

Goals

Recall: waiting time in the ER

 $H_0: \mu \le 30$

 $H_1: \mu > 30$





How to perform this test based on data?

- test statistic
- rejection region
- p-value



How to measure the performance of a test?

- ► Type I and type II errors
- level
- power



Construct PARAMETRIC tests:

 $H_0: \mu \le 30$

 $H_1: \mu > 30$

- ► Wald test
- ► T-Test



Waiting time in the ER

- ► The average waiting time in the Emergency Room (ER) in the US is 30 minutes according to the CDC
- Some patients claim that the new Princeton-Plainsboro hospital has a longer waiting time. Is it true?
- Collect a sample: X_1, \ldots, X_n (waiting time in minutes for n random patients) with unknown expected value $\mathbb{E}[X_1] = \mu$.
- ▶ We want to know if $\mu > 30$.



Statistical formulation

Consider a sample X_1, \ldots, X_n of i.i.d. random variables and a statistical model $(E, (\mathbb{P}_{\theta})_{\theta \in \Theta})$.

- ▶ Let Θ_0 and Θ_1 be a partition of Θ .
- Consider the two hypotheses: $\begin{cases} H_0: & \theta \in \Theta_0 \\ H_1: & \theta \in \Theta_1 \end{cases}$
- \blacktriangleright H_0 is the *null hypothesis*, H_1 is the *alternative hypothesis*.
- ▶ We say that we test H_0 against H_1 .

Testing lexicon

- For k = 0 (H_o) or k = 1 (H_l), we say that
 - Θ_k is a simple hypothesis if $\Theta_k = \{\Theta_k\}$
 - Θ_k is a *composite hypothesis* if Θ_k is of the following three forms

A test is typically either one-sided or two-sided

Two-sided

One-sided

Examples

1. Waiting time in the ER

composite

$$H_0: \mu \leq 30$$

$$H_1: \mu > 30$$

 $H_1: \mu > 30$

One-sided test

2. In the Kiss example, we want to test

Ho: p = .5 Simple $W_0 = \{.5\}$

$$H_0: p = .5$$

$$H_1: p \neq .5$$
 couposite

two sided test

Clinical trials

- Pharmaceutical companies use hypothesis testing to test if a new drug is efficient.
- ► To do so, they administer a drug to a group of patients (test group) and a placebo to another group (ﷺ group).
- We consider testing a drug that is supposed to lower LDL (low-density lipoprotein), a.k.a "bad cholesterol" among patients with a high level of LDL (above 200 mg/dL)

Notation and modelling

- Let $\mu_d > 0$ denote the expected decrease of LDL level (in mg/dL) for a patient that has used the drug.
- Let $\mu_c > 0$ denote the expected decrease of LDL level (in mg/dL) for a patient that has used the placebo.
- Hypothesis testing problem:

$$H_0: \rho_a \leq \rho_c$$

 $H_1: \rho_a > \rho_c$

- ▶ We observe two independent samples:
 - $ightharpoonup X_1, \ldots, X_{\underline{n}} \overset{iid}{\sim} \mathcal{N}(\mbox{$p_{
 m d}$}\ , \sigma_{
 m d}^2)$ from the fest group and
 - $ightharpoonup Y_1, \ldots, Y_m \overset{iid}{\sim} \mathcal{N}(\property_{\mathbf{c}}, \sigma_{\mathbf{c}}^2)$ from the Control group.
- ► This is a two_sample test: these are very common (A/B testing).

Asymmetry in the hypotheses

- We want to decide whether to reject H_0 (look for evidence against H_0 in the data).
- H_0 and H_1 do not play a symmetric role: the data is only used to try to disprove H_0

$$H_0$$
: Status quo H_1 : a (Scientific) discovery

In particular lack of evidence, does not mean that H_0 is true ("innocent until proven guilty")

Examples

1. Waiting time in the ER

$$H_0: \quad \mu \leq 30 \rightarrow \text{status quo}$$
 $H_1: \quad \mu > 30$

Status quo: CDC statement. We collect data to show that Princeton-Plainsboro is different

2. Kiss

$$H_0: p = .5$$

 $H_1: p \neq .5$

Status quo: our intuition tells us there should be no preference. We collect data to show that there is one.

3. Clinical trials

$$H_0: \rho_4 \le \rho_c$$

 $H_1: \rho_4 > \rho_c$

Status quo: The drug is not more effective than a placebo. We collect data to prove that the drug is effective.

What is a test?

- A test is a statistic $\psi \in \{0,1\}$ that does not depend on unknown quantities and such that:
 - ▶ If $\psi = 0$, H_0 is not rejected;
 - If $\psi = 1$, H_0 is rejected.

Important remark: Can always write $\psi = \text{IIR}$, where R is an event called region region.

Waiting time in the ER:

$$\begin{array}{ll} H_0: & \mu \leq 30 \\ H_1: & \mu > 30 \end{array} \qquad \psi = \mathbb{A} \left\{ \overrightarrow{\times}_{\mathbf{n}} > \mathcal{C} \right\}$$

Kiss:

Clinical trials

$$H_0: \mu_d \leq \mu_c$$

 $H_1: \mu_d > \mu_c$

$$\psi = M_{\ell} \overline{\chi}_{\kappa} - \overline{\chi}_{\kappa} > C$$

Errors

A test can make two types of errors:

| | Fail to reject Null | Reject Null |
|-----------------------------------|---------------------|-------------|
| H_0 true $(heta \in \Theta_0)$ | | type 1 |
| H_1 true $(heta \in \Theta_1)$ | type 2 | V |

Both errors can be computed from the power function $\beta(\theta) = {\rm I\!P}_{\theta}[\psi=1]$

▶ If $\theta \in \Theta_0$,

 $\beta(\theta) = \mathbb{P}_{\theta}[\psi \text{ makes an error of type } 1]$

We want $\beta(\theta)$ to be Small

ightharpoonup If $\theta \in \Theta_1$,

 $\beta(\theta) = 1 - \mathbb{P}_{\theta}[\psi \text{ makes an error of type } \mathcal{L}]$

We want $\beta(\theta)$ to be large

The Neyman-Pearson paradigm

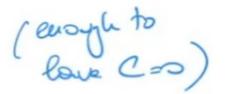
Recall the waiting time in the ER example

$$H_0: \quad \mu \le 30 \\ H_1: \quad \mu > 30 \qquad \qquad \psi = \mathbb{I}\{\bar{X}_n > C\}$$

How to choose (?

We are facing a dilemma: both errors should be small!

- ▶ To make Type I error $\rightarrow 0$, take $C \rightarrow +\infty$
- ▶ To make Type II error $\rightarrow 0$, take $C \rightarrow \infty$



Cannot make both small at the same time.

The Neyman-Pearson paradigm:

- ▶ Make sure that $\mathbb{P}[\mathsf{Type}\ \mathsf{I}\ \mathsf{error}] \leq \mathsf{X}\ (\mathsf{e.g.},\ \alpha = 5\%, 1\%, \dots)$
- Minimize IP[Type II error] subject to this constraint

Level

The value of $\alpha \in (0,1)$ chosen in the Neyman-pearson paradigm is called α of a test

For which $\theta \in \Theta_{\bullet}$ should we compute $\mathbb{P}_{\theta}[\psi = 1]$ (probability of Type 1 error)?

ightharpoonup A test ψ has level α if

$$\Pr_{\theta}[\psi=1] \leq \alpha, \qquad \forall \theta \in \Theta_0.$$
 Then
$$\Pr_{\theta}[\psi=1] \leq \alpha$$
 Then
$$\Pr_{\theta}[\psi=1] \leq \alpha$$

▶ A test $\psi = \psi_n$ has asymptotic level α if

$$\lim_{\mathbf{n}\to\infty} \max_{\mathbf{n}\in\mathbf{m}_{\mathbf{n}}} \mathrm{IP}_{\theta}[\psi_n=1] \leq \alpha,$$

Building a test from a confidence interval

Given a confidence interval, we can often build a test (and vice versa).

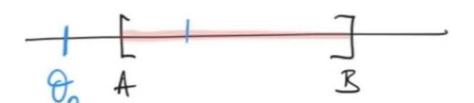
Let I = [A, B] be a confidence interval at level $1 - \alpha$ for a parameter θ :

$$\mathbb{P}_{\theta}(\theta \in [A, B]) \ge 1 - \alpha$$

 \blacktriangleright We want to use this I to build a test at level α for

$$H_0: \quad \theta = \theta_0$$

 $H_1: \quad \theta \neq \theta_0$



Natural candidate:

$$\psi = \mathbb{I} \{ \Theta_o \notin [A, S] \}$$

Level of test:

$$\mathbb{P}_{\theta_0}[\psi = 1] = \mathbb{P}_{\theta_0}[\theta_0 \notin I] =$$

 \blacktriangleright Therefore ψ is a test with level \bowtie

A test for the Kiss example

We want to test:

$$H_0: p = 0.5$$

$$H_1: p \neq 0.5$$

We observe $R_1, \ldots, R_n \stackrel{iid}{\sim} \mathsf{Ber}(p)$.

Recall that

$$\mathcal{I}_{conserv} = \left[\overline{R}_{n} - \frac{1.96}{2\sqrt{n}} \right] \overline{R}_{n} + \frac{1.76}{2\sqrt{n}}$$

is a confidence interval of asymptotic level $1-\alpha$ for p.

Consider the test:

$$\psi = \mathbb{I} \{0.5 \notin \mathcal{I}_{Coccus}\}$$

We have

$$\lim_{n\to\infty} \mathbb{I} \mathbb{P}_{.5}[\psi=1] = 1 - \lim_{n\to\infty} \mathbb{I} \mathbb{P}_{.5}[.5 \in \mathcal{I}_{\mathsf{conserv}}] - (l-\kappa) = \kappa$$

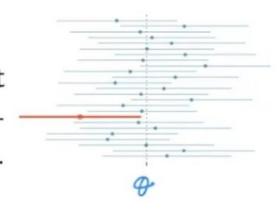
ightharpoonup Therefore ψ is a test with asymptotic level \propto

Meaning of the level

Recall that

 ${\cal I}$ is a CI at level 95% for θ

means that if we repeat the experiment many times, at least 95% confidence intervals will contain the true parameter θ .



Similarly:

 ψ is a test at level 5% for H_0 vs H_1

means that if we repeat the experiment many times, at most 5% of the tests will make an error of type 4

What if we change the level?

With our data $\mathcal{I}_{\text{conserv}} = [0.56, 0.73]$ so we reject the at level 5%

| α | $q_{\alpha/2}$ | $\mathcal{I}_{conserv}$ | decision |
|----------|----------------|-------------------------|----------------|
| 10% | 1.64 | [0.57, 0.72] | Reject |
| 5% | 1.96 | [0.56, 0.73] | Reject |
| 1% | 2.76 | [0.52, 0.77] | Reject |
| .1% | 3.29 | [0.497, 0.79] | Foil to reject |
| .01% | 3.89 | [0.47, 0.82] | Fail to regent |

The value of α across which we switch from "reject" to "fail to reject" is called the ρ - value

p-value

Definition

The (asymptotic) *p-value* of a test ψ is the smallest (asymptotic) level α at which ψ rejects H_0 .

Golden rule

p-value $\leq \alpha \Leftrightarrow H_0$ is rejected by ψ , at the (asymptotic) level α .

Kiss example: we need to find α_0 such that $\bar{R}_n - \frac{q_{\alpha_0/2}}{2\sqrt{n}} = 0.5$

If $\bar{R}_n=.645,\ n=124$ we get $q_{\alpha_0/2}=3.23.$ To find α_0 :

$$\frac{\alpha_0}{2} = \mathbb{P}[2] = \mathbb{$$

where $Z \sim \mathcal{N}(0,1)$ and $\text{IP}(Z \leq 3.24) = 0.9994$ (read from table).

The evidence scale

- Statisticians, and more generally researchers, are used to communicating directly in terms of p-values rather than "reject/fail to reject at level..."
- ► The mental conversion is as follows:

| p-value | evidence against H_0 | |
|-----------|------------------------|--|
| > 10% | almost none | |
| [5%, 10%] | weak | |
| [1%, 5%] | strong | |
| [.1%, 1%] | very strong | |
| < .1% | undisputable | |