

Lecture 4, October 2nd, 2025

1. Beta-binomial hierarchical model + rstan implementation
2. Bayesian analysis of SIR model of infectious disease dynamics

Beta-binomial hierarchical model

Let's consider a generalization of our problem from lecture 1, where we wanted to estimate a population proportion from a finite sample. Now, we want to estimate multiple proportions and we suspect that these proportions may be similar.

Let $y^T = (y_1, \dots, y_m)$, where

$$y_i | \theta_i \sim \text{Binomial}(n_i, \theta_i), \quad i = 1, \dots, m$$

and y_i s are independent given θ_i s. We put the following prior on θ_i s:

$$\theta_1, \dots, \theta_m \stackrel{\text{iid}}{\sim} \text{Beta}(\alpha, \beta)$$

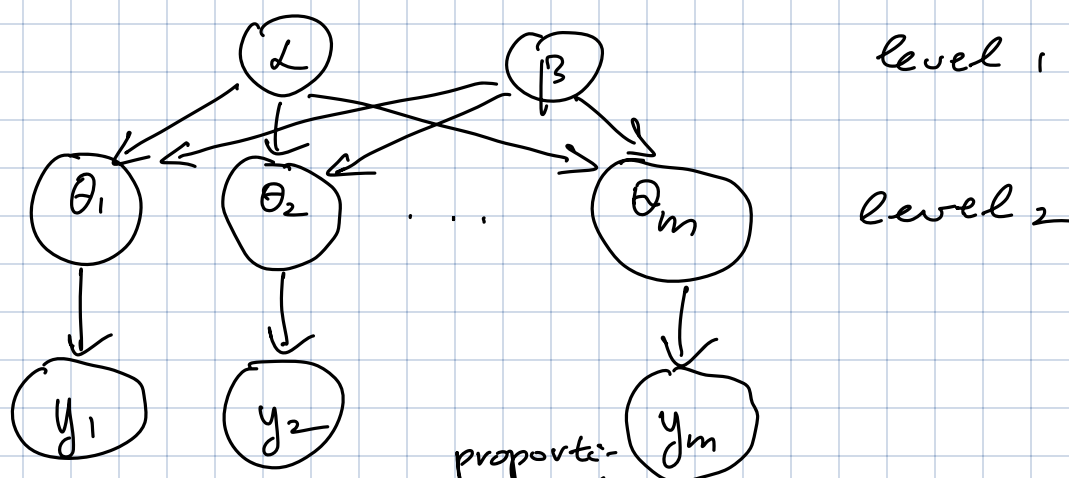
But here is a big difference: α and β are unknown parameters that get their own priors:

$$\alpha \sim \text{Exp}(\lambda_\alpha)$$

$$\beta \sim \text{Exp}(\lambda_\beta)$$

As you can see, there are 2 layers of parameters $\Rightarrow$

=> the word "hierarchical" in the name
 In statistics, we often describe data generating models via a graphical model / directed acyclic graph (DAG):



Posterior: $p(\theta_1, \dots, \theta_m, \alpha, \beta | \underline{y}) \propto \underbrace{\prod_{i=1}^m \Pr(y_i | \theta_i)}_{\text{likelihood}} \times \underbrace{\prod_{i=1}^m p(\theta_i | \alpha, \beta)}_{\text{prior 1}} \times \underbrace{p(\alpha) \times p(\beta)}_{\text{prior 2}}$

proportional to

joint prior

In our computer demo, $n_i = \# \text{rats}$
 in a rat colony under study and $y_i = \# \text{ of tumor occurrences in rat colony } i$.

Hamiltonian Monte Carlo (HMC)

HMC is a particular type of Rosenbluth-Hastings algorithm, coupled with data augmentation. Uses Hamiltonian dynamics to generate R-H proposals. Works well in high dimensions, especially the no-u-turn-sampler (NUTS) variant of HMC.

Implemented in

- Stan (C++, but can be called from R, Python, and Julia)

- Pyro (Python)
- Turing (Julia)
- ⋮
- many more

computer demo here

Fitting ODE-based SIR model to case data

When population size $N \rightarrow \infty$, many stochastic models converge to deterministic models.

Susceptible-Infectious-Removed (SIR) model

$$\frac{dS(t)}{dt} = -\beta S(t)I(t)$$

$$\frac{dI(t)}{dt} = \beta S(t)I(t) - \gamma I(t)$$

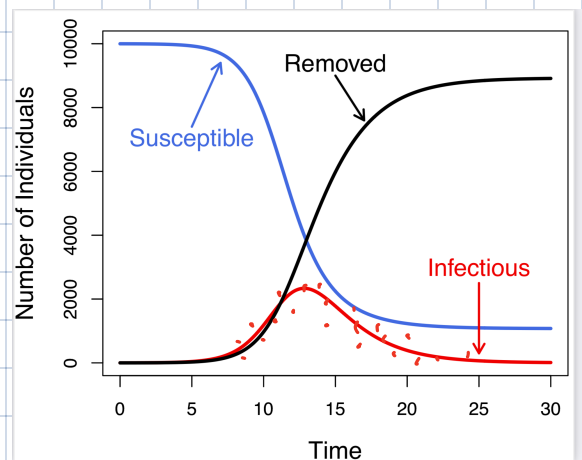
$$\frac{dR(t)}{dt} = \gamma I(t)$$

$$\frac{dN_{SI}(t)}{dt} = \beta S(t) \cdot I(t)$$

$S(0), I(0) \leftarrow$ initial conditions

Data: $y = (y_1, \dots, y_n)$, where

$y_i =$ number of **new** cases in interval $[t_i, t_{i+1})$



$$S(t) + I(t) + R(t) = N$$

$N_{SI}(t)$ = cumulative incidence or the total number of infections up to time t

$$\Delta N_{SI}^{(i)} = N_{SI}(t_{i+1}) - N_{SI}(t_i) = \# \text{ of new infections (observed and unobserved) during interval } [t_i, t_{i+1})$$

We assume that given model parameters y_i 's are independent and

$$y_i \sim \text{Negative-Binomial}(\mu = \mathcal{P} \times \Delta N_{SI}^{(i)}, \sigma^2 = \mu \times (1 + \frac{\mu}{\varphi}))$$

$\mathcal{P}$ - case detection probability

φ - overdispersion parameter

μ - mean of NB

Q: Why use Negative-Binomial?

A: Convenient for count data and more flexible than Poisson distribution

Likelihood: $\Pr(y_1, \dots, y_n | \beta, \mathcal{D}, \mathcal{P}, \varphi, S(0), I(0)) = \prod_{i=1}^n \underbrace{\Pr(y_i | \beta, \mathcal{D}, \mathcal{P}, \varphi, S(0), I(0))}_{\text{NB pmf}}$

Posterior: $p(\beta, \mathcal{D}, \mathcal{P}, \varphi, S(0), I(0) | y_1, \dots, y_n) \propto$

$$\propto \Pr(y_1, \dots, y_n | \beta, \mathcal{D}, \mathcal{P}, \varphi, S(0), I(0)) \times \underbrace{p(\beta, \mathcal{D}, \mathcal{P}, \varphi, S(0), I(0))}_{\text{need to specify priors}}$$

computer demo here

Further reading materials

