

Single-Factor Experiments: Analysis of Variance (ANOVA)

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7

Before we Begin

- Go to the github repo:
 - □ https://github.com/Mollinetti/Statistics-R
- Download the script for this class! (in the 'scripts' folder, class_4.r!)
- Run the first lines to load/install the required libraries

- Introduction
- What is ANOVA
- Completely Randomized single-factor model
- Unbalanced Design
- Random Effects model
- Blocking design
- Model Validation
- Power test for ANOVA

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- Many single-factor experiments require more than two levels of the factor to be considered
- Randomization of the experiments is now taken into account
- In the medical field, effects of medicines/treatments are verified for multiple samples of populations
- We will now call each level a treatment

- Montgomery explains the steps for a experiment:
- Conjecture: the original hypothesis that motivates the experiment.
- Experiment: the test performed to investigate the conjecture.
- Analysis: the statistical analysis of the data from the experiment.
- 4. Conclusion: what has been learned about the original conjecture from the experiment. Often the experiment will lead to a revised conjecture, and a new experiment, and so forth.

- Factor levels can be chosen in two ways:
 - ☐ Fixed-effects model
 - □ Random effects/ Components of variance model

- Factor levels can be chosen in two ways:
 - ☐ Fixed-effects model
 - Specifically choose the a levels
 - Conclusions cannot be extended to treatments that were not considered
 - □ Random effects/ Components of variance model

- Factor levels can be chosen in two ways:
 - ☐ Fixed-effects model
 - □ Random effects/ Components of variance model
 - Random sample from a larger population of treatments
 - Extend the conclusion to all treatments
 - Knowledge about the treatments investigated is not important

- Before we start ANOVA, let's remember:
 - □ Dependent Variable
 - Variable being tested and measured in a scientific experiment
 - □ Independent Variable
 - Variable that is changed or controlled in a scientific experiment

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- Completely Randomized single-factor model
- Single-factor Unbalanced Design
- Single-factor Random Effects model
- Single-factor Blocking design
- Single-factor Model Validation
- Power test for Single-factor ANOVA

What is ANOVA

- ANalysis Of VAriance
- ANOVA partitions the variability into two parts
- Test the hypothesis based on a comparison of two independent estimates of the population variance/mean/covariance



What is ANOVA

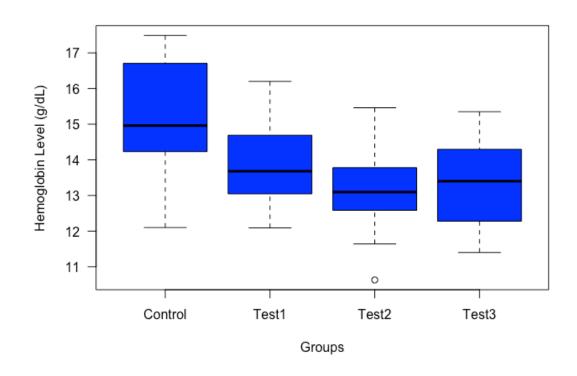
- In ANOVA we want to test the significance of the effect of one or more dependent variables against three or more groups of independent variables
- One-way-ANOVA, repeated ANOVA, mixed effects ANOVA, ANCOVA
- two-way-ANOVA, MANOVA, MANCOVA, Single cell design

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Consider the following experiment: "We need to verify the effect of some medicine to anemic male patients. We have 4 groups: control, placebo and two variations of the medicine. Nominal hemoglobin levels for male are between 13.5 to 17.5g/dl. Sample size is 20. Age is disregarded

- Blood samples are taken in a completely randomized fashion
- Need to reduce any nuisance variable in the experiment
- Human error x Machine error
- Graphical interpretation and statistic interpretation

Let's observe the boxplot of our data





- Suppose we have a different levels of a single factor we wish to compare
- Observations follow the linear model:

$$Y_{ij} = \mu_i + \epsilon_{ij} \begin{cases} i = 1, 2, ..., a \\ j = 1, 2, ..., n \end{cases}$$

Where
$$\mu_i = \mu + \tau_i$$

- Suppose we have a different levels of a single factor we wish to compare
- Observations follow the linear model:

Random observation $Y_{ij} = \mu_i^{\downarrow} + \epsilon_{ij} \begin{cases} i = 1, 2, ..., a \\ j = 1, 2, ..., n \end{cases}$ Error

Where
$$\mu_i = \mu + \tau_i$$
 Effect factor

Mean of the population (overall mean)



- Each treatment can be thought of as a normal population with mean μ_i and variance σ^2
- Moreover, each treatment can be understood as a normally distributed variable with mean μ plus a perturbation τ_i

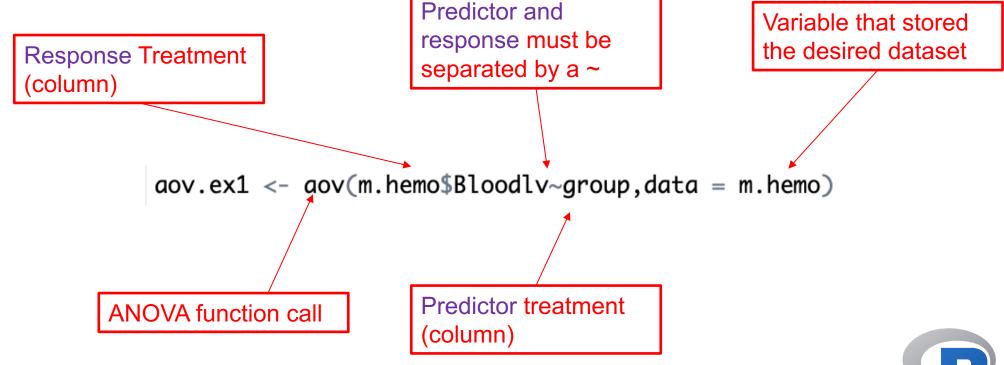
- For the fixed effect models, effects τ_i are considered as deviations from overall mean μ
- \blacksquare So the sum of τ_i is expected to be 0
- This is equivalent to testing the following hypotheses

$$H_0$$
: $\tau_1 = \tau_2 = \dots = \tau_a = 0$
 H_1 : $\tau_i \neq 0$ for at least one i

- We have the following point estimators:
 - \square Total sum of squares: $SS_T = \sum_{i=1}^a \sum_{j=1}^n y_{ij}^2 \frac{\bar{y}^2}{N}$
 - \square Sum square of treatments: $SS_{Tr} = \sum_{i=1}^{a} \frac{y_i^2}{n} \frac{\bar{y}^2}{N}$
 - \square Mean square of treatments: $MS_{Tr} = \frac{SS_{Tr}}{(a-1)}$
 - \square Error sum of squares: $SS_E = SS_T SS_{Tr}$
 - \square Error mean square: $MS_E = \frac{SS_E}{a(n-1)}$
 - \Box F-statistic: $F_0 = \frac{MS_{Tr}}{MS_F}$

- Importance of the F-statistic
- F-statistic: $F_0 = \frac{MS_{Tr}}{MS_E} = \frac{MS_{Tr}}{MS_E}$
 - □ Supports the p-value in answering "Is the variance between the means of two population significantly different?"
 - □ F statistic and Critical F-value
 - If the calculated F statistic is greater than the F critical value, you can reject your null hypothesis

Anatomy of the ANOVA function in R:





Now let's run the ANOVA for our hemoglobin experiment



Since P is

considerably smaller

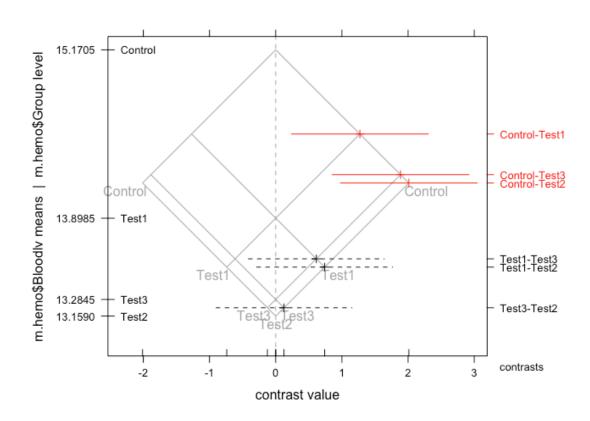
- Since the Mean Squared error MS_E is an estimator of variance σ , we can build confidence intervals
- Let's verify the confidence interval for each mean μ_i



- Since we rejected H_0 , we know that there is at least one factor that is different from the others
- How do we know what factor?
 - ☐ Fisher's least significant Difference (LSD)
 - □ Tukey's test
 - □ mmc
- We'll run a mean-mean multiple comparison (mmc)

- Tukey Honest Single Differences (HSD) test
 - □ Post-hoc analysis of the ANOVA
 - $\square H_0$: no significance in the difference of means
 - $\square H_1$: significance in the difference of means
- We will first plot the mmc, then plot the Tukey HSD to account for overlapping labels (tiebreaker plot)

Plotting the mmc we get a very straightforward answer:

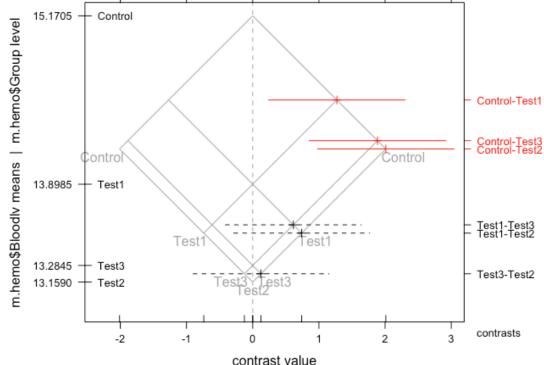




How to read a mca plot:

Crossing of the means of a treatment at the levels of one factor with itself rotated 45 degrees





Difference in mean

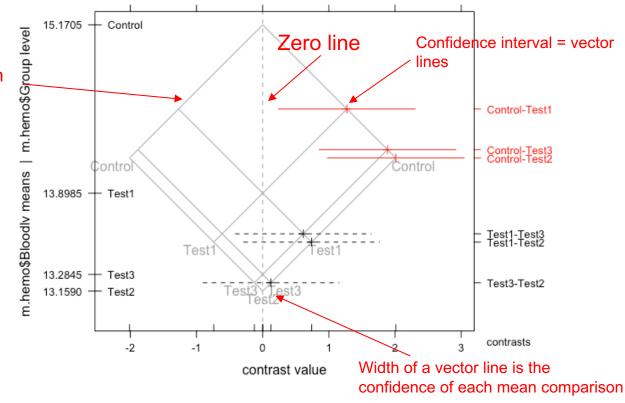
levels

Weighted average of the means comprising each comparison



How to read a mca plot:

Reference lines for mean of each treatment





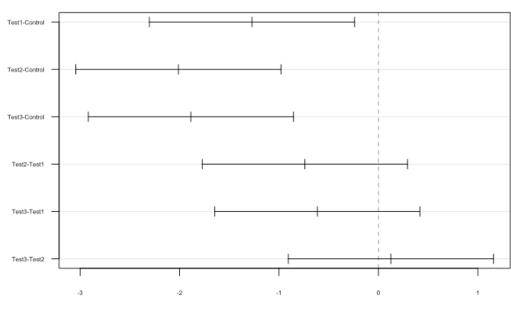
- Contrasts are weighted variables in which their values must sum to 0
- Example: comparing 4 means

μ_1	μ_2	μ_3	μ_4
1	-1	0	0
0	0	1	-1
1	1	-1	-1

We call this an orthogonal contrast

Plotting the Tiebreaker plot:

95% family-wise confidence level



Differences in mean levels of group

Plotting the Tiebreaker plot:



Intervals that contain 0 indicate that the difference between the means IS NOT SIGNIFICANT

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90

Unbalanced Design

- In some cases, the number of observations taken under each treatment may be different
- We say the the design is unbalanced
- Disadvantages over balanced design:
 - □ Insensitive to small departures from the assumption of equality
 - \square More prone to Type-II errors, less power β

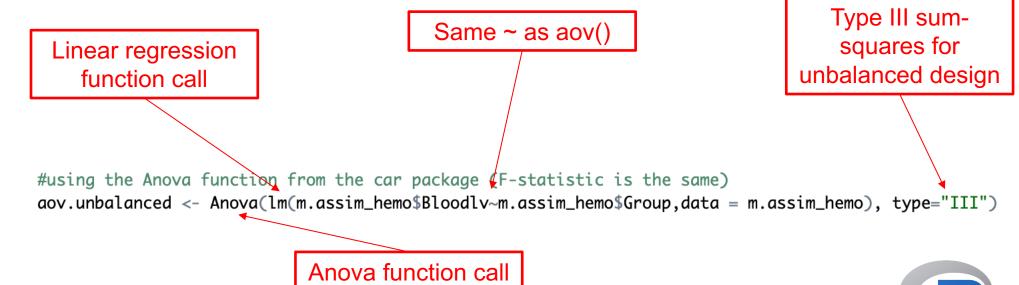
Unbalanced Design

- Same steps as the one-way randomized ANOVA
 - Load the assimetric_hemo_exp dataset
 - □ Don't forget to drop the empty rows
 - □ Run the ANOVA
 - □ Run the mmc
 - □ Verify the differences



Unbalanced Design

We will use the Anova() function from the 'car' library, but we must wrap it with a linear regression function call



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- Now, treatments are random samples from a population of treatments
- We want to draw conclusions for the entire population of factor levels
- a random factors are chosen

- Consider variance of the treatment effects τ_i to be σ_{τ}^2
- The variance of the response is $\sigma_{\tau}^2 + \sigma^2$
- So we test Hypotheses about σ_{τ}^2

$$H_0: \sigma_{\tau}^2 = 0$$

$$H_1: \sigma_{\tau}^2 \neq 0$$

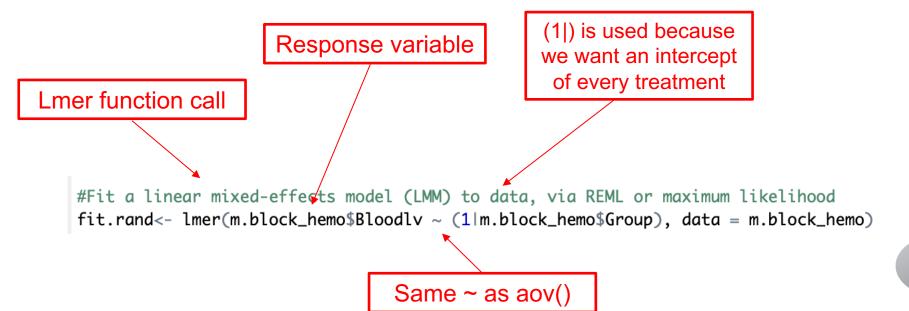
- We first have to use the restricted maximum likelihood (REML) procedure and then apply ANOVA
- The computational procedure of the ANOVA table is the same as of the fixed-effects*
- Conclusions, however apply for the entire population of treatments
- Load the 'Block Hemo exp.csv' dataset

- In R, we have to use an entirely different approach from the regular aov function call.
- We call the function Imer from the library Ime4 (linear mixed random effect)

#Fit a linear mixed-effects model (LMM) to data, via REML or maximum likelihood
fit.rand<- lmer(m.block_hemo\$Bloodlv ~ (1|m.block_hemo\$Group), data = m.block_hemo)</pre>



- In R, we have to use an entirely different approach from the regular aov function call.
- We call the function Imer from the library Ime4 (linear mixed random effect)



Running the summary we can see the random effect associated to each treatment

```
> summary(fit.rand)
Linear mixed model fit by REML ['lmerMod']
Formula: m.block_hemo$Bloodlv ~ (1 | m.block_hemo$Group)
   Data: m.block_hemo
                                                      Random effects
                                                         (sum them)
REML criterion at convergence: 1465.4
Scaled residuals:
     Min
              10 Median
                                        Max
-2.90058 -0.71495 -0.03995 0.70689 3.04667
                                                                     Estimate from the
Random effects:
                                                                  expected measurement
                              Variance Std.Dev.
Groups
                   Name
                                                                     of a donor from a
m.block_hemo$Group (Intercept) 0.2512
                                       0.5012
Residual
                                       1.2043
                                                                     random treatment
                               1.4504
Number of obs: 450, groups: m.block_hemo$Group, 9
                                                                          (mean)
Fixed effects:
           Estimate Std. Error t value
            13.6314
(Intercept)
                        0.1764
                               77.26
```

■ Now we check the random effect σ_{τ}^2 associated to each treatment

"estimated" (better: conditional means of) random effects that we computed with the lmer ranef(fit.rand)

- To validate the assumptions of our model we do several plots
 - □ Residuals x fitted values (Tukey-Ascombe plot)
 - □ Qq-plot
 - □ Normalized qq plot



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Blocking Design

- Reduce the variability from a nuisance factor
- Extension of the paired t-test when more than two treatments must be compared
- Selection of b blocks and running a complete replicate of the experiment in each block
- A levels, b blocks

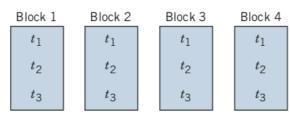


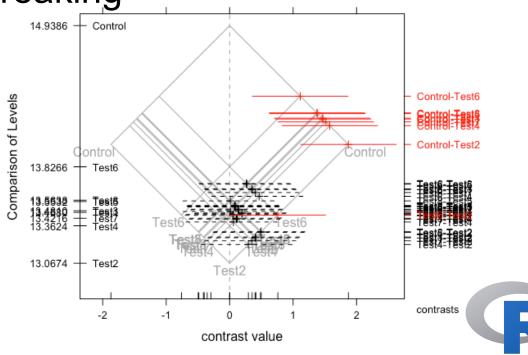
Figure 13-8 A randomized complete block design.

Blocking Design

- When to use block design?
 - \square When you want to reduce the MS_E
 - When doing a single factor experiment has much more degrees of freedom
- Generally, it is based on trial and error

Blocking Design

- Run the ANOVA with block design at R
- Do the mmc
- Run the HSD for tie-breaking
- Check the plot



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- The same participant are observed multiple times or under all the levels of a within-subject factor
- One independent variable
 - Within-subject variable
 - □ Two or more categorical related group
- One dependent variable
 - □ Interval or ratio level of measurement

- A within-subjects variable is an independent variable that is manipulated by testing each subject at each level of the variable
- Example: suppose we take blood measurements on two situations:
 - ☐ After 12 hour fasting
 - Without fasting

- We test for the following hypotheses:
 - $\square H_0$: Means of measures are equal
 - $\square H_1$: Means of measures are not equal

$$H_0$$
: $\mu_1 = \mu_2 = \dots = \mu_a = 0$

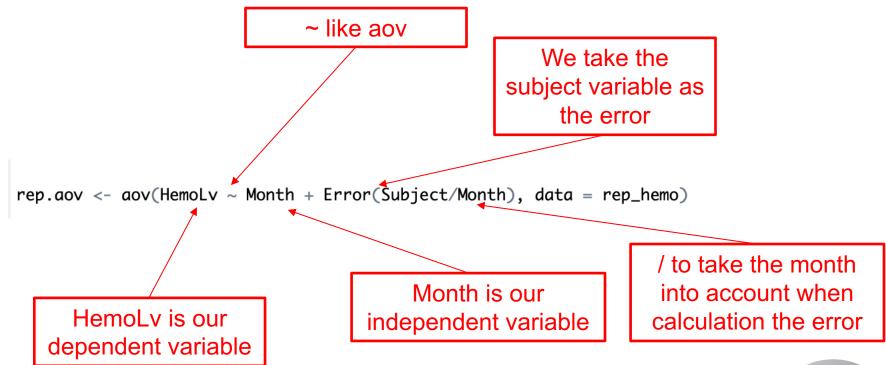
 H_1 : $\mu_i \neq 0$ for at least one i

Anova model for the repeated measures

```
rep.aov <- aov(HemoLv ~ Month + Error(Subject/Month), data = rep_hemo)</pre>
```



Anova model for the repeated measures





×

Repeated Measures ANOVA

- For the assumption of the repeated measures for one-way ANOVA, we test:
- Normality
 - □ Shapiro-Wilk test
- Sphericity
 - ☐ Mauchly test (for 2 or more factors)

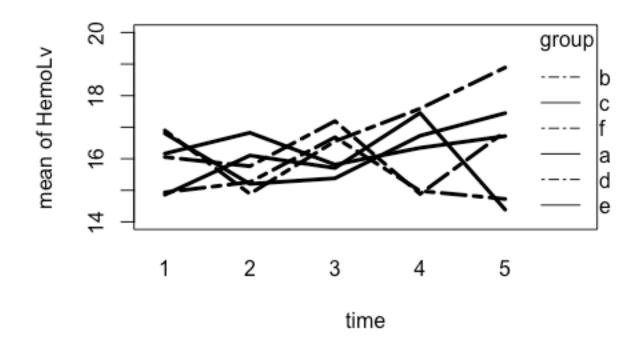




- Load the 'Rep_hemo_exp.csv' dataset
- Run the anova with a modified model
- Run the shapiro-wilk test
- Plot the means for interpretation



Plot of the means





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- Like the t-test, we must test our model for:
 - Normality
 - □ Independence
 - □ Heteroscedascity

- Our validation varies according to which ANOVA we are dealing with:
 - □ One-way, unbalanced, blocking:
 - Normality: Normal Probability plot of residuals
 - Heteroscedascity: Plotting the residuals against time
 - Independence: Linear regression against the residuals
 - □ Random effects:
 - Normality: normal qq plots Tukey-Ascombe plot
 - Heteroscedascity: residuals against time
 - Independence:qqplot of residuals

- Our validation varies according to which ANOVA we are dealing with:
 - □ Repeated measures:

- R commands for each test:
 - Normality: plot()

plot(aov.ex1)

□ Heteroscedascity: plot(residuals())

plot(aov.ex1\$res)

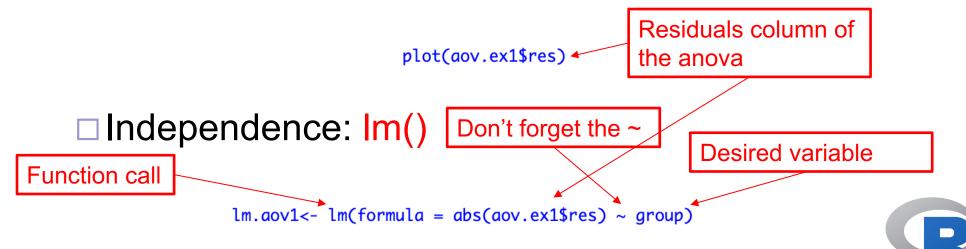
□ Independence: Im()



- R commands for each test:
 - Normality: plot()

plot(aov.ex1)

□ Heteroscedascity: plot(residuals())



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- We will use the power.anova.test in R, for that we need:
 - Number of groups
 - □ Between group variance
 - Within group variance
 - \square Confidence level α
 - \square Sample size or desired power β



Power test for ANOVA

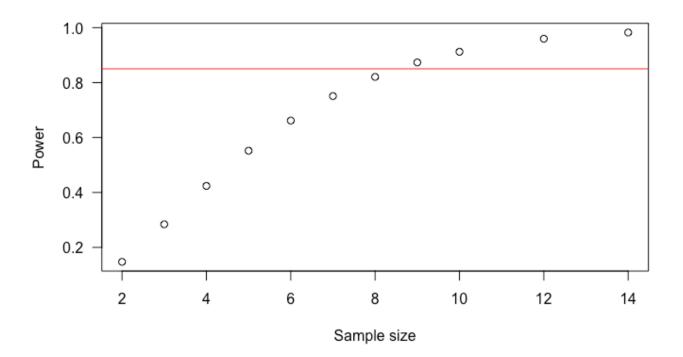
Using our randomized experiment example:

Calculated sample

size

Power test for ANOVA

Plotting different sample sizes to measure the increase in power





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Next Episode

- ANOVA is not over yet! We will talk about the general case of ANOVA (MANOVA, two-way)
- However, we must understand how to fit linear models (linear regression)
- Next stop, Linear Regression!
- And a brief explanation about single-factor ANCOVA



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