

# Prediction for Multilevel Models

Sophia Rabe-Hesketh

Graduate School of Education & Graduate Group in Biostatistics

University of California, Berkeley

Institute of Education, University of London

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# Outline

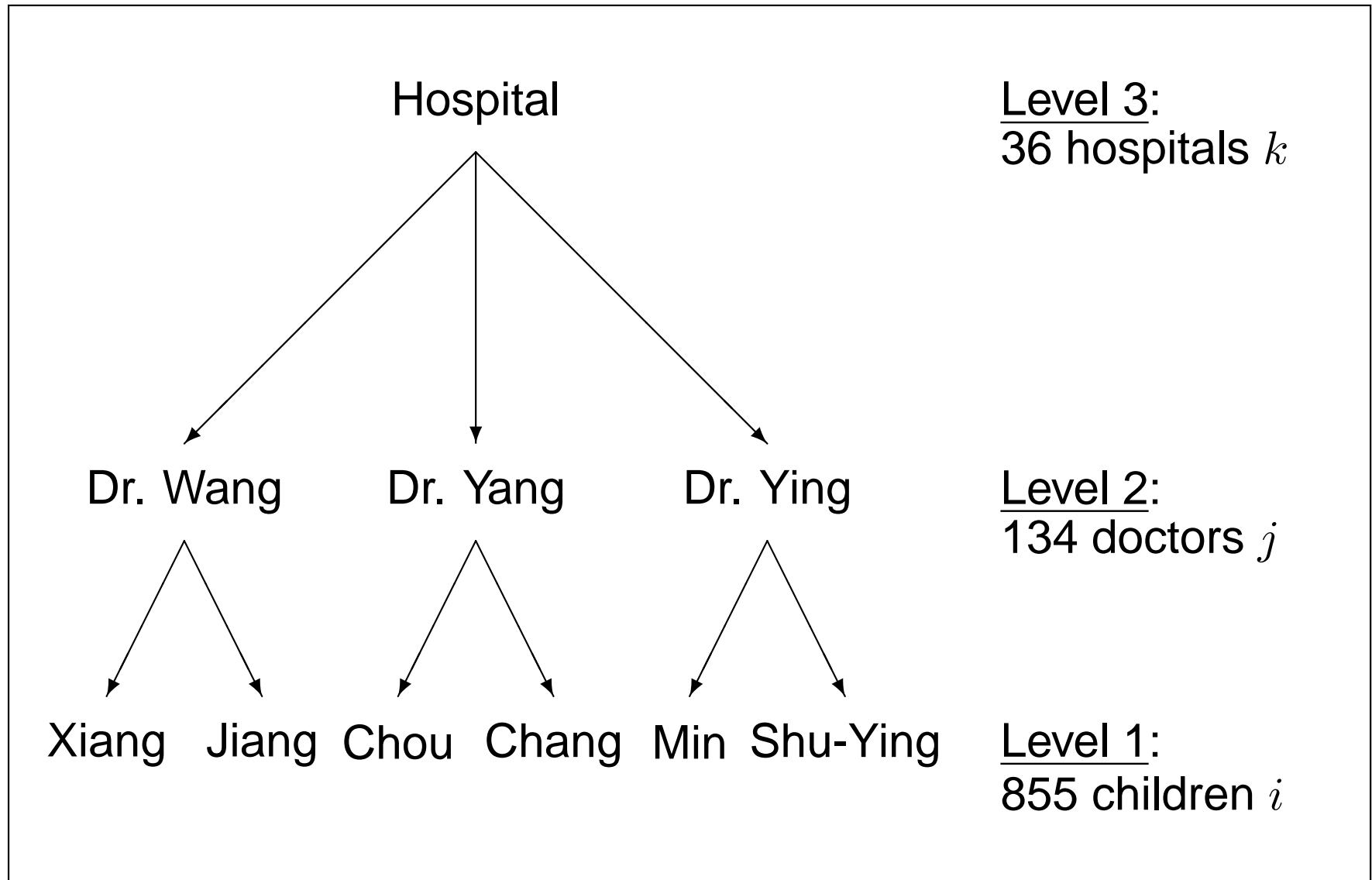
- Application: Abuse of antibiotics in China
- Three-level logistic regression model
- Prediction of random effects
  - Empirical Bayes (EB) prediction
  - Standard errors for EB prediction and approximate CI
- Prediction of response probabilities
  - Conditional response probabilities
  - Posterior mean response probabilities (different types)
  - Population-averaged response probabilities
- Concluding remarks

## ***Abuse of antibiotics in China***

- Acute respiratory tract infection (ARI) can lead to pneumonia and death if not properly treated
- Inappropriate frequent use of antibiotics was common in China in 1990's, leading to drug resistance
- In the 1990's the WHO introduced a program of case management for children under 5 with ARI in China
- Data collected on 855 children  $i$  (level 1) treated by 134 doctors  $j$  (level 2) in 36 hospitals  $k$  (level 3) in two counties (one of which was in the WHO program)
- **Response variable:** Whether antibiotics were prescribed when there were no clinical indications based on medical files

**Reference:** Min Yang (2001). *Multinomial Regression*. In Goldstein and Leyland (Eds). *Multilevel Modelling of Health Statistics*, pages 107-123.

# Three-level data structure



# Variables

- Response variable  $y_{ijk}$ 
  - Antibiotics prescribed without clinical indications (1: yes, 0: no)
- 7 covariates  $x_{ijk}$ 
  - Patient level  $i$ 
    - [Age] Age in years (0-4)
    - [Temp] Body temperature, centered at 36°C
    - [Paymed] Pay for medication (yes=1, no=0)
    - [Selfmed] Self medication (yes=1, no=0)
    - [Wrdiag] Failure to diagnose ARI early (yes=1, no=0)
  - Doctor level  $j$ 
    - [DRed] Doctor's education  
(6 categories from self-taught to medical school)
  - Hospital level  $k$ 
    - [WHO] Hospital in WHO program (yes=1, no=0)

# Three-level random intercept logistic regression

- Logistic regression with random intercepts for doctors and hospitals

$$\text{logit}[\text{Pr}(y_{ijk} = 1 | \mathbf{x}_{ijk}, \zeta_{jk}^{(2)}, \zeta_k^{(3)})] = \mathbf{x}'_{ijk}\boldsymbol{\beta} + \zeta_{jk}^{(2)} + \zeta_k^{(3)}$$

- Level 3:  $\zeta_k^{(3)} | \mathbf{x}_{ijk} \sim N(0, \psi^{(3)})$   
independent across hospitals  
 $\psi^{(3)}$  is residual between-hospital variance
- Level 2:  $\zeta_{jk}^{(2)} | \mathbf{x}_{ijk}, \zeta_k^{(3)} \sim N(0, \psi^{(2)})$   
independent across doctors, independent of  $\zeta_k^{(3)}$   
 $\psi^{(2)}$  is residual between-doctor, within-hospital variance

- gllamm command:

```
gllamm abuse age temp Paymed Selfmed Wrdiag DRed WHO, ///  
i(doc hosp) link(logit) family(binom) adapt
```

## Maximum likelihood estimates

Parameter	No covariates		Full model		
	Est	(SE)	Est	(SE)	(OR)
$\beta_0$ [Cons]	0.87	(0.14)	1.52	(0.46)	
$\beta_1$ [Age]			0.14	(0.07)	1.15
$\beta_2$ [Temp]			-0.72	(0.10)	0.49
$\beta_3$ [Paymed]			0.38	(0.30)	1.46
$\beta_4$ [Selfmed]			-0.65	(0.21)	0.52
$\beta_5$ [Wrdiag]			1.97	(0.20)	7.18
$\beta_6$ [DRed]			-0.20	(0.10)	0.82
$\beta_7$ [WHO]			-1.26	(0.32)	0.28
$\psi^{(2)}$	0.20		0.14		
$\psi^{(3)}$	0.36		0.19		
Log-likelihood	-512.14		-415.76		

using `gllamm` with adaptive quadrature

# Distributions of random effects and responses

- Vector of all random intercepts for hospital  $k$

$$\zeta_{k(3)} \equiv (\zeta_{1k}^{(2)}, \dots, \zeta_{J_k k}^{(2)}, \zeta_k^{(3)})'$$

- Random effects distribution [Prior distribution]

$$\varphi(\zeta_{k(3)}), \quad \varphi(\zeta_{jk}^{(2)}), \quad \varphi(\zeta_k^{(3)}), \quad \text{all (multivariate) normal}$$

- Conditional response distribution of all responses  $\mathbf{y}_{k(3)}$  for hospital  $k$ , given all covariates  $\mathbf{X}_{k(3)}$  and all random effects  $\zeta_{k(3)}$  for hospital  $k$  [Likelihood]

$$f(\mathbf{y}_{k(3)} | \mathbf{X}_{k(3)}, \zeta_{k(3)}) = \prod_{\substack{\text{all docs } j \\ \text{in hosp } k}} \prod_{\substack{\text{all patients } i \\ \text{of doc } j}} f(y_{ijk} | \mathbf{x}_{ijk}, \zeta_{jk}^{(2)}, \zeta_k^{(3)})$$



## Posterior distribution

- Use Bayes theorem to obtain posterior distribution of random effects given the data:

$$\begin{aligned}\omega(\zeta_{k(3)} | \mathbf{y}_{k(3)}, \mathbf{X}_{k(3)}) &= \frac{\varphi(\zeta_{k(3)}) f(\mathbf{y}_{k(3)} | \mathbf{X}_{k(3)}, \zeta_{k(3)})}{\int \varphi(\zeta_{k(3)}) f(\mathbf{y}_{k(3)} | \mathbf{X}_{k(3)}, \zeta_{k(3)}) d\zeta_{k(3)}} \\ &\propto \varphi(\zeta_k^{(3)}) \prod_j \varphi(\zeta_{jk}^{(2)}) \prod_i f(y_{ijk} | \mathbf{x}_{ijk}, \zeta_{jk}^{(2)}, \zeta_k^{(3)})\end{aligned}$$

- Denominator, marginal likelihood contribution for hospital  $k$ , simplifies

$$\int \varphi(\zeta_k^{(3)}) \prod_j \left[ \int \varphi(\zeta_{jk}^{(2)}) \prod_i f(y_{ijk} | \mathbf{x}_{ijk}, \zeta_{jk}^{(2)}, \zeta_k^{(3)}) d\zeta_{jk}^{(2)} \right] d\zeta_k^{(3)}$$

# Empirical Bayes prediction of random effects

- Empirical Bayes (EB) prediction is mean of posterior distribution

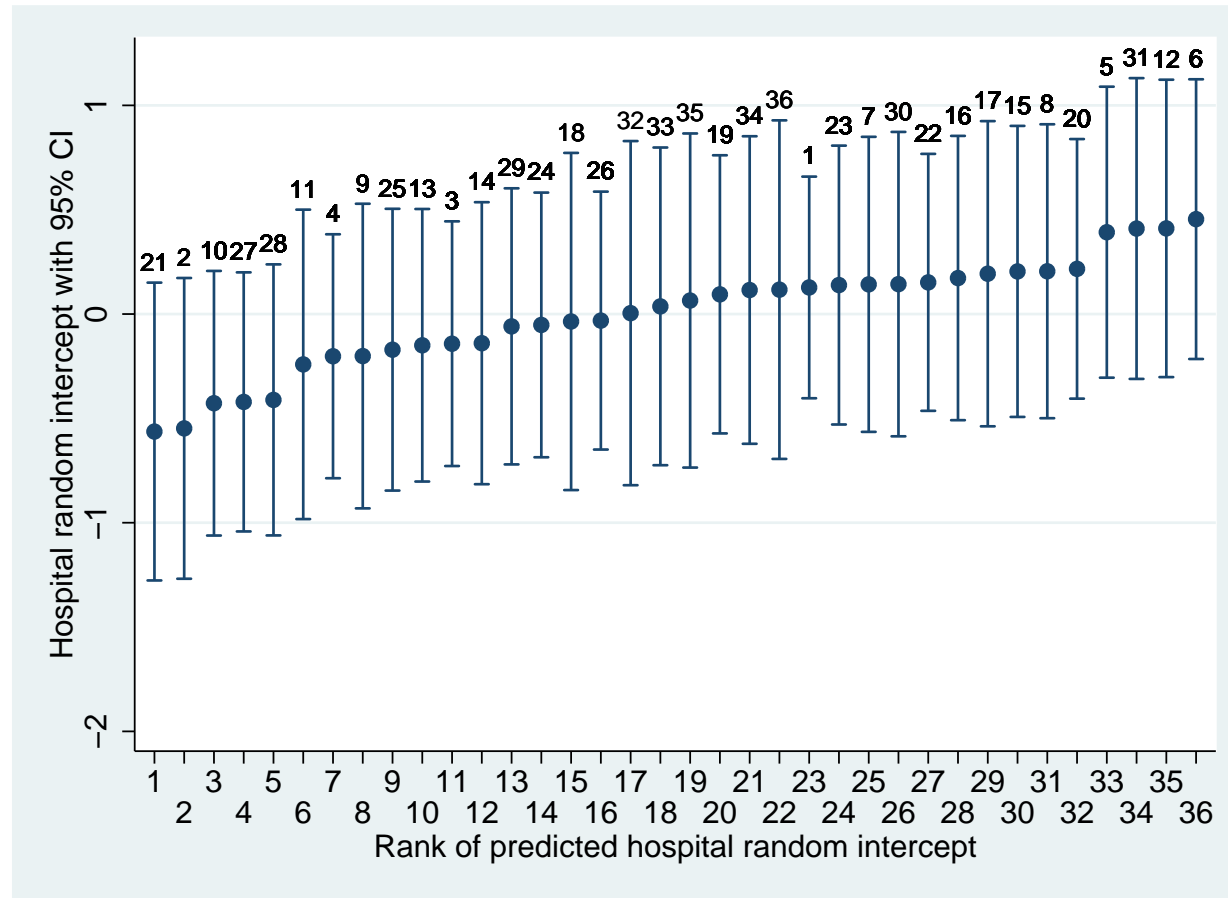
$$\tilde{\zeta}_{k(3)} = \int \zeta_{k(3)} \omega(\zeta_{k(3)} | \mathbf{y}_{k(3)}, \mathbf{X}_{k(3)}) d\zeta_{k(3)}$$

- Standard error of EB is standard deviation of posterior distribution
- Using `gllapred` with the `u` option

`gllapred eb, u`

- `ebm1` contains  $\tilde{\zeta}_{jk}^{(2)}$
- `ebs1` contains  $\text{SE}(\tilde{\zeta}_{jk}^{(2)})$
- `ebm2` contains  $\tilde{\zeta}_k^{(3)}$
- `ebs2` contains  $\text{SE}(\tilde{\zeta}_k^{(3)})$
- For approximately normal posterior, use Wald-type interval, e.g., for hospital  $k$ , 95% CI is  $\tilde{\zeta}_k^{(3)} \pm 1.96 \text{SE}(\tilde{\zeta}_k^{(3)})$

# Confidence intervals for hospital random effects



- $\tilde{\zeta}_k^{(3)} \pm 1.96 \text{ SE}(\tilde{\zeta}_k^{(3)})$

- Identify the good and bad with caution

## ***Predicted probability for patient of hypothetical doctor***

- Predicted **conditional probability** for hypothetical values  $\mathbf{x}^0$  of the covariates and  $\zeta^0$  of the random intercepts

$$\widehat{\Pr}(y = 1 | \mathbf{x}^0, \zeta^0) = \frac{\exp(\mathbf{x}^{0'} \widehat{\boldsymbol{\beta}} + \zeta^{(2)0} + \zeta^{(3)0})}{1 + \exp(\mathbf{x}^{0'} \widehat{\boldsymbol{\beta}} + \zeta^{(2)0} + \zeta^{(3)0})}$$

- If  $\zeta^{(2)0} + \zeta^{(3)0} = 0$ , median of distribution for  $\zeta_{jk}^{(2)} + \zeta_k^{(3)}$ , then predicted conditional probability is median probability
  - Analogously for other percentiles
- Using `gllapred` with `mu` and `us( )` option:

```
replace age = 2 /* etc.: change covariates to  $\mathbf{x}^0$  */
generate zeta1 = 0
generate zeta2 = 0
gllapred probbc, mu us(zeta)
```

# Predicted probability for new patient of existing doctor in existing hospital

- **Posterior mean probability** for new patient of existing doctor  $j$  in hospital  $k$

$$\tilde{\Pr}_{jk}(y = 1 | \mathbf{x}^0) = \int \hat{\Pr}(y = 1 | \mathbf{x}^0, \zeta_{k(3)}) \omega(\zeta_{k(3)} | \mathbf{y}_{k(3)}, \mathbf{X}_{k(3)}) d\zeta_{k(3)}$$

- Invent additional patient  $i^*jk$  with covariate values  $\mathbf{x}_{i^*jk} = \mathbf{x}^0$
- Make sure that invented observation does not contribute to posterior  $\omega(\zeta_{k(3)} | \mathbf{y}_{k(3)}, \mathbf{X}_{k(3)})$

$$\omega(\zeta_{k(3)} | \mathbf{y}_{k(3)}, \mathbf{X}_{k(3)}) \propto \varphi(\zeta_k^{(3)}) \prod_j \varphi(\zeta_{jk}^{(2)}) \prod_{i \neq i^*} f(y_{ijk} | \mathbf{x}_{ijk}, \zeta_{jk}^{(2)}, \zeta_k^{(3)})$$

- Cannot simply plug in EB prediction  $\tilde{\zeta}_{k(3)}$  for  $\zeta_{k(3)}$

$$\tilde{\Pr}_{jk}(y = 1 | \mathbf{x}^0) \neq \hat{\Pr}(y = 1 | \mathbf{x}^0, \zeta_{k(3)} = \tilde{\zeta}_{k(3)})$$

# Prediction dataset:

## One new patient per doctor

Data (ignore gaps)

id	doc	hosp	abuse
1	1	1	0
2	1	1	1
3	2	2	0
4	3	2	1
5	3	2	1

Data with invented observations

id	doc	hosp	abuse
1	1	1	0
2	1	1	1
.	1	1	.
3	2	2	0
.	2	2	.
4	3	2	1
5	3	2	1
.	3	2	.

- Response variable **abuse** must be missing for invented observations
- Use required value of **doc**
- Can invent several patients per doctor

# Prediction dataset:

## One new patient per doctor (continued)

Data with invented observations

id	doc	hosp	abuse	terms for posterior		
				hospital	doctor	patient
1	1	1	0	$\varphi(\zeta_1^{(3)})$	$\varphi(\zeta_{11}^{(2)})$	$f(y_{111}   \zeta_1^{(3)}, \zeta_{11}^{(2)})$
2	1	1	1			$f(y_{211}   \zeta_1^{(3)}, \zeta_{11}^{(2)})$
.	1	1	.			1
3	2	2	0	$\varphi(\zeta_2^{(3)})$	$\varphi(\zeta_{22}^{(2)})$	$f(y_{322}   \zeta_2^{(3)}, \zeta_{22}^{(2)})$
.	2	2	.			1
4	3	2	1		$\varphi(\zeta_{32}^{(2)})$	$f(y_{432}   \zeta_2^{(3)}, \zeta_{32}^{(2)})$
5	3	2	1			$f(y_{532}   \zeta_2^{(3)}, \zeta_{32}^{(2)})$
.	3	2	.			1

● Using gllapred with mu and fsample options:

```
gllapred probd, mu fsample
```

# Predicted probability for new patient of new doctor in existing hospital

- Posterior mean probability for new patient of new doctor in existing hospital  $k$

$$\tilde{\text{Pr}}_k(y=1|\mathbf{x}^0) = \int \hat{\text{Pr}}(y=1|\mathbf{x}^0, \boldsymbol{\zeta}_{k(3)}^*) \omega(\boldsymbol{\zeta}_{k(3)}^* | \mathbf{y}_{k(3)}, \mathbf{X}_{k(3)}) d\boldsymbol{\zeta}_{k(3)}^*$$

- Invent additional observation  $i^*j^*k$  with covariates in  $\mathbf{x}_{i^*j^*k} = \mathbf{x}^0$
- $\boldsymbol{\zeta}_{k(3)}^* = (\zeta_{j^*k}^{(2)}, \boldsymbol{\zeta}'_{k(3)})'$
- Make sure that invented doctor **but not invented patient** contribute to posterior  $\omega(\boldsymbol{\zeta}_{k(3)}^* | \mathbf{y}_{k(3)}, \mathbf{X}_{k(3)})$

$$\omega(\boldsymbol{\zeta}_{k(3)}^* | \mathbf{y}_{k(3)}, \mathbf{X}_{k(3)}) \propto \overbrace{\varphi(\zeta_{j^*k}^{(2)})}^{\text{Prior}} \omega(\boldsymbol{\zeta}_{k(3)} | \mathbf{y}_{k(3)}, \mathbf{X}_{k(3)})$$



# Prediction dataset:

## One new doctor and patient per hospital

Data (ignore gaps)				Data with invented observations			
id	doc	hosp	abuse	id	doc	hosp	abuse
1	1	1	0	1	1	1	0
2	1	1	1	2	1	1	1
<hr/>				<hr/>			
3	2	2	0	3	2	2	0
4	3	2	1	4	3	2	1
5	3	2	1	5	3	2	1
<hr/>				<hr/>			
				.	0	2	.

- Response variable **abuse** must be missing for invented observations
- Use unique (for that hospital) value of **doc**
- Can invent several new docs which can all have the same value of **doc**

# Prediction dataset:

## One new doctor and patient per hospital (continued)

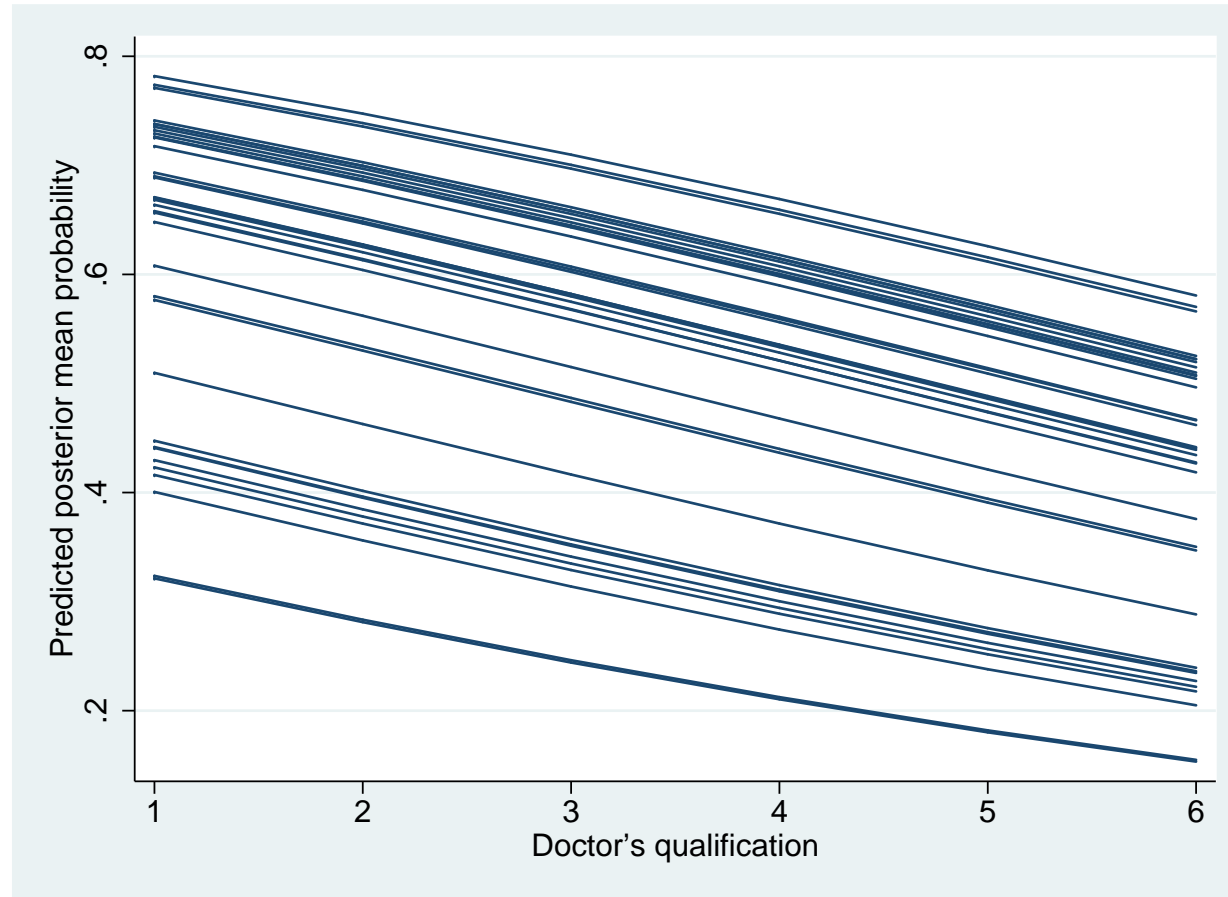
Data with invented observations

id	doc	hosp	abuse	terms for posterior		
				hospital	doctor	patient
1	1	1	0	$\varphi(\zeta_1^{(3)})$	$\varphi(\zeta_{11}^{(2)})$	$f(y_{111} \zeta_1^{(3)}, \zeta_{11}^{(2)})$
2	1	1	1			$f(y_{211} \zeta_1^{(3)}, \zeta_{11}^{(2)})$
.	0	1	.		$\varphi(\zeta_{01}^{(2)})$	1
3	2	2	0	$\varphi(\zeta_2^{(3)})$	$\varphi(\zeta_{22}^{(2)})$	$f(y_{322} \zeta_2^{(3)}, \zeta_{22}^{(2)})$
4	3	2	1		$\varphi(\zeta_{32}^{(2)})$	$f(y_{432} \zeta_2^{(3)}, \zeta_{32}^{(2)})$
5	3	2	1			$f(y_{532} \zeta_2^{(3)}, \zeta_{32}^{(2)})$
.	0	2	.		$\varphi(\zeta_{02}^{(2)})$	1

● Using `gllapred` with `mu` and `fsample` options:

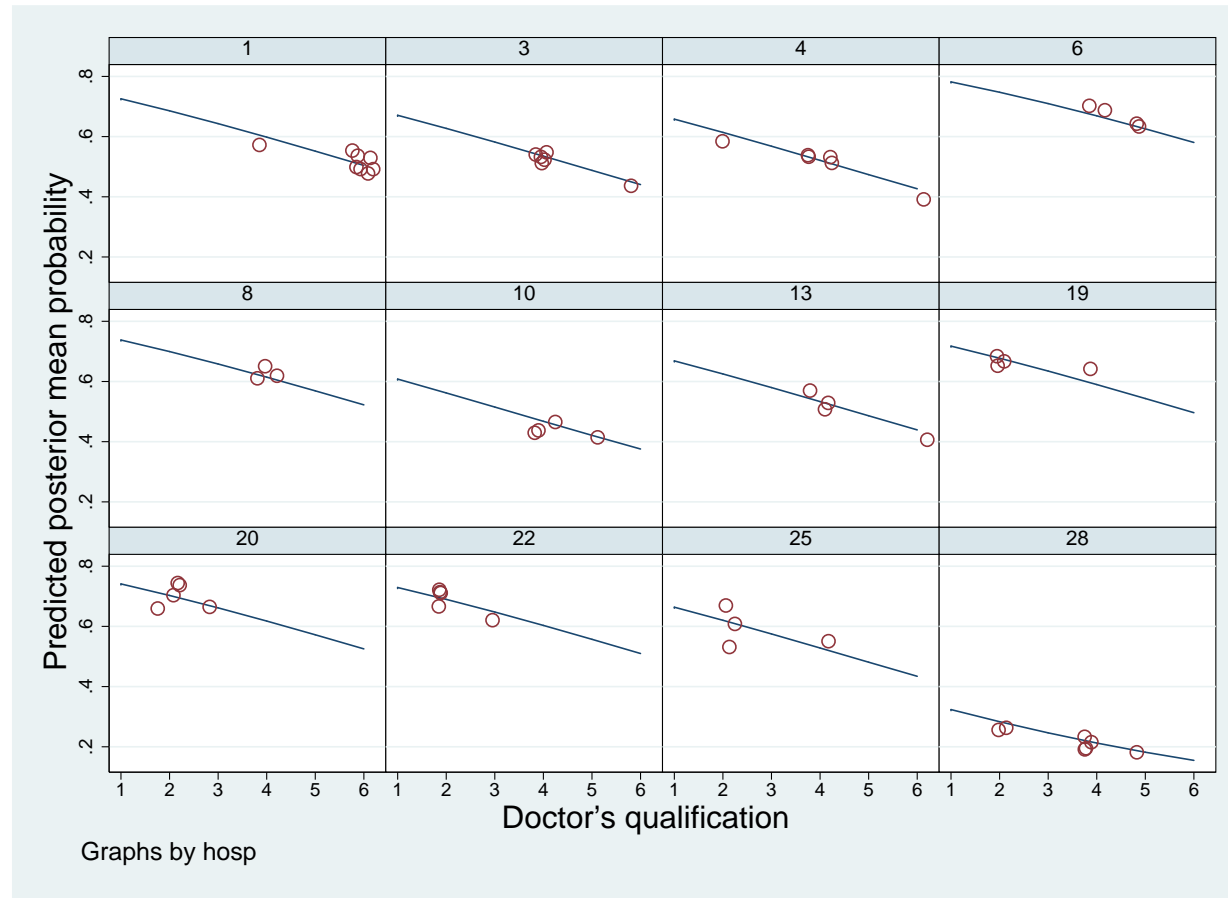
```
gllapred probh, mu fsample
```

# Example: Predicted probability for new patient of new doctor in existing hospital



- Each curve represents a hospital  
For each hospital: 6 new doctors with [DRed] = 1, 2, 3, 4, 5, 6  
For each doctor: 1 new patient with [Age] = 2, [Temp] = 1 (37°C), [Paymed] = 0, [Selfmed] = 0, [Wrdiag] = 0

# Example: Predicted probability for new patient of existing doctor in existing hospital



● 12 of the hospitals, with curves as in previous slide

● Dots represent doctors with [DRed] as observed

For each doctor: predicted probability for 1 new patient with [Age] = 2, [Temp] = 1, [Paymed] = 0, [Selfmed] = 0, [Wrdiag] = 0

# ***Predicted probability for new patient of new doctor in new hospital***

- Population-averaged or **marginal probability**:

$$\overline{\Pr}(y=1|\mathbf{x}^0) = \int \widehat{\Pr}(y=1|\mathbf{x}^0, \zeta_{jk}^{(2)}, \zeta_k^{(3)}) \varphi(\zeta_{jk}^{(2)}) \varphi(\zeta_k^{(3)}) d\zeta_{jk}^{(2)} d\zeta_k^{(3)}$$

- Cannot plug in means of random intercepts

$$\begin{aligned} \overline{\Pr}(y=1|\mathbf{x}^0) &\neq \widehat{\Pr}(y=1|\mathbf{x}^0, \zeta_{jk}^{(2)} = 0, \zeta_k^{(3)} = 0) \\ \text{mean} &\neq \text{median} \end{aligned}$$

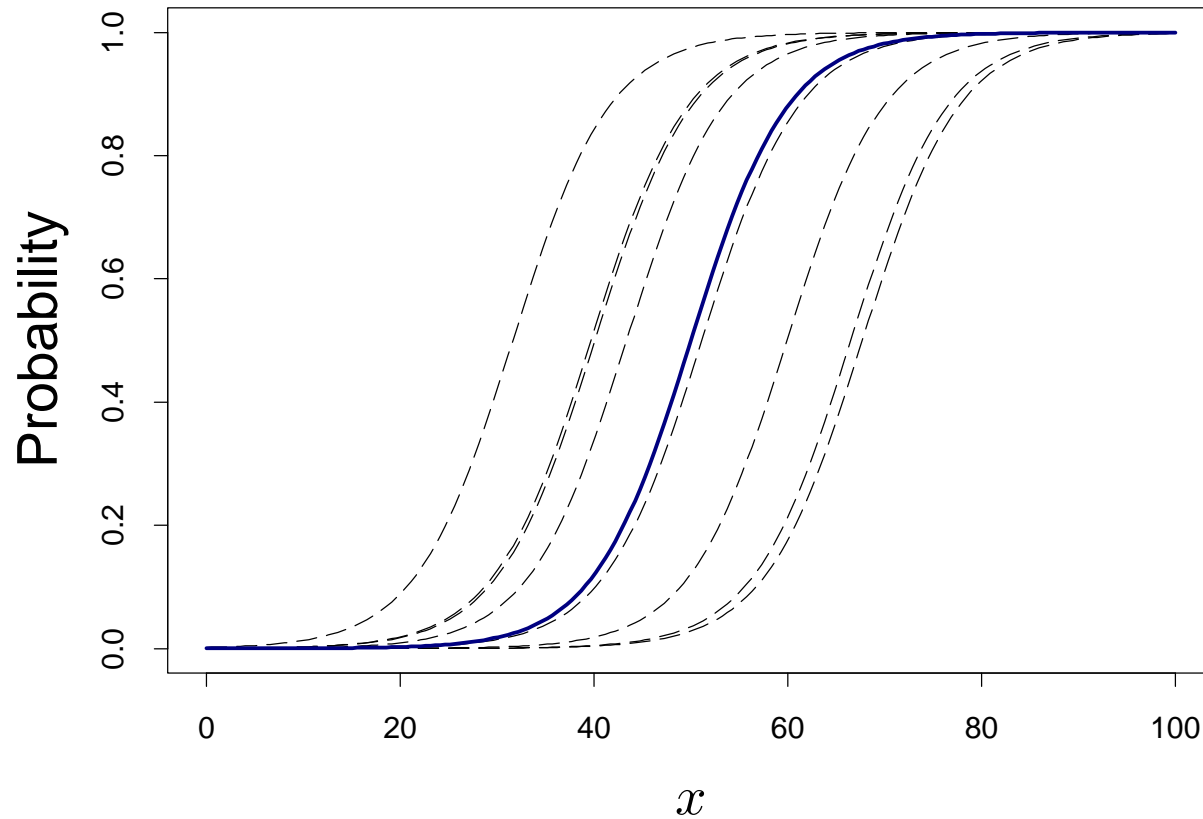
- Using `gllapred` with the `mu` and `marg` options:

```
gllapred prob, mu marg fsample
```

- Confidence interval, by sampling parameters from the estimated asymptotic sampling distribution of their estimates

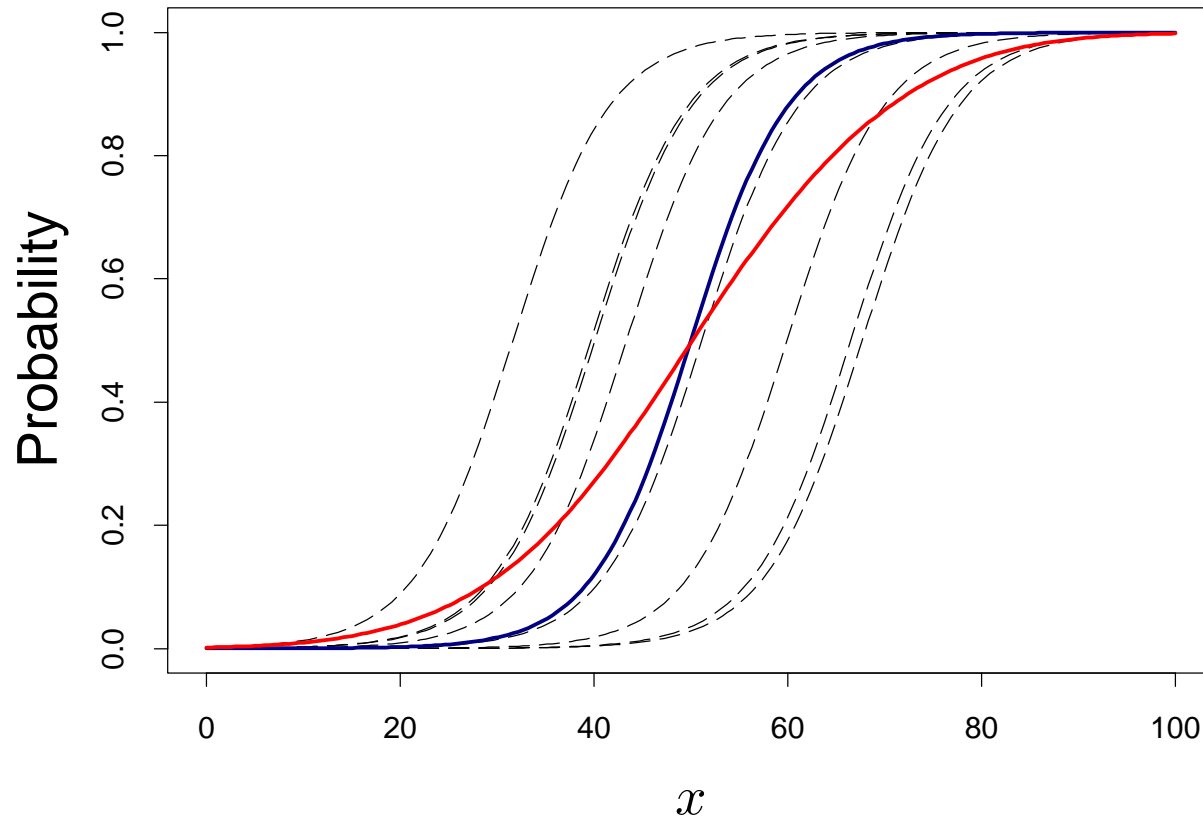
```
ci_marg_mu lower upper, level(95) dots
```

# Illustration Cluster-specific: versus population averaged probability



----- cluster-specific (random sample)  
——— median

# Illustration Cluster-specific: versus population averaged probability

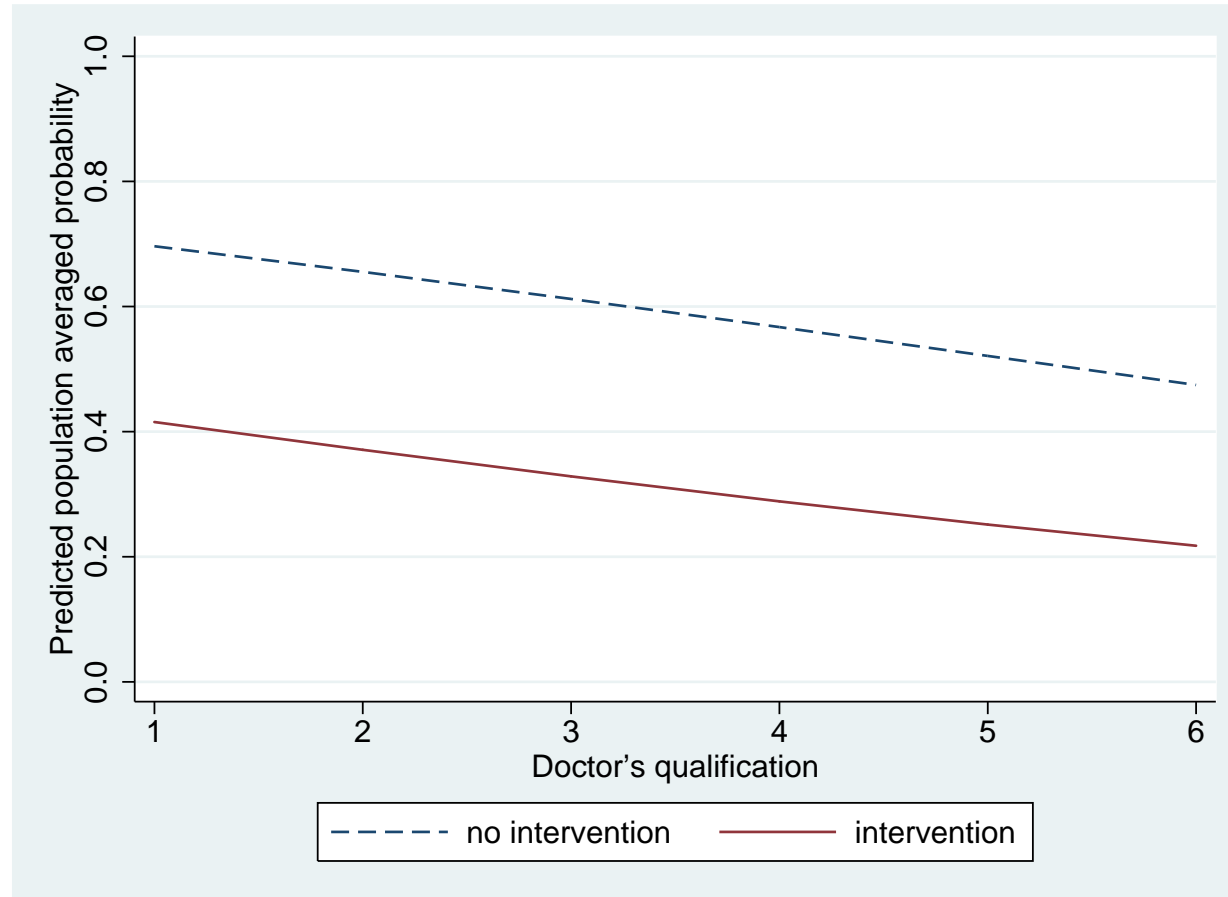


----- cluster-specific (random sample)

— median

— population averaged

# Example: Predicted probability for new patient of new doctor in new hospital

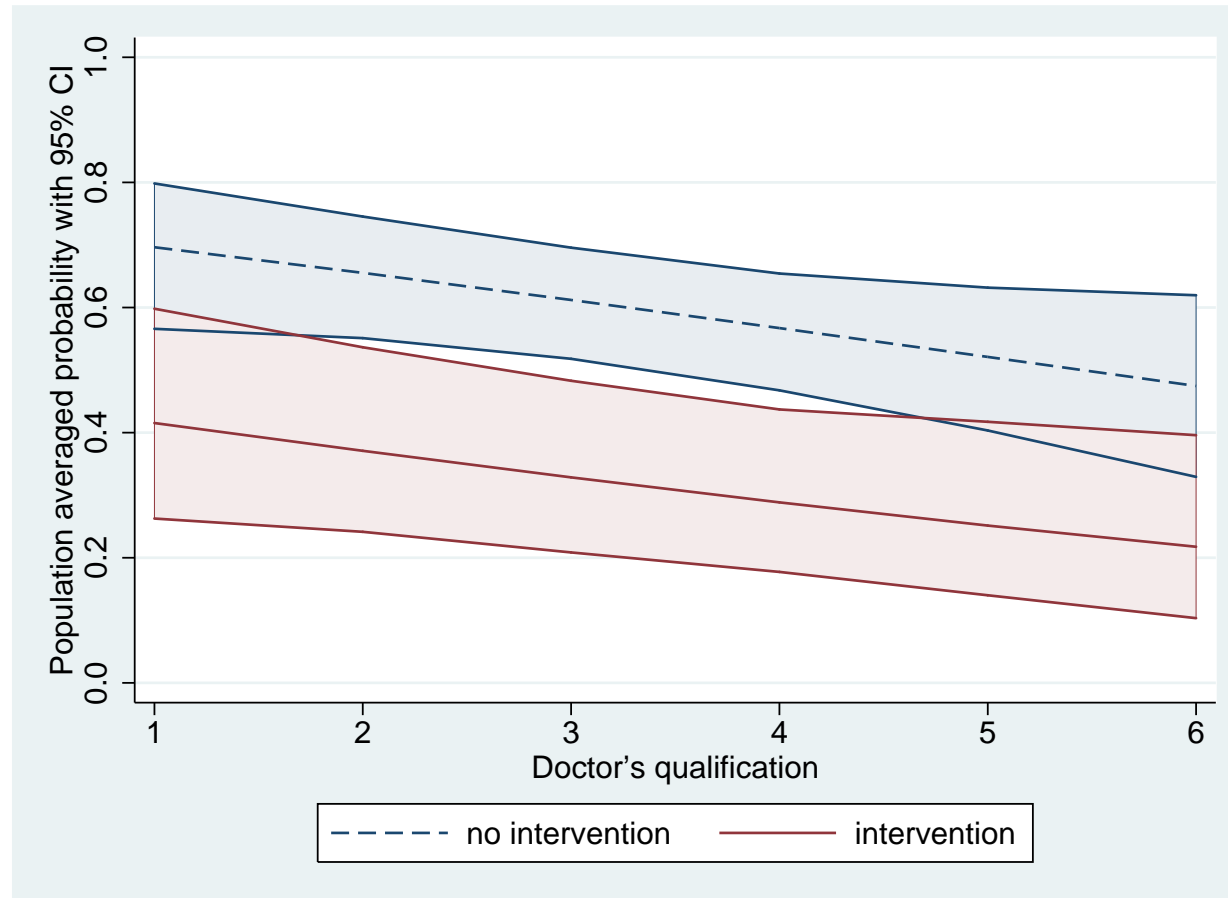


● Same patient covariates as before





# Example: Predicted probability for new patient of new doctor in new hospital

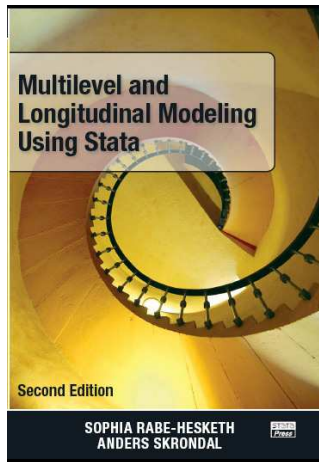


- Same patient covariates as before
- Confidence bands represent parameter uncertainty

## Concluding remarks

- Discussed:
  - Empirical Bayes (EB) prediction of random effects and CI using `gllapred`, ignoring parameter uncertainty
  - Prediction of different kinds of probabilities using `gllapred` after careful preparation of prediction dataset
  - Simulation-based CI for predicted marginal probabilities using new command `ci_marg_mu`
- Methods work for any GLLAMM model, including random-coefficient models and models for ordinal, nominal or count data
- Assumed normal random effects distribution
  - EB predictions not robust to misspecification of distribution
  - Could use nonparametric maximum likelihood in `gllamm`, followed by same `gllapred` and `ci_marg_mu` commands

# References



Rabe-Hesketh, S. and Skrondal, A. (2008). *Multilevel and Longitudinal Modeling Using Stata (2nd Edition)*. College Station, TX: Stata Press.

- Skrondal, A. and Rabe-Hesketh, S. (2008). Prediction in multilevel generalized linear models. *Journal of the Royal Statistical Society, Series A*, in press.
- Rabe-Hesketh, S., Skrondal, A. and Pickles, A. (2005). Maximum likelihood estimation of limited and discrete dependent variable models with nested random effects. *Journal of Econometrics* 128, 301-323.