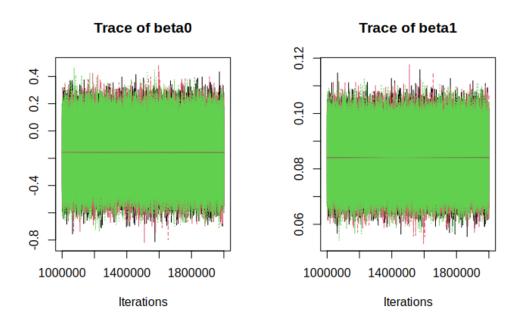


Figure 1: Traceplots for  $\beta_0$  and  $\beta_1$ 

**Autocorrelation plots:** The joint autocorrelation plots in figure 2 for the Markov chains showed a slow mixing for both  $\beta_0$  and  $\beta_1$  but the autocorrelation got to around zero as the number of iterations increased. Higher iterations showed stationarity which indicated independent sampling of the regression parameters.

**Running-mean plots:** A stable behavior for all the parameters was shown by the running-mean plots (figure 3) which suggested stationarity.

Geweke diagnostic: The Geweke diagnostic compared the mean and variance of two separate segments of the chain to detect any significant differences. With convergence, the mean and variance should be similar across different segments. The diagnostic computed a z-score by comparing the means of the two segments, standardized by the standard deviation of their difference. Almost all the Z-values for  $\beta_0$  and  $\beta_1$  were inside the [-1.96, 1.96] interval indicating stationarity (figures 4, 5 and 6). This confirmed the behavior seen in the trace plot as being stable enough to conclude stationarity.

Heidelberger-Welch (HW) diagnostic: We formally assessed convergence of  $\beta_0$ ,  $\beta_1$  using the Heidelberg and Welch diagnostic (HW) tests. HW tests on a single chain were carried out in two steps. First, stationarity was checked to assess whether the trace of the simulated values were stochastically generated from a stationary process. Secondly, accuracy was determined to assesses the adequacy of the remaining part of the chain, estimating the posterior mean with desired precision. The HW diagnostic was applied with the R program heidel.diag with default settings yielding a 95% confidence interval. The results in table

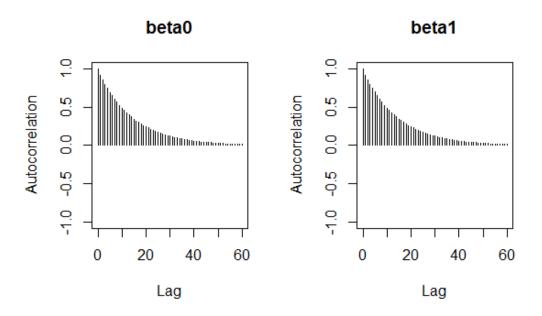


Figure 2: Autocorrelation plot of  $\beta_0$  and  $\beta_1$ 

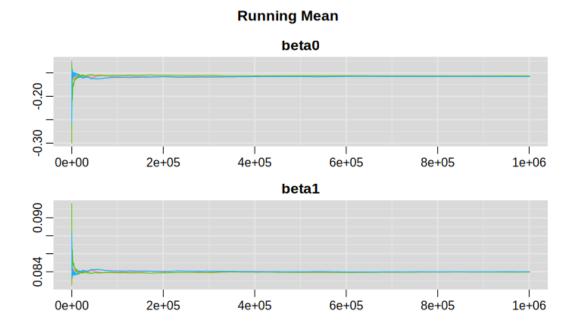


Figure 3: Running-mean plots for  $\beta_0$  and  $\beta_1$ 

1 showed that stationary and Halfwidth tests were passed for  $\beta_0$  (p=0.597, p=0.614 and, p=0.754 for chain 1,2 and 3 respectively) and  $\beta_1$  (p=0.599, p=0.620, and p=0.756 for chain 1,2 and 3 respectively) indicating that there was convergence. Therefore, the length of the

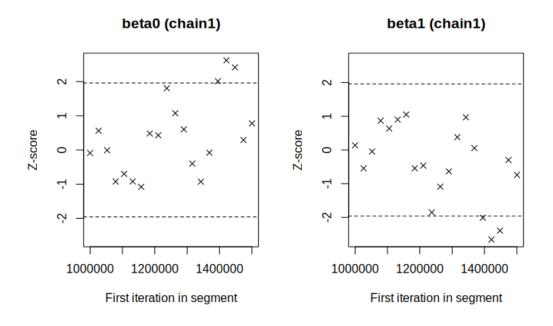


Figure 4: Geweke diagnostic plots for  $\beta_0$  and  $\beta_1$  in chain 1

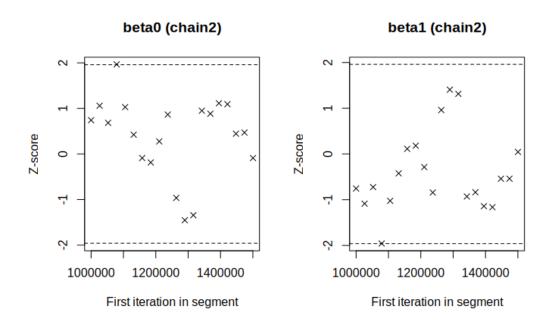


Figure 5: Geweke diagnostic plots for  $\beta_0$  and  $\beta_1$  in chain 2

chains and the number of iterations were sufficient for the stationary and halfwidth tests respectively.

**Brooks–Gelman–Rubin** (**BGR**) **diagnostic:** The Gelman-Rubin diagnostic formally tests for convergence by comparing the variances of multiple chains of MCMC simulations to

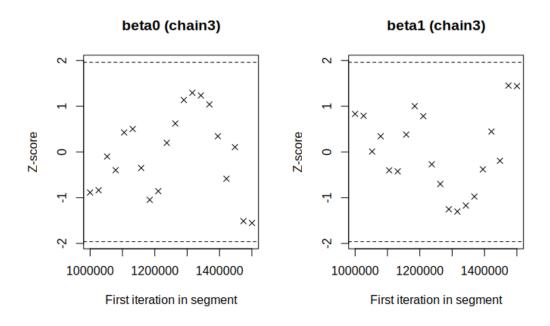


Figure 6: Geweke diagnostic plots for  $\beta_0$  and  $\beta_1$  in chain 3

the variance within each chain. Convergence was achieved when the variances are similar such that the ratio of these variances was 1 or close to 1. For both  $\beta_0$  and  $\beta_1$ ,  $\hat{R}_c = 1.00$  with 97.5% upper bound equal to 1. This showed good mixing for both regression parameters. The estimated potential scale reduction factor (PSRF) in the study was 1 indicating that convergence is achieved. The graphical plot of BGR (figure 7) showed instant stabilization for  $\beta_0$  and  $\beta_1$ . No further iterations were necessary to achieve stationarity.

Table 1: Heidelberger-Welch test for analyzing vaccine coverage with age

	Stationary test				Halfwidth test		
Chain	Parameter	Test	Iteration	p-value	test	Mean	Halfwidth
chain1							
	$oldsymbol{eta}_0$	passed	1	0.597	passed	-0.157	1.38e-03
	$oldsymbol{eta}_1$	passed	1	0.599	passed	0.084	6.67e-05
chain2							
	$oldsymbol{eta}_0$	passed	1	0.614	passed	-0.157	1.13e-03
	$oldsymbol{eta}_1$	passed	1	0.620	passed	0.084	6.5e-05
chain3							
	$oldsymbol{eta}_0$	passed	1	0.754	passed	-0.158	1.34e-03
	$oldsymbol{eta}_1$	passed	1	0.756	passed	0.084	6.54e-05

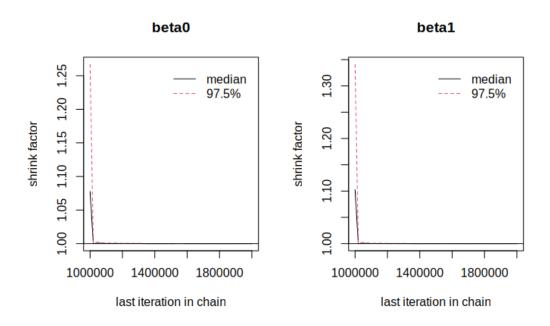


Figure 7: Brooks–Gelman–Rubin (BGR) diagnostic plot of  $\beta_0$  and  $\beta_1$ 

# 2.3 Question 3

Make a plot of the posterior densities and give summary measures of the posterior distributions of the parameters of interest. Interpret the results.

#### **Answer**

The summary statistics of the posterior measured as displayed in table 2 showed the mean, median, standard deviation and the HPD interval. There was a positive association between vaccination coverage and age ( $\beta_1$ =0.0840). With a probability of 95%, we expected the parameter estimate of  $\beta_0$  and  $\beta_1$  to have a 95% HPD interval of [-0.4137, 0.0965] and [0.0716, 0.0963] respectively given the evidence provided by the observed data and the prior. The time-series standard error was much smaller than the standard deviation indicating that the parameter estimates were reliable and robust. It also indicated that the data points were closely clustered around the mean, indicating a stable and predictable pattern over time. The mean and median of  $\beta_0$  and  $\beta_1$  were almost similar indicating symmetry and that its posterior was normally distributed. This observation was reiterated by the posterior density plots (figure 8) which showed that the posterior parameter estimates ( $\beta_0$  and  $\beta_1$ ) which result from the product of a non-informative prior and likelihood followed a normal distribution.

Table 2: Summary statistics of posterior measures

Parameter	Mean	Stdev	Median	Time-series SE	HPD interval
$\beta_0$	-0.1573	0.1302	-0.1570	3.983e-04	[-0.4137, 0.0965]
$oldsymbol{eta}_1$	0.0840	0.0063	0.0839	1.935e-05	[0.0716, 0.0963]

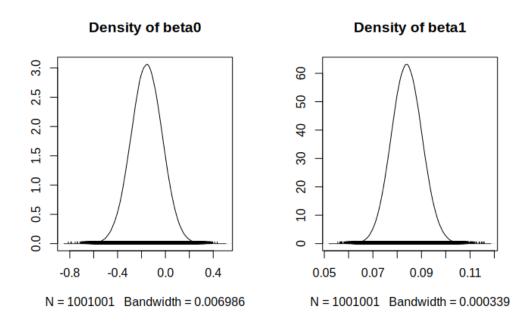


Figure 8: Density plots of posterior measures  $\beta_0$  and  $\beta_1$ 

# 2.4 Question 4

Question: The target vaccination coverage is 90%. Calculate, for each age group, the posterior probability that the target is reached (i.e. the posterior probability that the vaccination coverage is equal to or above 90%).

#### Answer:

In this section, we analyzed the varicella vaccination coverage using Bayesian statistics to determine the posterior probability that the vaccination coverage reached at least 90% for various age groups. This analysis was essential for understanding how the likelihood of achieving the target vaccination coverage changed with age.

#### **Model Specification**

We began by specifying a Bayesian logistic regression model using JAGS (Just Another Gibbs Sampler). The model assumed that the logit (log-odds) of the vaccination probability was a linear function of age. We ran 2 million iterations with 1 million burn in, generating a sample for each parameter. Note that MCMC settings were similar as those defined in question 2 and 3 above. Next, we defined the age groups of interest and calculated the posterior probability that the vaccination coverage was at least 90% for each age group. The resulting probability vector for the four age groups was [0, 0, 0, 1] for ages of 13, 19, 24 and 35 months respectively. This indicated the posterior probability that the vaccination coverage met or exceeded 90% for each age group. Specifically, it was very unlikely for age groups of 13, 19, and 24 months old to have at least 90% vaccination coverage rate (0% probability). On the other hand, it was almost certain that the 35-month-old group would have vaccination coverage of 90% or above.

# 2.5 Question 5

Question: Compare the vaccination coverage at each age group with the vaccination coverage at 13 months of age. Do this by calculating the ratio of the vaccination coverage. Interpret the results.

#### **Answer:**

In this analysis, we aimed to compare vaccination coverage for different age groups with vaccination coverage for 13 months of age. The goal was to calculate the coverage ratios for each age group relative to the coverage at 13 months and interpret these ratios using a Bayesian approach.

We calculated the vaccination coverage probabilities from logit (expit) function for each age group. Then we calculated the coverage ratios for each age group compared to the coverage at 13 months by dividing the coverage probabilities at each age by the coverage probability at 13 months. We computed summary statistics (mean and 95% equal tail credible interval) for the coverage ratios. The output summary provided the mean and the 95% credible interval for each age group's coverage ratios relative to the 13-month group's.

**13-month Coverage Ratio (Baseline):** The ratio is exactly 1, serving as the reference for

Table 3: Ratio of vaccination coverage relative to 13 month

There ex items of the community of the incomm					
Summary statistics	13 months	19 months	24 months	35 months	
Mean	1	1.13	1.21	1.31	
2.5 <sup>th</sup> percentile	1	1.10	1.17	1.26	
97.5 <sup>th</sup> percentile	1	1.15	1.25	1.36	

other age groups.

**19-month Coverage Ratio:** The coverage ratio is on average 13% higher than the 13-month baseline, with a 95% credible interval ranging from 1.10 to 1.15.

**24-month Coverage Ratio:** The coverage ratio is on average 21% higher than the 13-month baseline, with a 95% credible interval ranging from 1.17 to 1.25.

**35-month Coverage Ratio:** The coverage ratio is on average 31% higher than the 13-month baseline, with a 95% credible interval ranging from 1.26 to 1.36.

# 2.6 Question 6

In this question, we modelled the observed vaccination converage as a function of Age using a non-linear normal regression model (logistic growth model) as follows:

$$r_{ij} = \alpha + \frac{\beta}{1 + e^{-\gamma(\mathrm{Age}_j - \delta)}} + \varepsilon_{ij}$$

where:

- $r_{ij} = \frac{Y_{ij}}{N_{ij}}$  is the observed coverage.
- α: Baseline vaccination coverage.
- $\beta$ : Maximum effect of age on increasing coverage.
- $\gamma$ : Steepness of the age-related increase in coverage.
- $\delta$ : Age at which the increase in coverage is most rapid.
- $\varepsilon_{ij} \sim N(0, \sigma^2)$ : Random variability in coverage not explained by age

#### The BUGS to model this is as follows

```
cat("model
{
  for (i in 1:J) {
    for (j in 1:M) {
     Y[i,j] ~ dbin(p[i,j], N[i,j])
     p[i,j] <- alpha + beta / (1 + exp(-gamma * (Age[j] - delta)))</pre>
```

```
# Priors
alpha ~ dbeta(1, 1) # Non-informative prior for base level
beta ~ dgamma(0.01, 0.01) # Non-informative prior for positive increment
gamma ~ dbeta(1, 1) # Non-informative prior for positive growth rate
delta ~ dnorm(0.01, 0.01) # Non-informative prior
}", file = "varicella_BUGS.txt")
}
```

We chose different non-informative priors for different parameters since we wanted our priors to be conjugate priors, thereby speeding up the converge of our MCMC chains.

# Check convergence of the MCMC chains

The parameters in our model were highly correlated, therefore we had to increase the number of iterations, and increased the burn in phase so that our MCMC chains could converge. Specifically, we had 6 million iterations, with 5 million burins. We checked for our convergence using both graphical and hypothesis-testing methods.

First of all, our trace plot (figure 9) showed that for all four parameters, the 3 MCMC chains mingled, suggesting convergence was achieved.

Similarly, our running mean plot (figure 10 illustrated that the mean of each parameter across the entire 3 chains stabilized as the number of iterations increased. This also suggested that our MCMC chains have reached a stationary distribution.

Another tool for checking convergence that we looked at was the plot showing the test statistics of Geweke's Diagnostics (figure 11). We saw that all the test statistics of all parameters in all 3 chains fell within the regions between -1.96 and 1.96. This means that, for all our parameters, the means at the first 10% of every chain were not significantly different from the ones at the latter 50% of the chain. This was at the 5% significance level. This test provided us with more evidence that our convergence has been reached.

Finally, we looked at Gelman diagnostics. Specifically, we looked at the scale reduction factors for each parameter. We wanted to achieve a factor of 1, which means that between chain variance and within-chain variance are equal, thus convergence is obtained. In our study, this was the case, as is shown by both our table 4 and figure 12

All of the diagnostics we looked at brought us to the same conclusion that our MCMC chains with 6 million iterations and 5 million burin have reached the convergence.

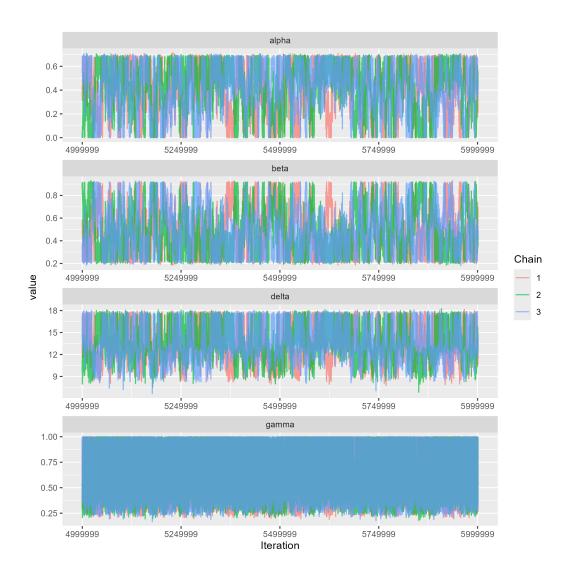


Figure 9: Trace plot log growth model

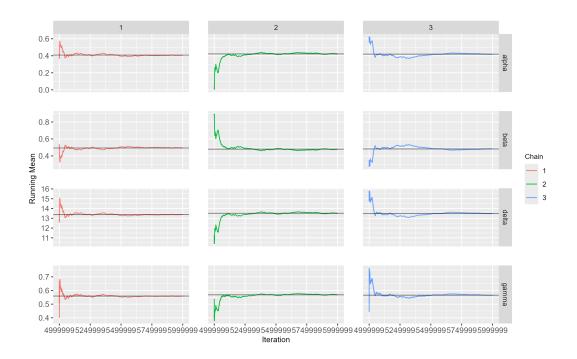


Figure 10: Running mean log growth model

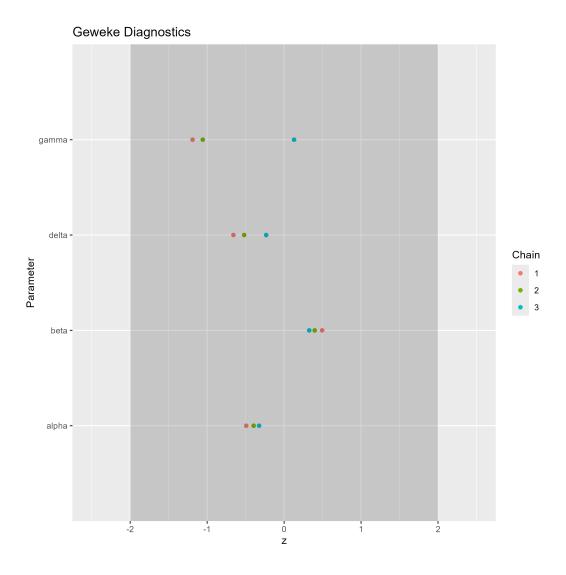


Figure 11: Geweke diagnostic plot log growth model

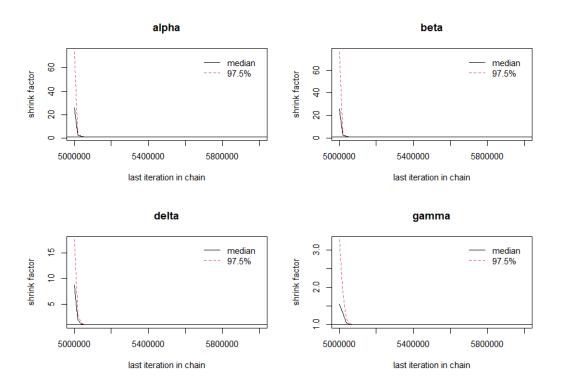


Figure 12: Gelman diagnostic plot log growth model

Table 4: Potential scale reduction factors and multivariate PSRF

Parameter	Point Est.	Upper C.I.
alpha	1	1
beta	1	1
delta	1	1
gamma	1	1
Multivariate	1	

# 2.7 Question 7

Make a plot of the estimated coverage as a function of age, including the uncertainty on the estimates. Include also the observed vaccination proportion in the plot.

# **Answer:**

From question 6, we had the estimates of all our parameters across all the 3 MCMC chains. These estimates allowed us to calculate the prediction of vaccination coverage at four different age groups. These included 13 months, 19 months, 24 months, and 35 months. We plotted the vaccination coverage prediction in each age group together with the observed coverage rate per location in figure 13. Our prediction included a solid line demonstrating the median coverage, while the shaded green area illustrated the 95% equal-tailed prediction interval.

The observed coverage rate per age at different regions was presented with points of different colors.

Overall, our model predicted the median observed vaccination coverage well, whereas our 95% prediction interval could not capture all the observed vaccination coverage.

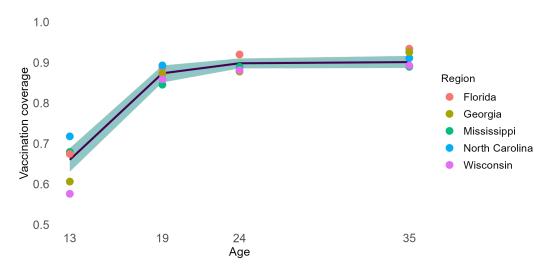


Figure 13: Vaccination coverage by age group

# 2.8 Question 8

Predict the number of vaccinated children at the age of 15 months (per location).

#### **Answer:**

Similarly to question 7, we used our MCMC chains from question 6 to predict vaccination coverage at the age of 15 months. We then derived the uncertainty estimates of the coverage, which allowed us to predict the number of vaccinated children at 15 months of age per location. Our results are shown in table 5.

Overall, North Carolina had the highest coverage prediction while the lowest numbers were at Mississippi and Wisconsin.

Table 5: Predicted number of vaccinated children by location

Location	Median	95% Prediction Interval
Mississippi	137	125–148
Florida	161	146–173
North Carolina	212	193–229
Georgia	143	130–154
Wisconsin	134	122–145

# 3 Appendix - R/BUGS code

# **3.0.1 Question 1:**

```
vaccinemodel <- function() {
for (i in 1:J) {
    for (j in 1:M) {
        Y[i,j] ~ dbin(pi[i,j], N[i,j])
        logit(pi[i, j]) <- beta0 + beta1 * Age[j]
    }
}

**Mon-informative priors
beta0 ~ dnorm(0, 1.0E-2)
beta1 ~ dnorm(0, 1.0E-2)
}</pre>
```

# **3.0.2** Questions 2 and 3:

```
library("R2OpenBUGS")
2 library("coda")
3 library("readr")
4 library("mcmcplots")
  varicella_vaccine_coverage <- read_csv("varicella_vaccine_coverage.csv")</pre>
  # convert first two columns to factors
  varicella_vaccine_coverage$Geography <-</pre>
      as.factor(varicella_vaccine_coverage$Geography)
 varicella_vaccine_coverage$Age <- as.factor(varicella_vaccine_coverage$Age)</pre>
  # change Age to Age_former
  varicella_vaccine_coverage$Age_former <- varicella_vaccine_coverage$Age</pre>
 # Add Age column
  Age \leftarrow rep(c(13, 19, 24, 35), 5)
  varicella_vaccine_coverage$Age <- Age</pre>
  ## write the BUGS program and put it in a txt file
  cat("model
  {
    for (i in 1:J) {
     for (j in 1:M) {
       Y[i,j] ~ dbin(pi[i,j], N[i,j])
        logit(pi[i, j]) <- beta0 + beta1 * Age[j]</pre>
      }
```

```
}
26
27
     # Priors
     beta0 ~ dnorm(0, 1.0E-2) # Non-informative prior for base level
     beta1 ~ dnorm(0, 1.0E-2) # Non-informative prior for
   }", file = "varicella_BUGS.txt")
   ## prepare the data and collect them into the object 'my.data'
   # Prepare the data
   Y <- matrix(varicella_vaccine_coverage$Vaccinated, nrow = 5, ncol = 4,
       byrow = TRUE)
  N <- matrix(varicella_vaccine_coverage$Sample_Size, nrow = 5, ncol = 4,
       byrow = TRUE)
   Age <- unique(varicella_vaccine_coverage$Age)
   my_data <- list(</pre>
     J = nrow(Y),
     M = ncol(Y),
     Y = Y,
     N = N,
     Age = Age
   )
45
   my.inits <- list(</pre>
     list(beta0 = 0.5,
          beta1 = 0.5,
          .RNG.name = "base::Wichmann-Hill",
50
           .RNG.seed = 1),
51
     list(beta0 = 0.3,
          beta1 = 0.3,
53
          .RNG.name = "base::Wichmann-Hill",
           .RNG.seed = 2),
     list(beta0 = 0.1,
         beta1 = 0.1,
          .RNG.name = "base::Wichmann-Hill",
          .RNG.seed = 3))
   # Parameters to monitor
   parameters <- c("beta0", "beta1")</pre>
   # Run the MCMC
   library(rjags)
   jags_model <- jags.model(file = 'varicella_BUGS.txt',</pre>
                           data = my_data,
67
                           inits = my.inits,
68
```

```
n.chains = 3)
69
70
   coverage.sim <- coda.samples(jags_model,</pre>
                               parameters,
                               n.iter = 2000000,
73
                               thin = 1)
   # account for burnin
   burnin <- 1000000
   coverage.sim <- window(coverage.sim, start = burnin)</pre>
80
   # Posterior summary statistics
   summary(coverage.sim)
   ## Produce general summary of obtained MCMC sampling
   #print(coverage.sim)
   plot(coverage.sim)
   ## Convert coverage.mcmc into mcmc.list for processing with CODA
   coverage.mcmc <- as.mcmc.list(coverage.sim)</pre>
   # summary and HPDinterval of mcmc
   summary(coverage.mcmc)
   HPDinterval(coverage.mcmc) # HPD intervals of all parameters
94
   # Check convergence - autocorrelation, running-mean plots
95
   # trace plots
   plot(coverage.mcmc, trace = TRUE, density = FALSE)
   # autocorrelation
   acfplot(coverage.mcmc[,1:2])
   autocorr.plot(coverage.mcmc)
102
103
   traceplot(coverage.mcmc) # trace plots
104
105
   # running-mean
106
   rmeanplot(coverage.mcmc, plot.title = "Running Mean")
107
108
   # Check convergence - Gelman-rubin plots
   gelman.diag(coverage.mcmc)
111
   gelman.plot(coverage.mcmc)
   ## Heidelberger and Welch's convergence diagnostic
```

```
heidel.diag(coverage.mcmc, eps=0.1, pvalue=0.05)
114
115
   # Brooks--Gelman--Rubin (BGR) diagnostic
116
   gelman.diag(coverage.mcmc, confidence = 0.95, transform=FALSE,
       autoburnin=TRUE,
                     multivariate=TRUE)
119
   gelman.plot(coverage.mcmc)
120
   # History plot & posterior distributions
   plot(coverage.mcmc, trace = TRUE, density = FALSE)
   plot(coverage.mcmc, trace = FALSE, density = TRUE)
125
   # combined HPD interval for 3 chains
   library(MCMCvis)
128
   MCMCsummary(coverage.mcmc,
129
               params = 'all', ISB = FALSE, exact = TRUE, Rhat = TRUE, n.eff =
130
                   TRUE.
               HPD = TRUE, hpd_prob = 0.95, round = 4)
   HPDinterval(coverage.mcmc) # HPD intervals of all parameters
133
   # posterior densities
   plot(coverage.mcmc, trace = FALSE, density = TRUE)
   summary(coverage.mcmc) # summary statistics
```

# 3.0.3 Questions 4

```
coverage.sim_04_1_2_mil <- window(coverage.sim_04, start = burnin)</pre>
19
   # Convert the MCMC samples to a ggs object for easier manipulation
   out.ggs_1_2_mil <- ggs(coverage.sim_04_1_2_mil)</pre>
   # Extract samples for the intercept parameter (beta0)
   beta0_samples <- out.ggs_1_2_mil[out.ggs_1_2_mil$Parameter == "beta0",
       "value"]
25
   # Extract samples for the slope parameter (beta1)
   beta1_samples <- out.ggs_1_2_mil[out.ggs_1_2_mil$Parameter == "beta1",</pre>
       "value"]
   # Check if the number of samples for beta0 and beta1 match
   n_samples <- length(beta0_samples)</pre>
   if (length(beta1_samples) != n_samples) {
     stop("Mismatch in number of samples for beta0 and beta1")
   }
33
34
   # Define the age groups for which coverage probabilities will be calculated
   Age \leftarrow c(13, 19, 24, 35)
   # Define the expit function (logistic function) to transform log-odds to
       probabilities
   expit <- function(x) {</pre>
     return(exp(x) / (1 + exp(x)))
   }
41
42
   # Initialize a data frame to store the coverage probabilities
   coverage_probabilities <- data.frame(Age = Age, Probability =</pre>
       numeric(length(Age)))
45
   # Calculate the coverage probabilities for each age group
   for (i in 1:length(Age)) {
     age <- Age[i]
48
     coverage <- expit(beta0_samples + beta1_samples * age)</pre>
     prob_gt_09 <- mean(coverage >= 0.9)
     coverage_probabilities$Probability[i] <- prob_gt_09</pre>
   }
52
  # Print the coverage probabilities for each age group
   print(coverage_probabilities)
```

# **3.0.4 Question 5**

```
coverage.sim <- coda.samples(jags_model,</pre>
                              parameters,
                              n.iter = 2000000,
                               thin = 1
5 burnin <- 1000000
  coverage.sim <- window(coverage.sim, start = burnin)</pre>
   coverage.sim_04 <- coverage.sim</pre>
   # Set the starting point for the simulation window (after burn-in period)
   coverage.sim_04_2_4_mil <- window(coverage.sim_04, start = burnin)</pre>
   # Convert the MCMC simulation object to a ggs object for easier
       manipulation
   out.ggs_2_4_mil <- ggs(coverage.sim_04_2_4_mil)</pre>
   # Extract samples for the intercept parameter (beta0) from the ggs object
   beta0_samples <- out.ggs_2_4_mil[out.ggs_2_4_mil$Parameter == "beta0",
       "value"]
16
   # Extract samples for the slope parameter (beta1) from the ggs object
   beta1_samples <- out.ggs_2_4_mil[out.ggs_2_4_mil$Parameter == "beta1",
       "value"]
   # Define the ages at which coverage is to be calculated
   Age \leftarrow c(13, 19, 24, 35)
   # Define the expit function (logistic function) to transform log-odds to
       probabilities
   expit <- function(x){</pre>
     return (\exp(x) / (1 + \exp(x)))
  }
26
  # Calculate coverage for each age using the samples of beta0 and beta1
   coverage <- sapply(Age, function(age) {</pre>
     expit(beta0_samples + beta1_samples * age)
   })
31
   # Convert the list of coverage values to a matrix, where each column
33
       corresponds to an age
   coverage <- matrix(unlist(coverage), ncol = length(Age), byrow = FALSE)</pre>
34
  # Extract coverage values at 13 months (the first column of the matrix)
   coverage_13 <- coverage[, 1]</pre>
  # Calculate the ratios of coverage at each age to the coverage at 13 months
40 ratios <- sweep(coverage, 1, coverage_13, "/")</pre>
```

```
41
   # Summarize the ratios by calculating the mean and 95% confidence interval
       for each age
   summary_ratios <- apply(ratios, 2, function(x) {</pre>
     c(mean = mean(x), quantile(x, c(0.025, 0.975)))
   })
  # Print the summary of the ratios
48 print(summary_ratios)
   3.0.5 Question 6:
  ## load the data
   varicella_vaccine_coverage <- read_csv("varicella_vaccine_coverage.csv")</pre>
   # convert first two columns to factors
   varicella_vaccine_coverage$Geography <-</pre>
       as.factor(varicella_vaccine_coverage$Geography)
  varicella_vaccine_coverage$Age <- as.factor(varicella_vaccine_coverage$Age)</pre>
   # change Age to Age_former
   varicella_vaccine_coverage$Age_former <- varicella_vaccine_coverage$Age</pre>
  # Add Age column
  Age \leftarrow rep(c(13, 19, 24, 35), 5)
   varicella_vaccine_coverage$Age <- Age</pre>
   ## write the BUGS program and put it in a txt file
   cat("model
   {
     for (i in 1:J) {
      for (j in 1:M) {
        Y[i,j] ~ dbin(p[i,j], N[i,j])
        p[i,j] \leftarrow alpha + beta / (1 + exp(-gamma * (Age[j] - delta)))
       }
     }
23
     # Priors
24
     alpha ~ dbeta(1, 1) # Non-informative prior for base level
25
     beta ~ dgamma(0.01, 0.01) # Non-informative prior for positive increment
     gamma ~ dbeta(1, 1) # Non-informative prior for positive growth rate
     delta ~ dnorm(0.01, 0.01) # Non-informative prior
   }", file = "varicella_BUGS.txt")
   ## prepare the data and collect them into the object 'my.data'
```

32 # Prepare the data

```
Y <- matrix(varicella_vaccine_coverage$Vaccinated, nrow = 5, ncol = 4,
       byrow = TRUE)
  N <- matrix(varicella_vaccine_coverage$Sample_Size, nrow = 5, ncol = 4,
       byrow = TRUE)
   Age <- unique(varicella_vaccine_coverage$Age)</pre>
   my_data <- list(</pre>
     J = nrow(Y),
     M = ncol(Y),
     Y = Y,
     N = N,
     Age = Age
  )
43
   ## set the initial values
   # Initial values
   my.inits <- list(</pre>
     list(alpha = 0.5,
          beta = 0.5,
50
          gamma = 0.5,
51
          delta = 20,
          .RNG.name = "base::Wichmann-Hill",
          .RNG.seed = 1),
     list(alpha = 0.3,
          beta = 0.3,
          gamma = 0.3,
57
          delta = 30,
          .RNG.name = "base::Marsaglia-Multicarry",
          .RNG.seed = 2),
60
     list(alpha = 0.4,
          beta = 0.4,
          gamma = 0.4,
          delta = 25,
64
          .RNG.name = "base::Super-Duper",
65
          .RNG.seed = 3))
67
   ## collect the parameters to be monitored
   # Parameters to monitor
   parameters <- c("alpha", "beta", "gamma", "delta")</pre>
   ## run the MCMC chain
   # Run the MCMC
   jags_model <- jags.model(file = 'varicella_BUGS.txt',</pre>
                           data = my_data,
```

```
inits = my.inits,
76
                           n.chains = 3)
77
   coverage.sim_02 <- coda.samples(jags_model,</pre>
                                  parameters,
                                  n.iter = 6000000,
                                  thin = 1
83
   coverage.sim_02_5_6_mil <- window(coverage.sim_02, start = 5000000)</pre>
84
85
   # Posterior summary statistics
   summary(coverage.sim_02_5_6_mil)
   ### check with ggmcmc
   # convert from mcmc.list to a dataset
   out.ggs_5_6_mil_thin1 <- ggs(coverage.sim_02_5_6_mil)
92
93
   # create traceplot object
   trace_plot_5_6_mil_thin1 <- ggs_traceplot(out.ggs_5_6_mil_thin1)</pre>
   # make a running mean plot
   running_mean_5_6_mil_thin1 <- ggs_running(out.ggs_5_6_mil_thin1) +</pre>
     theme(axis.text = element_text(size = 10),
           axis.title = element_text(size = 10),
100
           legend.text = element_text(size = 9),
101
           legend.title = element_text(size = 9),
102
           strip.text = element_text(size = 9),
103
           panel.spacing = unit(1, "lines"))
104
105
   geweke.plot_5_6_mil_thin1 <- ggs_geweke(out.ggs_5_6_mil_thin1)</pre>
106
107
   ### Convergence test
   # shrunken factor
109
   gelman.diag(coverage.sim_02_5_6_mil, autoburnin = FALSE, transform = TRUE)
   # plot this diagnostic
   gelman.plot(coverage.sim_02_5_6_mil, autoburnin = FALSE)
   3.0.6 Question 7:
   # use out.ggs_5_6_mil_thin1 for this question (see also question 6)
   # convert into a wide format
   out.ggs_5_6_mil_thin1_wide <- out.ggs_5_6_mil_thin1 |>
     pivot_wider(names_from = "Parameter", values_from = "value")
```

```
# rep out.ggs_5_6_mil_thin1_wide 4 times
   out.ggs_5_6_mil_thin1_wide <- rbind(out.ggs_5_6_mil_thin1_wide) |>
     rbind(out.ggs_5_6_mil_thin1_wide) |>
     rbind(out.ggs_5_6_mil_thin1_wide) |>
    rbind(out.ggs_5_6_mil_thin1_wide)
   # add Age, which has 4 values (13, 19, 24, 35), each is repeated nrow times
   out.ggs_5_6_mil_thin1_wide <- out.ggs_5_6_mil_thin1_wide |>
13
     mutate(Age = rep(c(13, 19, 24, 35), nrow(out.ggs_5_6_mil_thin1_wide)/4))
   # add coverage column, which equals: alpha + beta / (1 + exp(-gamma * (Age
       - delta)))
   out.ggs_5_6_mil_thin1_wide <- out.ggs_5_6_mil_thin1_wide |>
     mutate(coverage = alpha + beta / (1 + exp(-gamma * (Age - delta))))
19
   # summary statistics
20
   coverage_predict <- out.ggs_5_6_mil_thin1_wide |>
     group_by(Age) %>%
22
     summarize(median = median(coverage),
23
              min = quantile(coverage, 0.025),
24
              max = quantile(coverage, 0.975),
              .groups = 'drop')
   # add coverage column to varicella_vaccine_coverage dataset, which is
       Vaccinated/Sample_size
   varicella_vaccine_coverage <- varicella_vaccine_coverage |>
     mutate(coverage = Vaccinated/Sample_Size)
30
   # add coverage and Geography columns from varicella_vaccine_coverage to
32
       coverage_predict dataset matching by Age
   coverage_predict_observed <- coverage_predict |>
     left_join(varicella_vaccine_coverage |> select(Age, Geography, coverage),
        by = "Age")
35
   # plot the observed and predicted coverage
   coverage_by_age <- ggplot(data = coverage_predict_observed, aes(x = Age, y</pre>
       = median)) +
     geom_ribbon(aes(ymin = min, ymax = max), fill = "#21918c", alpha = 0.5) +
38
    geom_line(color = "#440154", size = 0.8) +
     geom_point(aes(y = coverage, color = Geography)) +
    ylab("Vaccination coverage") +
     scale_x_continuous(limits = c(12, 36), breaks = c(13, 19, 24, 35), expand
         = c(0, 0.01)) +
```

#### **3.0.7 Question 8:**

```
# prediction at age 15
  predict_15 <- out.ggs_5_6_mil_thin1_wide |>
    filter(Age == 13) |>
    mutate(Age = 15) |>
    mutate(coverage = alpha + beta / (1 + exp(-gamma * (Age - delta))))
   predict_15_summary <- predict_15 |>
     summarize(median = median(coverage),
              min = quantile(coverage, 0.025),
              max = quantile(coverage, 0.975))
   # add Geography with Sample_Size
   predict_15_summary_geo <- rbind(predict_15_summary,</pre>
   predict_15_summary,
   predict_15_summary,
  predict_15_summary,
   predict_15_summary) |>
    mutate(Geography = unique(varicella_vaccine_coverage$Geography),
            Sample_Size = unique(varicella_vaccine_coverage$Sample_Size))
20
   predict_15_summary_geo <- predict_15_summary_geo |>
    mutate(Median = round(median * Sample_Size, 0),
           Min = round(min * Sample_Size, 0),
23
           Max = round(max * Sample_Size, 0))
24
   # Extract Geography, Min, Median, Max, and export to latex
   predict_15_summary_geo |>
     select(Geography, Min, Median, Max)
```