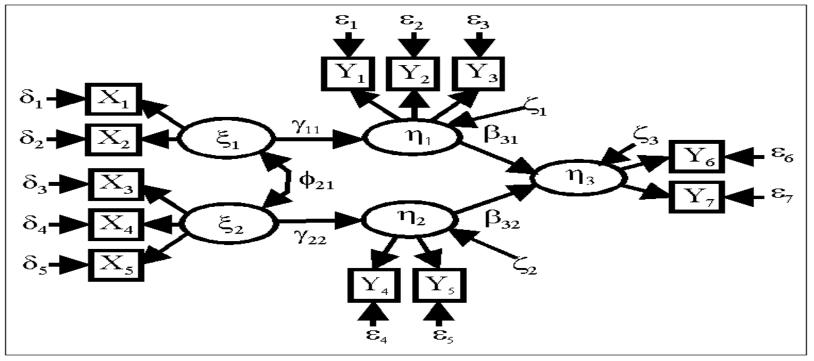
Structural Equation Modeling (SEM)

Ron D. Hays, Ph.D.

http://twitter.com/rondhays

November 15, 2010, 15:01-15:59pm

UCLA RCMAR/EXPORT Seminar Series



Acknowledgment of Support

✓ UCLA Resource Center for Minority Aging Research/Center for Health Improvement in Minority Elderly (RCMAR/CHIME), P30AG021684.

✓ UCLA/DREW Project EXPORT, 2P20MD000182



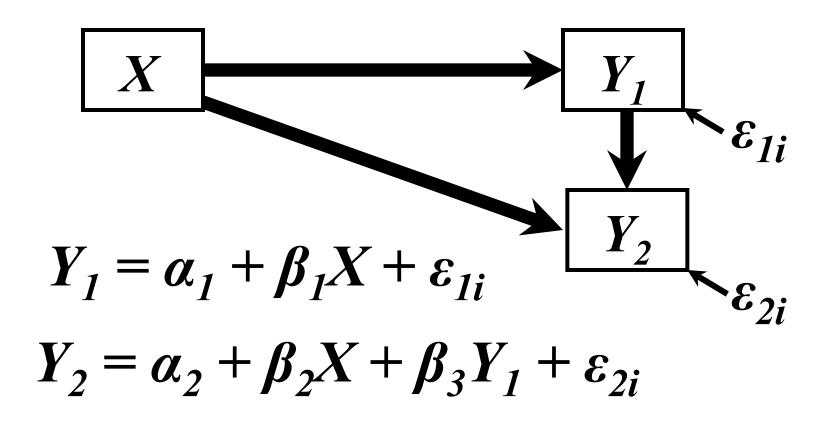


Example

Wouters, E. Heunis, C. van Rensburg, D., & Meulemans, H. (2009). Physical and emotional health outcomes after 12 months of public-sector antiretroviral treatment in the Free State Province of South Africa: A longitudinal study using structural equation modelling. BMC Public Health 9: 103.

http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2678117/

Path Analysis



Fit Indices (> 0.94; < 0.06 cutoffs)

• Normed fit index:
$$\frac{\chi_{null}^2 - \chi_{model}^2}{\chi_{null}} = \frac{\chi_{null}^2 - \chi_{model}^2}{\chi_{model}}$$

• Non-normed fit index:

$$\frac{\chi_{null}}{df_{null}} - \frac{\chi_{model}}{df_{model}}$$

$$\left(\begin{array}{c} \chi^2_{null} \\ \hline df_{null} \end{array}\right)$$
 - 1

• Comparative fit index:
$$1 - \left[\frac{\chi_{model}^2 - df_{model}}{\chi_{null}^2 - df_{null}} \right]$$

• Root Mean Square Error of
$$\sqrt{\frac{Q_{model}}{\text{df}_{model}}} - \frac{1}{N}$$
 e.g., $Q = \frac{x_{model}^2}{N}$

e.g.,
$$Q = \frac{x_{model}^2}{N}$$

Methods (Public health sector in Free State Province of South African)

- Baseline
 - <6 months of antiretroviral treatment (ART)</p>
- Follow-up
 - < 12 months ART</p>
- Variables
 - ART duration (independent variable)
 - Adverse effects of ART (None, Mild, Disruptive)
 - Do you have side effects? If yes, list them and tell us how disruptive they are?
 - Self-reported health (None, Some/moderate, Extreme)
 - EQ-5D mobility, usual activities, pain, and self-care (None, Some/moderate, Extreme)
 - EQ-5D anxiety/depression item, overall life satisfaction (5 response categories), global happiness item

Your own health state today

By placing a tick in one box in each group below, please indicate which statement best describes your own health state today.

Do not tick more than one box in each group.

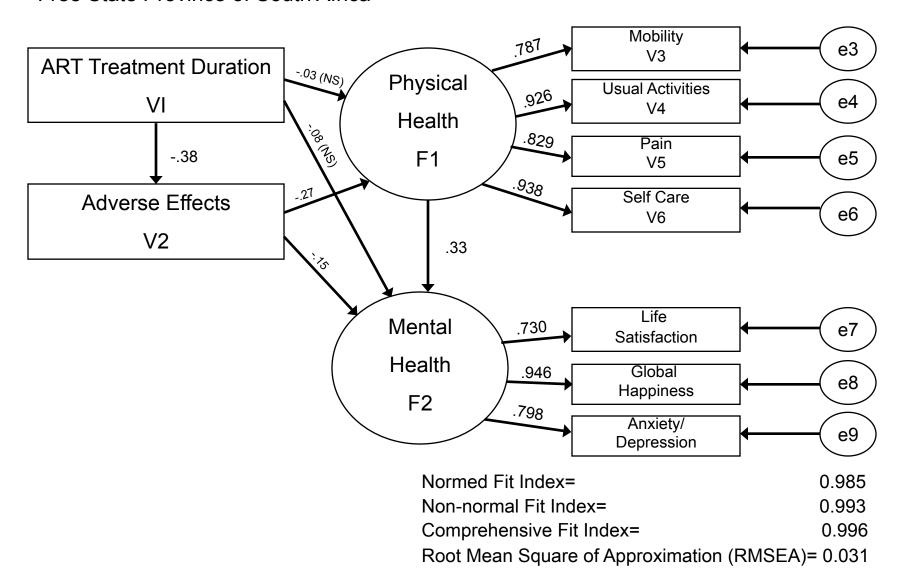
Mobility	
I have no problems in walking about	
I have some problems in walking about	
I am confined to bed	
Self-Care	
I have no problems with self-care	
I have some problems washing and dressing myself	
I am unable to wash or dress myself	
Usual Activities (eg. work, study, housework, family or leisure	activities)
I have no problems with performing my usual activities	
I have some problems with performing my usual activities	
I am unable to perform my usual activities	4
Pain/Discomfort	
I have no pain or discomfort	
I have moderate pain or discomfort	
I have extreme pain or discomfort	
Anxiety/Depression	
I am not anxious or depressed	
I am moderately anxious or depressed	
I am extremely anxious or depressed	

Sample Characteristics

- n = 268 at baseline (n = 234 at follow-up)
- Mean age of 38 years (SD = 9)
- 67% women

- 40% reported some pain
- 30% reported some anxiety or depression
- 19% reported some
 - problems with walking about
 - problems with usual activities

Wouters, E., Heunis, C. Von Rensberg, D., & Meulemens, H. <u>BMC Public Health</u> 2009.9:103.

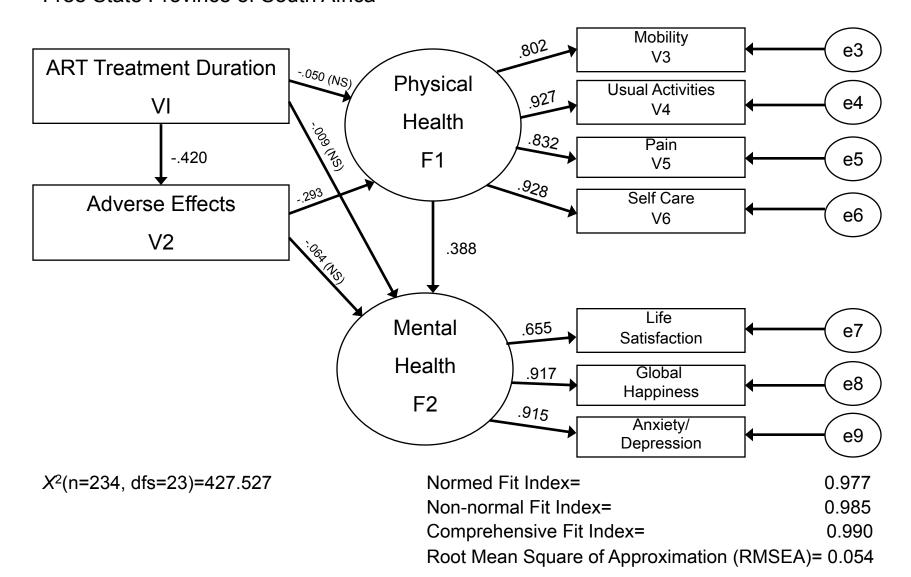


EQS 6.1 for Windows

Bentler, PM. (2006). <u>EQS 6 Structural</u> <u>Equations Program Manual</u>. Encino, CA: Multivariate Software, Inc.

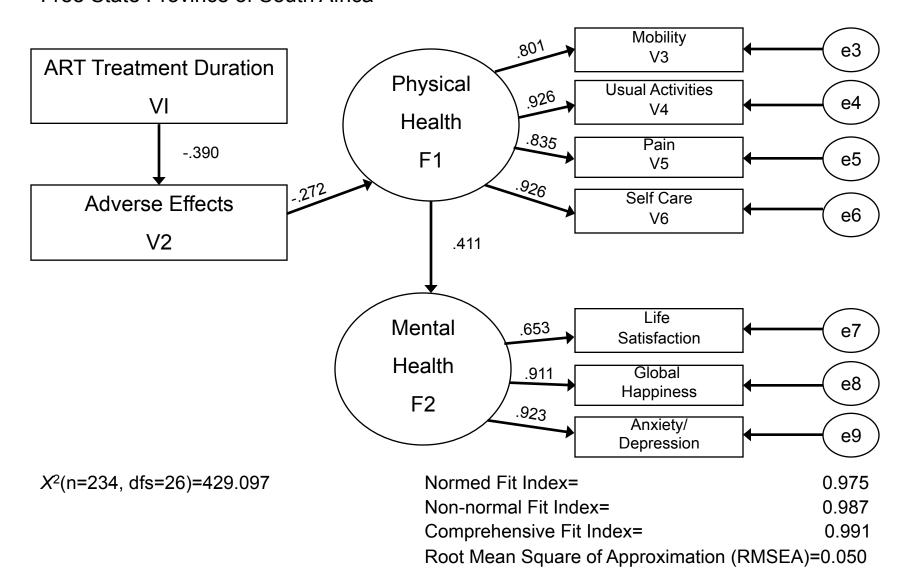
Normal theory estimators: ULS, GLS, ML Other estimators: ML robust, AGLS (ADF)

Wouters, E., Heunis, C. Von Rensberg, D., & Meulemens, H. <u>BMC Public Health</u> 2009.9:103.



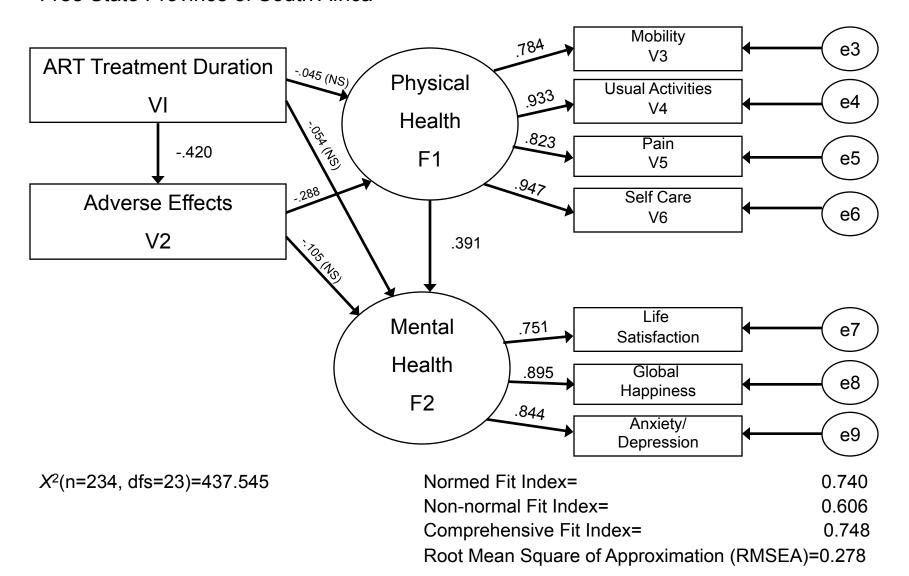
```
/TITLE
  Wouters et al #11s November 11 2010
/SPECIFICATIONS
VARIABLES=9; CASES=234;
METHOD=LS;
/LABELS
V1=ARV; V2=ADVERSE; V3=MOBILITY; V4=USUALACT; V5=PAIN; V6=SELFCARE; V7=LIFESAT;
V8=PLEASANT; V9=LACKAFF; F1=PHYOOL; F2=EMOOOL;
/PRINT
FIT=ALL; RETEST='WOUTERS.EOS'; EFFECTS=YES;
/EOUATIONS
V3=1*F1 + E3;
V4=1*F1 + E4;
V5=1*F1 + E5;
V6=1*F1 + E6;
V7=1*F2 + E7;
V8=1*F2 + E8;
V9=1*F2 + E9;
V2=1*V1+E2;
F1=1*V1 + 1*V2 + 1.000 D1;
F2=1*V1 + 1*V2 + 1*F1 + 1.000 D2;
/VARIANCES
V1=10*;E2 TO E9=5*;D1=1;D2=1;
/TECHNICAL
ITR=200;
/LMTEST
set=PVV, PFF, PVV, PEE, GFF, GFD, GFE;
/MAT
1.000
-0.420 1.000
0.065 -0.260 1.000
0.080 -0.297 0.713 1.000
 0.037 -0.169 0.700 0.757 1.000
 0.071 -0.224 0.740 0.888 0.776 1.000
 0.143 -0.143 0.068 0.131 0.198 0.163 1.000
-0.074 -0.261 0.258 0.448 0.347 0.311 0.674 1.000
 0.079 -0.019 0.435 0.330 0.328 0.403 0.657 0.746 1.000
/END
```

Wouters, E., Heunis, C. Von Rensberg, D., & Meulemens, H. <u>BMC Public Health</u> 2009,9:103.



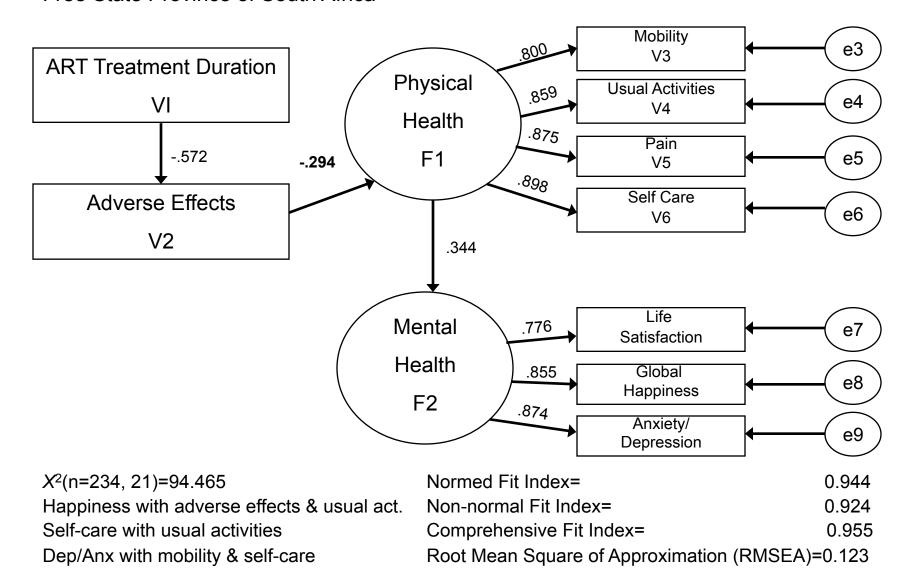
```
/TITLE
  Wouters et al #21s November 11 2010
/SPECIFICATIONS
VARIABLES=9; CASES=234;
METHOD=LS;
/LABELS
V1=ARV; V2=ADVERSE; V3=MOBILITY; V4=USUALACT; V5=PAIN; V6=SELFCARE; V7=LIFESAT;
V8=PLEASANT; V9=LACKAFF; F1=PHYOOL; F2=EMOOOL;
/PRINT
FIT=ALL; RETEST='WOUTERS.EOS'; EFFECTS=YES;
/EOUATIONS
V3=1*F1 + E3;
V4=1*F1 + E4;
V5=1*F1 + E5;
V6=1*F1 + E6;
V7=1*F2 + E7;
V8=1*F2 + E8;
V9=1*F2 + E9;
V2=1*V1+E2;
F1=1*V2 + 1.000 D1;
F2=1*F1 + 1.000 D2;
/VARIANCES
V1=10*;E2 TO E9=5*;D1=1;D2=1;
/TECHNICAL
ITR=200;
/LMTEST
set=PVV, PFF, PVV, PEE, GFF, GFD, GFE;
/MAT
1.000
-0.420 1.000
0.065 -0.260 1.000
0.080 -0.297 0.713 1.000
 0.037 -0.169 0.700 0.757 1.000
0.071 -0.224 0.740 0.888 0.776 1.000
 0.143 -0.143 0.068 0.131 0.198 0.163 1.000
-0.074 -0.261 0.258 0.448 0.347 0.311 0.674 1.000
 0.079 -0.019 0.435 0.330 0.328 0.403 0.657 0.746 1.000
/END
```

Wouters, E., Heunis, C. Von Rensberg, D., & Meulemens, H. <u>BMC Public Health</u> 2009,9:103.



```
/TITLE
  Wouters et al #1ml November 12 2010
/SPECIFICATIONS
VARIABLES=9; CASES=234;
METHOD=ML;
/LABELS
V1=ARV; V2=ADVERSE; V3=MOBILITY; V4=USUALACT; V5=PAIN; V6=SELFCARE; V7=LIFESAT;
V8=PLEASANT; V9=LACKAFF; F1=PHYOOL; F2=EMOOOL;
/PRINT
FIT=ALL; RETEST='WOUTERS.EOS'; EFFECTS=YES;
/EOUATIONS
V3=1*F1 + E3;
V4=1*F1 + E4;
V5=1*F1 + E5;
V6=1*F1 + E6;
V7=1*F2 + E7;
V8=1*F2 + E8;
V9=1*F2 + E9;
V2=1*V1+E2;
F1=1*V1 + 1*V2 + 1.000 D1;
F2=1*V1 + 1*V2 + 1*F1 + 1.000 D2;
/VARIANCES
V1=10*;E2 TO E9=5*;D1=1;D2=1;
/TECHNICAL
ITR=200;
/LMTEST
set=PVV, PFF, PVV, PEE, GFF, GFD, GFE;
/MAT
1.000
-0.420 1.000
0.065 -0.260 1.000
 0.080 -0.297 0.713 1.000
 0.037 -0.169 0.700 0.757 1.000
 0.071 -0.224 0.740 0.888 0.776 1.000
 0.143 -0.143 0.068 0.131 0.198 0.163 1.000
-0.074 -0.261 0.258 0.448 0.347 0.311 0.674 1.000
 0.079 -0.019 0.435 0.330 0.328 0.403 0.657 0.746 1.000
/END
```

Wouters, E., Heunis, C. Von Rensberg, D., & Meulemens, H. <u>BMC Public Health</u> 2009.9:103.



```
/TITLE
  Wouters et al #2ml November 12 2010
/SPECIFICATIONS
VARIABLES=9; CASES=234;
METHOD=ML;
/LABELS
V1=ARV; V2=ADVERSE; V3=MOBILITY; V4=USUALACT; V5=PAIN; V6=SELFCARE; V7=LIFESAT;
V8=PLEASANT; V9=LACKAFF; F1=PHYOOL; F2=EMOOOL;
/PRINT
FIT=ALL; RETEST='WOUTERS2.EOS'; EFFECTS=YES;
/EOUATIONS
V3=1*F1 + E3;
V4=1*F1 + E4;
V5=1*F1 + E5;
V6=1*F1 + E6;
V7=1*F2 + E7;
V8=1*F2 + E8;
V9=1*F2 + E9;
V2=1*V1+E2;
F1=1*V2 + 1.000 D1;
F2=1*F1 + 1.000 D2;
/VARIANCES
V1=10*;E2 TO E9=5*;D1=1;D2=1;
/COV
E8, E4=1*; E8, E2=1*; E9, E3=1*; E9, E6=1*; E6, E4=1*;
/TECHNICAL
ITR=200;
/MAT
1.000
-0.420 1.000
0.065 -0.260 1.000
 0.080 -0.297 0.713 1.000
 0.037 -0.169 0.700 0.757 1.000
 0.071 -0.224 0.740 0.888 0.776 1.000
 0.143 -0.143 0.068 0.131 0.198 0.163 1.000
-0.074 -0.261 0.258 0.448 0.347 0.311 0.674 1.000
 0.079 -0.019 0.435 0.330 0.328 0.403 0.657 0.746 1.000
/END
```

Dr. Wouters:

Can you provide the LISREL output from the path model show in Figure 1? I am trying to figure out what estimation approach (e.g., ML) you used in fitting the model.

===========

Dear Dr. Hays

Thanks for showing interest in my work. I am also glad that someone is interested in the statistical side of the story :-)

I would not dare to call myself an SEM-specialist, but I really like the versatile nature of the technique. In the paper you cited I first used ML, but after the comments of a reviewer I re-ran the analysis using WLS because I have a rather small sample size. The results were similar. The results shown should be the ones from the WLS-analysis.

Unfortunately, I changed computers after finishing my PhD, so I do not have the Lisrel-files anymore (I also do not use Lisrel anymore. I now use MPIus (because it can also handle dependent dichotomous variables)), but I certainly still have the raw dataset. If needed, I can try to reconstruct and rerun the analysis in MPIus, or even in Lisrel (I surely still have a copy of it somewhere).

However, I am now preparing to go (and present) at the First Global Symposium on Health Systems Research in Montreux (15-19 Nov), so it may take a little while...

Again thanks for your interest in my paper,

Best regards,

Edwin

Summary



The longer the duration of ART treatment the less the adverse effects and (in turn) the better the health (physical and mental).

 Duration has positive indirect effects on physical and mental health by reducing adverse effects

Thank you!

http://assets.cambridge.org/97805217/81336/sample/9780521781336ws.pdf http://www.cob.unt.edu/slides/Paswan/BUSI6280/Anderson_Gerbing_1988.pdf

Hays, R. D., Revicki, D., & Coyne, K. (2005). Application of structural equation modeling to health outcomes research. Evaluation and the Health Professions, 28, 295-309.

Basic Principles

O. Mueller