1. (30 pts) Children of ages 0-15 were classified according to whether they carried Strepto-coccus pyogenes and according to the size of their tonsils.

	Tonsil size		
	Normal	Slightly enlarged	Very enlarged
Carrier	19	29	24
Non-carrier	497	560	269

(a) Analyze this table in an appropriate manner assuming that we are dealing with nominal variables, and report relevant statistics (e.g., X^2 and/or G^2) and your conclusion.

Solutions:

data: tonsil

R Code/Output:

```
> tonsil=matrix(c(19,497,29,560,24,269),ncol=3,
dimnames=list(Carrier=c('Carrier', "non-carrier"),
Size=c('Normal','Slightly Enlarged','Very Enlarged')))
> tonsil
             Size
             Normal Slightly Enlarged Very Enlarged
Carrier
                  19
  Carrier
                                     29
  non-carrier
                 497
                                    560
                                                   269
> # Pearson's Chi-squared test with
Yates' continuity correction
> result<-chisq.test(tonsil)</pre>
> result
Pearson's Chi-squared test
data: tonsil
X-squared = 7.8848, df = 2, p-value = 0.0194
>
> ###Pearson's Chi-squared test withOUT Yates' continuity correct
> result<-chisq.test(tonsil, correct=FALSE)</pre>
> result
Pearson's Chi-squared test
```

```
X-squared = 7.8848, df = 2, p-value = 0.0194
> ### Likelihood Ratio Chi-Squared Statistic
> G2=2*sum(tonsil*log(tonsil/result$expected))
> G2
[1] 7.320928
> pvalue=1-pchisq(2*sum(tonsil*log(tonsil/result$expected)),
df=2)
> pvalue
[1] 0.02572057
  SAS Code/Output:
data tonsil;
input carrier $ tonsil $ count;
datalines;
car norm 19
car slt 29
car very 24
nocar norm 497
nocar slt 560
nocar very 269
;
proc freq;
weight count;
tables carrier*tonsil / chisq expected deviation cmh cellchi2
measures;
run;
  Statistic
                       DF Value Prob
  Chi-Square
                        2 7.8848 0.0194
  Likelihood Ratio Chi-Square 2 7.3209 0.0257
```

Let H_0 : be the null hypotheses that the independence model holds and let H_a : be the alternative hypothesis that the independent model is not valid. From the SAS/R output the p-values of the X^2 and G^2 are 0.02 and 0.026 respectively. So, at the 0.05 significant level we reject (p-value< 0.05) the null hypothesis of independence. Thus, carrying Streptococcus pyogene is related with tonsil size.

(b) How many measures of association are needed to describe the table's departure from independence? Provide estimates and intervals for the relative risks, and interpret the results. Why are you able to make inference about relative risks?

Solutions: It makes sense to let the response Y to be the categorical variable for tonsil size and the explanatory variable X be the categorical variable for carrying Streptococcus pyogene. We are interested in studying the effect of carrying Streptococcus pyogene on tonsil size. There are (I-1)(J-1)=2 difference in proportions, relative risks and odds ratios. We are able to make inference about relative risks because the sampling scheme is multinomial; children were classified according to carrier and tonsil size rather than fixing a number with each size tonsil.

The risk of slightly enlarged tonsils versus normal tonsils:

	slightly enlarged	Normal
Carrier	29	19
Non-carrier	560	497

and the relative risk

	estimate	95% interval
relative risk	1.14	(0.90, 1.44)

The risk of very enlarged tonsils versus normal tonsils:

	very enlarged	Normal
Carrier	24	19
Non-carrier	269	497

and the relative risk

	estimate	95% interval
relative risk	1.59	(1.20, 2.11)

The risk of very enlarged tonsils versus slightly enlarged tonsils:

	very enlarged	slightly
Carrier	24	29
Non-carrier	269	560

and the relative risk is

	estimate	95% interval
relative risk	1.40	(1.02, 1.91)

(c) Find an appropriate partitioning of the chi-square for this problem. Give the subtables, and show that your partitioning works. Did you learn anything more, inference wise, in comparison to part (a).

Solutions:

For partitioning of the table, you can do, for example, "Normal/Slightly enlarged" vs "Very enlarged". You can then analyze the relationship between "Normal" and "Slightly enlarged" as a 2 by 2 table. These two individual Chi-squares tests both have degree of freedom one and you will see that these two Chi-squares add up to the original Chi-squares total. You can also analyze "Normal" vs "Enlarged", etc.

The risk of having enlarged tonsils versus normal tonsils:

	Enlarged	Normal
Carrier	53	19
Non-carrier	829	497

and the relative risk and odds ratio is

	estimate	95% interval
odds ratio	1.67	(0.98, 2.86)
relative risk	1.18	(1.02, 1.36)

The risk of having very enlarged tonsils versus normal or slightly enlarged tonsils:

	very enlarged	Normal/slightly
Carrier	24	48
Non-carrier	269	1057

and the relative risk and odds ratio is

	estimate	95% interval
odds ratio	1.96	(1.18, 3.27)
relative risk	1.64	(1.17, 2.32)

SAS Code

```
data partition1;
input carrier $ tonsil $ count;
datalines;
carrier normal 19
```

```
carrier senlarged 29
non-carrier normal 497
non-carrier senlarged 560
run;
proc freq;
weight count;
tables carrier*tonsil/ chisq expected;
data partition2;
input carrier $ tonsil $ count;
datalines;
carrier Senlarged 29
carrier Venlarged 24
non-carrier Senlarged 560
non-carrier Venlarged 269
run;
proc freq;
weight count;
tables carrier*tonsil/ chisq expected;
```

(d) Now consider 'tonsile size' to be an ordinal variable. Re-run the analysis, if necessary, and report the relevant statistics, your conclusions and compare to what you got in parts (a) and (b). If you think it's not necessary to re-run the analysis, then explain why that's the case.

Solutions:

The MH trend statistic with integer scoring mid-rank scoring $M^2 = 6.83$ with df = 1 and p-value 0.009. We infer that there is a strong linear association between Streptococcus pyogenes and the size of tonsil. The M^2 test gave smaller p-values than X^2 . When a positive or negative trend exist between the two variables M^2 tends to have greater power than X^2 that ignores this trend.

R Code:

SAS Code:

```
data tonsil;
input carrier $ tonsil $ count;
datalines;
car norm 19
car slt 29
car very 24
nocar norm 497
nocar slt 560
nocar very 269;

proc freq;
weight count;
tables carrier*tonsil / chisq expected deviation cmh cellchi2 measures;
run;
```

2. (25 pts) Get a dataset from

http://lib.stat.cmu.edu/DASL/Stories/EducationalAttainmentbyAge.
html,

by clicking on the link after **Datafile Name** and input the dataset into SAS or R or other software and perform the appropriate analysis. What interesting conclusions can you derive about relationship between age and educational attainment?

From the SAS/R output, for testing independence between education and age group the Pearson Chi-squared statistic is $X^2=22373.57$ with df=12 (p-value=0.00) and the G^2 statistic is $G^2=23365.06$ with df=12 and p-value=0.00 indicating strong association between age group and education. If we consider both categorical variables Y=level of education and X=age to be ordinal variables then we will use the MH test statistic. From the SAS output we see that the linear trend statistic is $M^2=11673.54$ with df=1, which along with either the Pearson correlation r=-0.299 (or Spearman correlation -0.3035) is indicating that there is a strong negative linear trend between the two variables. This means that as age increases education level decreases.

Solution: R Code:

```
> # read in data
> edu=read.table("education.txt", header=TRUE)
> # make it a contingence table
> edu2=xtabs(edu$Count~edu$Education+edu$Age Group)
```

```
> # Chi-square test
> result=chisq.test(edu2) > result
Pearson's Chi-squared test
data: edu2
X-squared = 22373.57, df = 12, p-value < 2.2e-16
> # G2 test
> LR=2*sum(edu2*log(edu2/result$expected))
> LR
[1] 23365.06
> LRchisq=1-pchisq(LR, df=(5-1) * (4-1))
> LRchisq
[1] 0
  SAS code and Output:
data education;
input education $ group $ count;
datalines;
no_high 25_34 5416
no_high 35_44 5030
no_high 45_54 5777
no_high 55_64 7606
no high >64 13746
high 25_34 16431
high 35_44 1855
high 45_54 9435
high 55_64 8795
high >64 7558
college1 25_34 8555
college1 35_44 5576
college1 45_54 3124
college1 55_64 2524
college1 >64 2503
College4 25_34 9771
College4 35_44 7596
College4 45_54 3904
College4 55_64 3109
College4 >64 2483
;
run;
proc freq order=data;
weight count;
```

tables education*group/chisq expected deviation cmh
cellchi2 measures;
run;

```
Table of education by Age_Group
```

```
education Age_Group
Frequency
Expected |
Percent
Row Pct |
Col Pct |25-34 |35-44 |45-54 |55-64 |>64 | Total
College1 | 8555 | 5576 | 3124 | 2524 | 2503 | 22282
    | 6843.9 | 3416.9 | 3788.8 | 3753.7 | 4478.8 |
    6.54 | 4.26 | 2.39 | 1.93 | 1.91 | 17.04
    | 38.39 | 25.02 | 14.02 | 11.33 | 11.23 |
    | 21.30 | 27.80 | 14.05 | 11.46 | 9.52 |
College4 | 9771 | 7596 | 3904 | 3109 | 2483 | 26863
    | 8250.9 | 4119.4 | 4567.7 | 4525.4 | 5399.5 |
    | 7.47 | 5.81 | 2.98 | 2.38 | 1.90 | 20.54
| 36.37 | 28.28 | 14.53 | 11.57 | 9.24 |
   | 24.32 | 37.87 | 17.55 | 14.11 | 9.44 |
HS | 16431 | 1855 | 9435 | 8795 | 7558 | 44074
    | 13537 | 6758.7 | 7494.3 | 7424.9 | 8859 |
    | 12.56 | 1.42 | 7.21 | 6.72 | 5.78 | 33.70
    37.28 | 4.21 | 21.41 | 19.96 | 17.15 |
    | 40.90 | 9.25 | 42.42 | 39.92 | 28.75 |
NOHS | 5416 | 5030 | 5777 | 7606 | 13746 | 37575
    | 11541 | 5762.1 | 6389.2 | 6330 | 7552.7 |
    4.14 | 3.85 | 4.42 | 5.82 | 10.51 | 28.73
   | 14.41 | 13.39 | 15.37 | 20.24 | 36.58 |
| 13.48 | 25.08 | 25.98 | 34.52 | 52.29 |
------
Total 40173 20057 22240 22034 26290 130794
     30.71 15.33 17.00 16.85 20.10 100.00
```

Chi-Square 12 22373.5656 <.0001 Likelihood Ratio Chi-Square 12 23365.0598 <.0001 Mantel-Haenszel Chi-Square 1 11440.7382 <.0001 Phi Coefficient 0.4136 Contingency Coefficient 0.3822 Cramer's V 0.2388

Sample Size = 130794

3. (30 pts) In 1972, a sample of 1,524 adults reported both their current religious affiliation and their religious affiliation at age 16.

(a) Is there any evidence of a change in the rate of Catholic affiliation over time? Find a confidence interval for the rate of change.

	Current affiliation	
Affiliation at age 16	Catholic	Non-Catholic
Catholic	351	67
Non-Catholic	33	1073

Solutions:

Let X and Y categorical variables for Catholic affiliation with categories Catholic=1 and non-Catholic=2. Since both X and Y are measured on the same set of individuals at two different point in time and because we are interested in testing if there is a change of religious affiliation over time we will use the McNemar's test of marginal homogeneity. Thus we are interested in testing:

$$H_0: \pi_{1+} = \pi_{+1}$$

The rate of change is the difference in proportions: $\delta=\pi_{1+}-\pi_{+1}$ and its estimate is given by $\hat{\delta}=\frac{n_{12}}{n}-\frac{n_{21}}{n}=0.02$. The estimated variance is:

$$\begin{split} \hat{V}(\hat{\delta}) &= \frac{1}{n} \left[\frac{n_{12}}{n} (1 - \frac{n_{12}}{n}) + \frac{n_{21}}{n} (1 - \frac{n_{21}}{n}) + 2 \frac{n_{12} n_{21}}{n^2} \right] \\ &= \frac{1}{1524} \left(\frac{67}{1524} (1 - \frac{67}{1524}) + \frac{33}{1524} (1 - \frac{33}{1524}) + 2 \frac{67(33)}{1524^2} \right) = 0.0000393 \end{split}$$

Hence a 95% CI for
$$\delta$$
 is $\hat{\delta} \pm z_{\alpha/2} \sqrt{\hat{V}(\hat{\delta})}$ or $\delta \in (0.008, 0.0032)$

Moreover the Mc Nemars test statistic is

$$z = \frac{n_{12} - n_{21}}{\sqrt{n_{12} + n_{21}}} = 34/10 = 3.4$$

and the corresponding p-value is 2P(Z>3.4)=0.0006<0.05. We reject the null hypothesis of marginal homogeniety and hence we conclude that there is a change of Catholic affiliation over time.

R Code/Output

```
> religion=matrix(c(351,33,67,1073),ncol=2,
+ dimnames=list(Time=c("Catholic", "Non-Catholic"),
+ Religion=c('Catholic','Non-Catholic')))
> religion
              Religion
Time
               Catholic Non-Catholic
                    351
  Catholic
                                   67
                                1073
  Non-Catholic
                     33
> mcnemar.test(religion,correct=F)
McNemar's Chi-squared test
data: religion
McNemar's chi-squared = 11.56, df = 1, p-value = 0.0006739
> mcnemar.test(religion,correct=T)
McNemar's Chi-squared test with continuity correction
data: religion
McNemar's chi-squared = 10.89, df = 1, p-value = 0.0009668
  SAS Code/Output
data matched;
input first second count;
datalines;
1 1 351
1 2 67
2 1 33
2 2 1073
proc freq; weight count;
tables first*second / agree; exact mcnem;
run;
```

McNemar's Test				
Statistic (S)	11.5600			
DF	1			
Asymptotic Pr > S	0.0007			
Exact Pr >= S	8.737E-04			

(b) For these data, was it beneficial to record religious affiliation for the same individuals at both points in time? In other words, could we have done just as well if we had recorded current religious affiliation for 1,524 individuals, and religious affiliation at age 16 for a separate independent sample of 1,524 other individuals?

Solutions:

Suppose we recorded religious affiliation for 1524 individuals, and religious affiliation at age 16 for a separate independent sample of 1524. The new table from two independent, cross-sectional samples would have looked like this:

```
religion=matrix(c(384,418,1140,1106),ncol=2,
dimnames=list(Time=c("Time 1", "Time 2"),
Religion=c('Catholic','Non-Catholic')))
> religion
        Religion
Time
         Catholic Non-Catholic
  Time 1
              384
                           1140
  Time 2
              418
                           1106
> chisq.test(religion)
Pearson's Chi-squared test with Yates' continuity correction
data: religion
X-squared = 1.8427, df = 1, p-value = 0.1746
>
                     Catholic Non-Catholic
                                1106
              Age 16
                      418
```

1140

Now the test for change over time is a test of column and row independence. The standard error for the difference in proportion of this new table is

384

Current

$$\hat{V}(d) = \sqrt{\frac{1}{1524} (\frac{418}{1524} (1 - \frac{418}{1524}) + \frac{384}{1524} (1 - \frac{384}{1524}))} = 0.0159.$$

which is much greater than the standard error we had previously (0.0000309). Thus for these data it was beneficial to record religious affiliation for the same individuals at two points in time since the confidence interval is more precise (smaller standard error). Using a longitudinal sample apparently produced a much more precise estimate of the rate change than cross-sectional samples would have produced. Moreover, The chi-square test here yields an insignificant result (chi-square-1.84 with p- value=0.17), suggesting that the independent model does fit. This contrasts to McNemar's test result.

SAS Code/Output

```
data matched;
input first second count;
datalines;
1 1 351
1 2 67
2 1 33
2 2 1073
;
proc freq; weight count;
tables first*second / chisq
run;
```

4. (15 pts) Calculate *kappa* for a 4×4 table having $n_{ii} = 5$ for all i, $n_{i,i+1} = 15$, $i = 1, 2, 3, n_{41} = 15$, and all other $n_{ij} = 0$. Explain why strong association does not imply strong agreement.

Solutions: R code/Output:

```
> ratings=matrix(c(5,0,0,15,15,5,0,0,0,15,5,0,0,0,15,5),ncol=4)
> ratings
     [,1]
          [,2] [,3] [,4]
             15
[1,]
        5
                   0
[2,]
        0
              5
                  15
                         0
                   5
[3,1
              0
                        15
        0
       15
                         5
[4,]
> library(vcd)
```

```
Loading required package: MASS
Loading required package: grid
Loading required package: colorspace
> kappa=Kappa(ratings)
> kappa
           value
                        ASE
Unweighted 0.0 0.06454972
Weighted 0.1 0.12677314
>
  SAS code:
data kappa;
input i $ j $ count ;
datalines;
a a 5
a b 15
a c 0
 a d 0
b a 0
b b 5
b c 15
b d 0
 c a 0
 c b 0
 c c 5
 c d 15
 d a 15
 d b 0
 d c 0
 d d 5
proc freq data=kappa; weight count;
   tables i*j /agree chisq measures;
run;
```

Kappa Statistics

Sample Size = 80

	B1	B2	В3	B4	Total
A1	5	15	0	0	20
A2	0	5	15	0	20
A3	0	0	5	15	20
A 4	15	0	0	5	20
Total	20	20	20	20	80

Statstic	Value	ASE	95% Lower Limits	95% Upper Limits
Simple Kappa	0	0.0645	-0.1265	0.1265
Weighted Kappa	0.1	0.0787	-0.0542	0.2542

From the SAS/R output the unweighted Cohen's kappa statistic is close to 0.0 indicating that there is no aggreement between the two ratings. Indeed, from the table we observe that there is a tendency of opposite ratings. So strong association does not imply strong agreement for example two critics give opposite ratings (strong disagreement). Or if observer A consistently rates subjects one category higher than observer B, strength of agreement is poor even though the association is strong. (Agresti, page 432)