AP Statistics – 11.2b	Name:		P(A) = P(A B)		
Soal: Chi-Square (χ ²) Test for Independence and Review the 3 Chi-Square Tests			$P(CHD) = \frac{190}{8474} = .02$ P(CHO LOWANGER)		
. Setting up Hypothesis for Test of Independence/ Assoc	ciation:		$=\frac{53}{310}=.017$		
Do Angry People Have More Heart Disease?			3110		
the second s					
A study followed a random sample of 8474 people with					
blood pressure for about four years. ¹¹ All the individuals of heart disease at the beginning of the study. Each per			EXPECTED COUNTS		
the Spielberger Trait Anger Scale test, which measures			Low MED HIGH		
a person is to sudden anger. Researchers also recorded each individual developed coronary heart disease (CHD)			ANGUA ANOGA MUSC		
includes people who had heart attacks and those who n		CHI	69.T 106.1		
medical treatment for heart disease. Here is a two-way summarizes the data:	table that	Nol	2040.3 40ATT		
		000	3,110 4,781 633		
Low anger Moderate anger High anger CHD 53 110 27	Total 190				
No CHD 3057 4621 606	8284		α.		
Total 3110 4731 633	8474		TMATRIX B		
1. Why is this a χ^2 Test for Independence? (1) This is 1 RANDOM SAM	PLE F	Rom	A POPULATION		
OF INTEREST (PROPLE	WITH /	Jorm	IAL BLOOD PRESSURE)		
A	CLASS	ei es	BYR		
(2) EACH OB SERVATION IS CATEGORICAL VARIABL	ES A	NGER	L LEVEL - LOW, MED, HIGH		
AND HEART DISEASE -					
2. There are 2 ways to write the hypothesis for this test					
	1 nonin	0.1	ASSOCIATION)		
OPTION 1	1 M TTM	ER.E I	EN ANGER LEVEL AND		
11 - DALGER AND HEALT DISEASE	R.	: Tuigi			
Ho: ANGER AND HEALT DISEASE ARE INDEPENDENT IN POPULATION	5 B1				
Ho: ANGER AND HEART DISEASE ARE INDEPENDENT IN POPULATION WITH NORMAL BLOUD PRESSURE.		EAAT	loemal BLOOD PRESSURE.		
Ho: ANGER AND HEALT DISEASE ARE INDEPENDENT IN POPULATION	Hat TH	EART N			

II. Does the data provide coinvincing evidence of an association between anger level and heart disease in the population of interest? Conduct an appropriate chi-square test to find out.

3. Conditions NORMAL BLOOD · RANDOM SAMPLE OF 8,474 PEOPLE WITH PRESSURE INDEPENDENT SAMPLING WITH OUT REPLACEMENT. CHECK 10% CONDITION. THERE ARE MORE THAN 10(8474) = 84,940 People with normal BP. Ó LARGE SAMPLE - ALL EXPECTED COUNTS ARE GREATER THAN 5. 0 SEE THE TABLE ABOVE

4. Mechanics
• Name the test:
$$2^{2}$$
 TEST OF INDEPENDENCE (OR Association)
• Significance level: $2^{2} \cdot 0 =$
• Sketch the graph $(x^{2} qriph is option!)$
• Degrees of freedom $df = (5-1)(2-1) = 2$
• Test Statistic
 $x^{2} = (55-69.7)^{2} + \dots = 16.08$
• P-value
PUelue = $P(x^{2} > 16.08) = .00032$
5. Conclusion in context
SINCE THE PURLUE IS UERY SMALL, WE RESECT Ho.

AND CONCLUDE THAT ANGER LEVEL AND HEART

DISEASE ARE NOT INDEPENDENT. THERE IS

SOFFICIENT EUTOENCE TO CONCLUDE THAT ANGER

LEVEL AND HEALT DISEASE ARE ASSOCIATED IN

THE POPULATION OF PEOPLE WITH NORMAL

BLOOD PRESSURE

III. χ^2 Test for Independence from start to finish – CYU page 718

HO: THERE IS NO ASSOCIATION BETWEEN EXCLUSIVE TERRITORY AND FRANCHISES SUCCESS IN NEW FRANCHISE FIRMS (VARIABLES ARE INDEPENDENT)

HA: THERE IS AN ASSOCIATION BETWEEN THE 2 UARIABLES

-Random - Sample of new franchises CONDITIONS Independent - there are more than 10 (170) new franchises in the U.S. Large Sample - the expected counts are all above 5. Expected Counts: 102.7, 20.3, 39.3, and 7.74.

III. χ^2 Test for Independence from start to finish – CYU page 718 (cont.)

TEST:
$$\chi^2$$
 TEST FUE IN DEPENDENCE
 $d = .01$
 $d f = (2-1)(2-1) = 1$
 $\chi^2 = (108 - 102.7)^2 + ... = 5.91$
 $puclue = p(\chi^2 > 5.91) = .015$
 $peak^{=0} = df - 2$
 $peak^{=0} = df - 2$
 $puclue = .015$
 $\chi^2 distribution$
 $peak^{=0} = df - 2$
 $puclue = .015$
 $puclue = .015$

CONCLUDE: Since the puclue (.015) is greater than d=. 01, FAIL TO Reject Ho. We do not have enough eurdence to conclude that there is an association between whether a franchise will be success ful and whether the franchise has an exclusive territory These 2 variables appear to be indendent. P (A)= P (A16) P(Success) = 123 177 -,72

P (Success | exclusive) 108/123 =.76

73

	18-24	25-34	35-44	45-54	55-64	65+	Total
Use Online Social Networks	137	126	61	38	15	9	386
Do Not Use Online Social Networks	46	95	143	160	130	124	698
Total	183	221	204	198	145	133	1084

An article in the Arizona Daily Star (April 9, 2009) included the following table:

Suppose that you decide to analyze this data using a chi-square test. However, without any additional information about how the data was collected, it isn't possible to know which chi-square test is appropriate.

Problem:

(a) Explain how you know that a goodness-of-fit test is not appropriate for analyzing these data.

- Since there are either two variables or two or more populations, a goodness-of-fit test is not appropriate.
- Goodness-of-fit tests are only appropriate when analyzing the distribution of <u>one variable</u> in <u>one population</u>.
- (b) Describe how these data could have been collected so that a test for homogeneity is appropriate.
 - To make a <u>test for homogeneity</u> appropriate, we would <u>need to take 6 independent</u> <u>random samples</u>, one from each age category, and then ask each person whether or not they use online social networks.
 - Or to make a <u>test for homogeneity</u>, we could take <u>2 independent random samples</u>, one of online social network users and one of people that do not use online social networks, and ask each member of each sample how old they are.
- (c) Describe how these data could have been collected so that a test for association/ independence is appropriate.
 - To make a test for association/independence appropriate:
 - we would <u>take one random sample</u> from the population <u>and</u>
 - ask each member about their age and whether or not they use online social networks.
 - This seems like the most reasonable method to collect the data, so a test of association/independence is probably the best choice. But, we can't know for sure unless we know how the data were collected.

V. Choose the Correct Inference Test

Example: Ibuprofen or acetaminophen?

In a study reported by the *Annals of Emergency Medicine* (March 2009), researchers conducted a randomized, double-blind clinical trial to compare the effects of ibuprofen and acetaminophen plus codeine as a pain reliever for children recovering from arm fractures. There were many response variables recorded, including the presence of any adverse effect, such as nausea, dizziness, and drowsiness. Here are the results:

	Ibuprofen	Acetaminophen plus Codeine	Total	
Adverse effects	36	57	93	
No adverse effects	86	55	141	
Total 122		112	234	

Problem:

a) Explain why it was important to investigate this question with a randomized, double-blind clinical trial.

IMPORTANCE OF RANDOMIZED EXPERIMENT

- It is important that the treatments in an experiment be randomly assigned so that the two treatment groups are roughly equivalent at the beginning of the study.
- Randomization reduced the effects of lurking (confounding) variables because these extraneous varibles should be balanced out among the two groups.
- IMPORTANCE OF DOUBLE-BLINDING
 - It is also important that both the patients and those administering the drugs and measuring the response do not know who is receiving which treatment.
 - This will keep the expectations the same for both groups of patients and not favor one treatment over the other.

Is the difference between the two groups statistically significant?

- b) Conduct a Chi-square Test Homogeneity.
- c) Conduct a 2-Sample Z-test for the difference of proportions.
- d) Why do these 2 test provide the same results?

b) <u>State</u>: χ^2 Test for Homogeneity using $\alpha = 0.05$:

Ho: There is no difference in the proportions of patients like these who suffer adverse effects when taking ibuprofen or acetaminophen plus codeine.

Ha: There is a difference in the proportions...

Conditions:

- **<u>Random</u>**: The treatments were assigned at random.
- Independent: Knowing if one subject had an adverse effect shouldn't give any additional information about the responses of other subjects, so the observations can be considered independent.
- Large Sample Size The expected counts (listed below) are all at least 5.

Expected counts	Ibuprofen	ofen Acetaminophen plus Codeine	
Adverse effects	48.5	44.5	93
No adverse effects	73.5	67.5	141
Total	122	112	234

Calculation:

- <u>Test Statistic</u> $\chi^2 = \frac{(36-48.5)^2}{48.5} + \dots = 11.15$
- <u>P-value</u> df= (2-1)(2-1) = 1

P-value = P($\chi^2 > 11.15$)= 0.0008



Conclude: Because the *P*-value is less than $\alpha = 0.05$, we reject H_0 . We have convincing evidence that there is a difference in the proportions of patients like these who suffer adverse effects when taking ibuprofen or acetaminophen plus codeine.

c) State: 2-Sample Z-test for the difference of proportions using $\alpha = 0.05$:

$$p_1$$
 = the true proportion of adverse effects for I bup users
 p_A = the true proportion of adverse effects for Acet. Users
 $H_0: p_I - p_A = 0$
 $H_a: p_I - p_A \neq 0$

Conditions: are met, we will perform a chi-square test for.

- Random: same
- Independent: same
- Successes and failures are all greater than 10-36,86,57,55 • Normal:

Calculation:

CALC

P.

1

• Pooled Proportion

$$P_{I} = \frac{36}{122} = .295$$

 $P_{C} = \frac{36+57}{122+112} = .397$
 $P_{A} = \frac{57}{112} = .509$

• Test Statistic
• Produce Prove Integrate
• Since we are comparing the proportion of subjects with adverse effects for just two treatments, we can also use a
• Since we are comparing the proportion of subjects with adverse effects for just two treatments, we can also use a
• Since we are comparing the proportion of subjects with adverse effects for just two treatments, we can also use a
• Using technology, z = -3.339 and P-value = 0.0008
• The P-value is exactly the same as the P-value from the chi-square test and
$$z^2 = (-3.339)^2 = 11.15 = \chi^2$$
.
• This is
Proportion of the following hypotheses:
• Using technology, z = -3.339 and P-value from the chi-square test and $z^2 = (-3.339)^2 = 11.15 = \chi^2$.