

# Consequences of Ignoring Clustering in Linear Regression

Georgia Ntani (✉ [gn@mrc.soton.ac.uk](mailto:gn@mrc.soton.ac.uk))

MRC Lifecourse Epidemiology Unit <https://orcid.org/0000-0001-7481-6860>

Hazel Inskip

MRC Lifecourse Epidemiology Unit, University of Southampton

Clive Osmond

MRC Lifecourse Epidemiology Unit, University of Southampton

David Coggon

MRC Lifecourse Epidemiology Unit, University of Southampton

---

## Research article

**Keywords:** Clustering, linear regression, random intercept model, consequences, simulation, comparison, bias

**Posted Date:** November 2nd, 2020

**DOI:** <https://doi.org/10.21203/rs.3.rs-98069/v1>

**License:** © ⓘ This work is licensed under a Creative Commons Attribution 4.0 International License.

[Read Full License](#)

---

**Version of Record:** A version of this preprint was published at BMC Medical Research Methodology on July 7th, 2021. See the published version at <https://doi.org/10.1186/s12874-021-01333-7>.

1 **Consequences of ignoring clustering in linear regression**

2 Georgia Ntani<sup>1,2</sup>, Hazel Inskip<sup>1</sup>, Clive Osmond<sup>1</sup>, David Coggon<sup>1,2</sup>

3 <sup>1</sup> Medical Research Council Lifecourse Epidemiology Unit, University of Southampton, United  
4 Kingdom

5 <sup>2</sup> Medical Research Council Versus Arthritis Centre for Musculoskeletal Health and Work, Medical  
6 Research Council Lifecourse Epidemiology Unit, University of Southampton, United Kingdom

7 **Abstract**

8 *Background*

9 Clustering of observations is a common phenomenon in epidemiological and clinical research.  
10 Previous studies have highlighted the importance of using multilevel analysis to account for such  
11 clustering, but in practice, methods ignoring clustering are often used. We used simulated data to  
12 explore the circumstances in which failure to account for clustering in linear regression analysis could  
13 lead to importantly erroneous conclusions.

14 *Methods*

15 We simulated data following the random-intercept model specification under different scenarios of  
16 clustering of a continuous outcome and a single continuous or binary explanatory variable. We fitted  
17 random-intercept (RI) and cluster-unadjusted ordinary least squares (OLS) models and compared the  
18 derived estimates of effect, as quantified by regression coefficients, and their estimated precision. We  
19 also assessed the extent to which coverage by 95% confidence intervals and rates of Type I error were  
20 appropriate.

21 *Results*

22 We found that effects estimated from OLS linear regression models that ignored clustering were on  
23 average unbiased. The precision of effect estimates from the OLS model was overestimated when  
24 both the outcome and explanatory variable were continuous. By contrast, in linear regression with a

25 binary explanatory variable, in most circumstances, the precision of effects was somewhat  
26 underestimated by the OLS model. The magnitude of bias, both in point estimates and their precision,  
27 increased with greater clustering of the outcome variable, and was influenced also by the amount of  
28 clustering in the explanatory variable. The cluster-unadjusted model resulted in poor coverage rates  
29 by 95% confidence intervals and high rates of Type I error especially when the explanatory variable  
30 was continuous.

### 31 *Conclusions*

32 In this study we identified situations in which an OLS regression model is more likely to affect  
33 statistical inference, namely when the explanatory variable is continuous, and its intraclass correlation  
34 coefficient is higher than 0.01. Situations in which statistical inference is less likely to be affected  
35 have also been identified.

36 **Keywords:** Clustering, linear regression, random intercept model, consequences, simulation,  
37 comparison, bias

38 **Introduction**

39 Clinical and epidemiological research often uses some form of regression analysis to explore the  
40 relationship of an outcome variable to one or more explanatory variables. In many cases, the study  
41 design is such that participants can be grouped into discrete, non-overlapping subsets (clusters), such  
42 that the outcome and/or explanatory variables vary less within than between clusters. This might  
43 occur, for example, in cluster-randomised controlled trials (with the units of randomisation defining  
44 clusters), or in a multi-centre observational study (the participants from each centre constituting a  
45 cluster). The extent to which a variable is “clustered” can be quantified by the intra-class correlation  
46 coefficient (ICC), which is defined as the ratio of its variance between clusters to its total variance  
47 (both between and within clusters) (1).

48 Clustering has implications for statistical inference from regression analysis if the outcome variable is  
49 clustered after the effects of all measured explanatory variables are taken into account. If allowance is  
50 not made for such clustering as part of the analysis, parameter estimates and/or their precision may be  
51 biased. This possibility can be demonstrated by a hypothetical study of hearing impairment and noise  
52 exposure, in which observations are made in four different cities (clusters), as illustrated in Figure 1.  
53 In this example, the effect of cumulative noise exposure on hearing impairment is the same within  
54 each city (i.e. the regression coefficient for hearing impairment on noise exposure is the same in each  
55 cluster) (Figure 1a). However, after allowance for noise exposure, hearing impairment differs by city,  
56 such that it varies more between the clusters than within them. An analysis that ignored this  
57 clustering would give a misleading estimate for the regression coefficient of hearing loss on noise  
58 exposure (Figure 1b). Moreover, even if the distribution of noise exposures in each city was similar,  
59 so that the regression coefficient was unbiased, its precision would be underestimated as it would  
60 have made no allowance for the differences between clusters (at the intercept) (Figure 1c).

61 Where, as in the example above, the number of clusters is small relative to the total number of  
62 participants in the study sample, a categorical variable that distinguishes clusters can be treated as an  
63 additional explanatory variable in the regression model (2). However, when the number of clusters is

64 larger, use of the cluster variable as an additional explanatory variable in the regression model can  
65 seriously reduce the precision with which effects are estimated. In such circumstances, an alternative  
66 approach is to assume that cluster effects are randomly distributed with a mean and variance that can  
67 be estimated from the data in the study sample. Random intercept models assume that the effects of  
68 explanatory variables are the same across all clusters, but that the intercepts of regression lines differ  
69 with a mean and variance which can be estimated from the study data, along with the effect estimates  
70 of primary interest. Random slope models assume that the effects of explanatory variables also differ  
71 between clusters, with a mean and variance that can be estimated.

72 In recognition of the potential implications of clustering for statistical inference, there has been a  
73 growth over recent years in the use of statistical techniques that allow for clustering (3). Nevertheless,  
74 many studies still ignore clustering of observations (4-8). Recent systematic reviews have reported  
75 that clustering was taken into account in only 21.5% of multicentre trials (9) and 47% of cluster  
76 randomised trials (10). This may in part reflect computational challenges and statistical complexities  
77 (11), but, perhaps because of a lack of clarity about the effects of ignoring clustering, authors have  
78 omitted to discuss the limitations of their chosen analytical techniques.

79 Several studies have investigated implications of ignoring clustering in statistical inference, most  
80 being based on analysis of real data (1, 12-19). To date, no study has systematically investigated the  
81 extent to which bias can occur in effect estimates when clustering is ignored, the determinants of that  
82 bias, or the exact consequences for the precision of estimates according to different distributions of  
83 the explanatory variable and, in particular, the extent to which the explanatory variable varies within  
84 as compared with between clusters.

85 The first aim of the research described in this paper was to assess in detail the implications for effect  
86 estimates (regression coefficients), and their precision (characterised by standard errors (SEs)), when  
87 a linear regression analysis exploring the relation of a continuous outcome variable to an explanatory  
88 variable fails to account for clustering. The second aim was to describe rates of Type I error and

89 coverage by 95% confidence intervals in the same setting. These research questions were explored  
90 through simulation studies.

91 INSERT FIGURE 1 HERE

92 **Figure 1.** Hypothetical relationship of hearing impairment to cumulative noise exposure in four cities. Units for  
93 noise exposure and hearing impairment have been specified arbitrarily for ease of presentation. Data for each  
94 city are distinguished by the shading of data points. Cluster-specific regression lines are indicated, along with  
95 the regression line for the full dataset when clustering is ignored (dotted red line), and that when adjustment is  
96 made for cluster (solid blue line)

## 97 **Methods**

98 In the simplest case, in which there is a single explanatory variable, the ordinary least squares (OLS)  
99 linear regression is specified by a model of the form:

$$y_i = \beta_0 + \beta_1 x_i + e_i \quad -1-$$

100

101 For a continuous outcome and a single explanatory variable, the random intercept (RI) multi-level  
102 model can be viewed as an extension of the OLS model, and is specified as:

$$\begin{aligned} y_{ij} &= \beta_{0j} + \beta_1 x_{ij} + e_{ij} \\ &= \beta_0 + \beta_1 x_{ij} + e_{ij} + u_j \end{aligned} \quad -2-$$

103 where the index  $i$  refers to the individual and the index  $j$  to the cluster, and  $\beta_{0j} = \beta_0 + u_j$ , the  
104 estimate of the intercept for cluster  $j$ . The term  $u_j$  represents the error for cluster  $j$  around the fixed  
105 intercept value of  $\beta_0$ , and is assumed to be normally distributed with  $u_j | x_{ij} \sim N(0, SD_u^2)$ . The term  $e_{ij}$   
106 represents the additional error within the cluster, also referred to as the individual level error term,  
107 with  $e_{ij} | x_{ij}, u_j \sim N(0, SD_e^2)$ .

108 As described in the introduction, ICC is a measure which characterises the extent to which the  
109 outcome variable  $y_{ij}$  is similar within clusters, given the distribution of the explanatory variable  $x_{ij}$

110 (20). For a continuous outcome variable, and with the nomenclature used above, the ICC is defined as

111 
$$ICC = \frac{SD_u^2}{SD_u^2 + SD_e^2} \quad (21).$$

112 To explore the study questions, simulated datasets were generated according to the assumptions of the  
113 RI model. For each Monte Carlo simulation, both the number of clusters and the number of  
114 observations per cluster were set to 100. For simplicity, the size of the effect of  $x_{ij}$  on  $y_{ij}$  was  
115 arbitrarily set to 1 ( $\beta_1 = 1$ ), and the average value of  $y_{ij}$  when  $x_{ij} = 0$  was arbitrarily set to 0 ( $\beta_0 =$   
116 0).

117 Separate simulation studies were generated for a continuous and a binary explanatory variable  $x_{ij}$ . To  
118 set values  $x_{ij}$  for the continuous explanatory variable in a cluster  $j$ , an individual level variable was  
119 generated as  $x_{0ij} \sim N(0,1)$ , and a cluster-specific variable as  $shift_j \sim N(0, SD_{shift}^2)$ . The individual  
120 level variable was then added to the cluster-specific shift, so that  $x_{ij} = x_{0ij} + shift_j$ . For a binary  
121 explanatory variable  $x_{ij}$ , we set the prevalence in each cluster to be the sum of a constant (the same in  
122 all clusters) set to 0.05, 0.1, 0.2 and 0.4 and a cluster-specific variable  $shift_j \sim N(0, SD_{shift}^2)$ . In both  
123 cases, the corresponding values for the outcome variable  $y_{ij}$  were generated according to equation -2-.  
124 For this purpose, the individual-level error terms were drawn from a random standard normal  
125 distribution ( $N(0,1)$ ), and the cluster-level error terms were drawn from a random normal distribution  
126 with mean zero and variance  $SD_{u_j}^2$ . Simulated data were generated for various different values for  
127  $SD_{u_j}$  (0.0316, 0.05485, 0.1005, 0.1759, 0.3333 and 0.6547) chosen to give expected values for the  
128 ICC of 0.001, 0.003, 0.01, 0.03, 0.1 and 0.3 respectively, while  $SD_{shift} \sim U[a, b]$ , with the parameters  
129  $a$  and  $b$  being arbitrarily chosen to be 0 and 15, in the case of a continuous  $x_{ij}$ , and 0 and 0.05 in the  
130 case of a binary  $x_{ij}$ .

131 For each simulated dataset, two linear regression models were fitted; an OLS model which ignored  
132 the clustering (equation -1-), and a RI multi-level model which allowed for clustering effects  
133 (equation -2-). For each of the models, the regression coefficient and its standard error (SE) were

134 estimated. To compare results from the two models, the difference between the estimated regression  
135 coefficients ( $\beta_1^{RI} - \beta_1^{OLS}$ ), and the ratio of their SEs ( $SE^{RI}/SE^{OLS}$ ) were calculated.

136 To assess how the comparison between the two models was affected by the distribution of  $x_{ij}$  within  
137 and between clusters, these two measures were plotted against the dispersion (expressed as standard  
138 deviation) of the mean values of  $x_{ij}$  ( $\bar{x}_j$ ) between clusters (dispersion of  $shift_j$ ), for the case of  
139 continuous  $x_{ij}$ , and dispersion of prevalence of  $x_{ij}$ , for the case of binary  $x_{ij}$ . In addition, descriptive  
140 statistics were produced for the distributions of the two measures across simulated samples, according  
141 to values for expected ICC and overall prevalence of  $x_{ij}$ , in the case of a binary explanatory variable.

142 The accuracy of the 95% confidence intervals for the regression coefficient  $\beta_1$  from the two methods  
143 was assessed by calculating the proportion of the estimated confidence intervals that included the true  
144 value that had been used in the simulations. A method was considered to have appropriate coverage if  
145 95% of the 95% confidence intervals included the value of the effect  $\beta_1$  (i.e. the value 1) used in the  
146 simulations. Deviations from this ideal could reflect bias in the estimates of effect, unsatisfactory  
147 standard errors (22), or both.

148 To assess impacts on type I error, the simulations were repeated assuming no association between  $x_{ij}$   
149 and  $y_{ij}$  (i.e.  $\beta_1 = 0$ ), and the proportions of datasets for which the null hypothesis was rejected at a  
150 5% significance level in OLS and RI modelling were compared according to ICC.

151 For each expected ICC, and each value of  $shift_j$ , 100 simulated datasets were produced with a  
152 continuous  $x_{ij}$ , and another 100 for each of the four overall prevalence rates of a binary  $x_{ij}$ .

153 Due to random sampling variation the estimated ICC values were within given ranges of the target  
154 levels of ICC. For target levels of 0.001, 0.003, 0.01, 0.03, 0.1 and 0.3, these ranges were 0.0005-  
155 0.0014, 0.0025-0.0034, 0.005-0.014, 0.025-0.034, 0.05-0.14, and 0.25-0.34 respectively. Simulations  
156 resulting in estimated ICC values outside of these ranges were discarded and not used further. In the  
157 description of the results that follows ICC values are labelled according to the target levels.

158 All simulations and analysis were conducted using Stata software v12.1.

159 **Results**

160 *Difference in regression coefficients*

161 Differences in regression coefficients ( $\beta_1^{RI} - \beta_1^{OLS}$ ) estimated from the two linear models are  
162 illustrated in Figure 2. The two different subplots of the figure (A and B) correspond to the two  
163 different distributions of the explanatory variable (continuous and binary respectively), and the  
164 different shades of grey correspond to different ICC levels with darker shades corresponding to  
165 simulated results for higher ICCs.

166 INSERT FIGURE 2 HERE

167 **Figure 2.** Difference between regression coefficients estimated from RI and OLS models ( $\beta_1^{RI} - \beta_1^{OLS}$ ) plotted  
168 against dispersion (expressed as SD) of mean value/prevalence of  $x_{ij}$ , for different levels of intraclass  
169 correlation (shades of grey as indicated in the legend). Figure A: Continuous  $x_{ij}$ . Figure B: Binary  $x_{ij}$

170  
171 In all cases, differences in regression coefficients were on average zero, with  $\beta_1^{RI}$  and  $\beta_1^{OLS}$  being on  
172 average  $\cong 1$ . For both continuous and binary distributions of  $x_{ij}$ , differences were on average more  
173 narrowly spread for small ICCs and more widely spread for large ICCs. For a continuous explanatory  
174 variable  $x_{ij}$  (Figure 2A), and for each value of ICC, increasing the dispersion of  $\bar{x}_j$  across clusters  
175 resulted in larger differences in regression coefficients up to a dispersion of  $\bar{x}_j = 1$  (i.e. same  
176 dispersion of  $x_{ij}$  between and within clusters). Beyond that point, further increase in the dispersion of  
177  $\bar{x}_j$  resulted in smaller differences in regression coefficients from the two methods, approaching a  
178 difference of zero.

179 For a binary explanatory variable  $x_{ij}$ , and for each value of ICC, small dispersion of cluster-specific  
180 prevalence of  $x_{ij}$  resulted in small differences between the regression coefficients. However,  
181 increasing the dispersion of cluster-specific prevalence of  $x_{ij}$ , resulted in larger differences between  
182 the regression coefficients from the two methods. Comparing the different subplots of **Error!**

183 **Reference source not found.** (note the different scales on the y-axes), higher overall prevalence of  
184  $x_{ij}$  resulted in regression coefficients from the two models being more similar even for large  
185 dispersion of the prevalence of  $x_{ij}$  across clusters; for ICC=0.3, differences ranged from -0.2 to 0.2,  
186 corresponding to a 20% difference in the regression coefficients from the two methods, when the  
187 overall prevalence of  $x_{ij}$  was 0.05, and this range decreased to approximately -0.05 to 0.05 for an  
188 overall prevalence of  $x_{ij}$  of 0.4.

189 *Ratio of standard errors*

190 The ratios of SEs derived from the RI and OLS models ( $SE_{\beta_1^{RI}}/SE_{\beta_1^{OLS}}$ ) were examined in relation to  
191 the dispersion across clusters of the mean value/prevalence of the continuous/binary explanatory  
192 variable  $x_{ij}$ , and are presented in Figure 3. As in Figure 2, the different levels of ICCs are represented  
193 by different shades of grey, with lighter shades corresponding to lower ICCs and darker shades to  
194 higher ICCs. Subplots A and B correspond to the ratios of SEs when  $x_{ij}$  was continuous and binary,  
195 respectively.

196 For a continuous variable  $x_{ij}$ , the ratio took its minimum value for the smallest dispersion of  $\bar{x}_j$  and  
197 increased as dispersion of  $\bar{x}_j$  increased, tending asymptotically to a maximum value. The minimum  
198 and maximum values of the ratio of the SEs (the latter also corresponding to its asymptote) were ICC-  
199 dependent, higher ICCs resulting in lower minimum and higher maximum values for the ratio. The  
200 dispersion of  $\bar{x}_j$  at which the ratio of SEs approached its asymptote was also ICC-dependent, being  
201 higher for larger ICCs. For very small values of dispersion of  $\bar{x}_j$ , the minimum value of the ratio of  
202 the SEs was approximately one for small levels of ICC and was less than one for higher ICCs.  
203 Particularly for small values of the dispersion of  $\bar{x}_j$  and ICC  $\cong$  0.10 or 0.30, the ratio of SEs was <1,  
204 meaning that SEs from RI models were smaller than from OLS models.

205 INSERT FIGURE 3 HERE

206 **Figure 3.** Ratios of standard errors estimated from RI and OLS models ( $SE_{\beta_1^{RI}}/SE_{\beta_1^{OLS}}$ ) plotted against relative  
207 between- to within-clusters dispersion (expressed as SD) of explanatory variable  $x_{ij}$ . Figure A: Continuous  $x_{ij}$ .  
208 Figure B: Binary  $x_{ij}$

209 When  $x_{ij}$  was binary, the ratios of the SEs were below one for most of the situations examined,  
210 indicating that the SEs of the regression coefficients estimated from the RI model were smaller than  
211 those under the OLS model in most circumstances. The ratio of the SEs achieved its minimum value  
212 for the smallest dispersion of the prevalence of  $x_{ij}$  across the clusters, and increased progressively  
213 with increasing dispersion of  $x_{ij}$  across clusters. For small ICCs ( $<0.1$ ), the SEs from the two models  
214 were very similar. However, increasing the ICC to 0.1 or higher led to the ratio of the SEs decreasing  
215 to values much lower than 1. For constant ICC, comparison of subplots of Figure 3B, shows that the  
216 rate of increase of the ratio of the SEs was higher for lower underlying prevalence rates of the  $x_{ij}$ .

#### 217 *Coverage of 95% confidence intervals*

218 Table 1 shows the extent to which 95% confidence intervals covered the simulated effect of the  
219 explanatory continuous variable on the outcome ( $\beta_1=1$ ), when derived from the two statistical models,  
220 for different levels of ICC, and for fifths of the distribution of the dispersion of  $\bar{x}_j$ .

221 Irrespective of ICC and type of explanatory variable, coverage with the RI model was approximately  
222 95%. For a continuous  $x_{ij}$ , coverage for the OLS model was close to 95% for very low ICC and  
223 decreased for increasing levels of ICC. For the highest ICC level examined (ICC=0.3), OLS showed a  
224 notably poor coverage of 30%. For a given ICC, coverage of 95% confidence intervals did not vary  
225 much by dispersion of  $\bar{x}_j$ , although it was somewhat higher in the bottom fifth as compared to the 2<sup>nd</sup>,  
226 3<sup>rd</sup>, 4<sup>th</sup>, and 5<sup>th</sup> fifth of the distribution of dispersion of  $\bar{x}_j$ .

227

228

229 **Table 1.** Coverage (%) by 95% confidence intervals of simulated effect  $\beta_1=1$  under the RI and OLS models  
 230 according to fifths of the distribution of dispersion (expressed as SD) of the continuous  $\bar{x}_j$

ICC	Bottom fifth=1		2		3		4		Top fifth=5		Total	
	RI	OLS	RI	OLS	RI	OLS	RI	OLS	RI	OLS	RI	OLS
0.001	95.04	94.37	95.00	94.09	95.33	94.10	95.15	93.99	94.92	93.84	95.08	94.08
0.003	95.14	93.14	95.37	92.33	95.20	91.83	95.53	92.25	95.42	91.99	95.33	92.30
0.01	94.99	88.47	94.64	83.95	94.75	83.65	94.74	83.72	94.90	84.07	94.80	84.75
0.03	94.59	76.21	95.11	68.79	94.80	67.62	95.06	67.57	94.74	67.15	94.87	69.39
0.1	94.68	59.58	94.80	45.45	94.86	44.83	94.39	44.73	95.04	44.37	94.76	47.80
0.3	94.84	41.32	94.53	28.06	94.95	28.24	94.64	26.98	94.79	27.41	94.75	30.36

231

232 For a binary  $x_{ij}$ , coverage for the OLS model was close to 95% but only for  $ICC \leq 0.03$ . As ICC  
 233 increased, coverage from the OLS model deviated from the nominal value of 95%. As shown in  
 234 Figure 4, when ICC was 0.1 or 0.3, coverage was on average lower for lower prevalence of  $x_{ij}$ ; it fell  
 235 below the nominal value of 95% for 0.05 prevalence of  $x_{ij}$  and it increased to values higher than 95%  
 236 for 0.40 prevalence of  $x_{ij}$  (comparison of the four sub-plots of the figure). Also, for any given  
 237 prevalence of  $x_{ij}$ , coverage was lower for increasing dispersion of prevalence of  $x_{ij}$  across clusters.  
 238 Variation of the average coverage by categories of prevalence rates of  $x_{ij}$  and overall prevalence of  
 239  $x_{ij}$  was higher when ICC was higher (ICC=0.3) than when it was lower (ICC=0.1). The smallest and  
 240 the largest values of coverage were 87% and 98% and they were observed when overall prevalence of  
 241  $x_{ij}$  was 0.05, ICC=0.3, and in the bottom and top thirds respectively of the distribution of dispersion  
 242 of prevalence of  $x_{ij}$  across clusters. Coverage as high as 98% was also seen in the bottom third of the  
 243 distribution of dispersion of prevalence of  $x_{ij}$  across clusters for the other prevalence rates (0.10,  
 244 0.20, and 0.40) explored when ICC was high (ICC=0.3).

245

INSERT FIGURE 4 HERE

246 **Figure 4.** Coverage (%) by 95% confidence intervals from the OLS model for ICC=0.1 and 0.3, by overall  
247 prevalence rates of  $x$  (A) 0.05, B) 0.10, C) 0.20, and D) 0.40), and thirds of the distribution of the dispersion  
248 (expressed as SD) of prevalence of across clusters

249 *Type I error*

250 To assess the frequency of type I error, defined as incorrect rejection of a true null hypothesis, under  
251 the OLS and the RI multi-level models, simulations were repeated assuming no association between  
252 the explanatory variable  $x_{ij}$  and the outcome variable  $y_{ij}$  ( $\beta_1^{RI} = \beta_1^{OLS} = 0$ ).

253 Figure 5 shows the proportion of datasets for which the null hypothesis was rejected at a 5%  
254 significance level for varying levels of ICC, when  $x_{ij}$  was continuous. Using the RI multi-level  
255 model, the association between  $x_{ij}$  and  $y_{ij}$  was statistically significant in approximately 5% of the  
256 datasets for all ICCs. However, using the OLS models, type I error varied with ICC. For a very small  
257 ICC, type I error was very close to that under the RI model (~6%) but increased rapidly as the ICC  
258 increased, reaching ~70% for ICC $\cong$ 0.30. Type I error did not vary by dispersion of mean value of  $x_{ij}$   
259 (data not shown).

260

INSERT FIGURE 5 HERE

261 **Figure 5.** Proportion (%) of datasets for which the null hypothesis was rejected according to level of ICC when  
262  $\beta_1^{RI} = 0$  and  $x_{ij}$  was continuous

263 When the explanatory variable  $x_{ij}$  was binary, type I error rates varied very little around the nominal  
264 level of 5% when an OLS model was fitted instead of the RI model, when ICC values were less than  
265 0.1; the average value was 5% and varied from 4.8% to 5.3% for different ICC values (<0.1), overall  
266 prevalence rates of  $x_{ij}$ , and dispersion of prevalence of  $x_{ij}$  across clusters. However, for ICC values  
267 of 0.1 and 0.3, type I error rates diverged from 5%. The variation of rates in those cases is illustrated  
268 in Figure 6 for the four prevalence rates of  $x_{ij}$  (subplots A, B, C, and D of the figure), and for thirds

269 of the distribution of dispersion of prevalence of  $x_{ij}$  across clusters. For small dispersion of  
270 prevalence rates of  $x_{ij}$  (bottom third of the distribution), type I error was lower than 5%, and it  
271 increased as dispersion increased. This trend was more prominent for lower values of overall  
272 prevalence of  $x_{ij}$ , and for ICC=0.3 compared to ICC=0.1. The smallest and the largest values of type I  
273 error were 2% and 13% and they were observed when overall prevalence of  $x_{ij}$  was 0.05 and in the  
274 bottom and top thirds respectively of the distribution of dispersion of prevalence of  $x_{ij}$  across clusters.

275 INSERT FIGURE 6 HERE

276 **Figure 6.** Type I error rates (%) from the OLS model for ICC=0.1 and 0.3, by overall prevalence rates of  $x_{ij}$  (A)  
277 0.05, B) 0.10, C) 0.20, and D) 0.40), and thirds of the distribution of the dispersion (expressed as SD) of  
278 prevalence of  $x$  across clusters

## 279 Discussion

280 In this paper we focused on the implications of ignoring clustering in statistical inference regarding  
281 the relationship between a continuous outcome and a single explanatory variable  $x_{ij}$ . Two different  
282 types of  $x_{ij}$  were considered – continuous and binary. For each of the two categories of  $x_{ij}$ , the  
283 implications for statistical inference of failing to account for clustering were explored by comparison  
284 of effect estimates and their precision, assessment of the coverage by 95% confidence intervals, and  
285 estimation of the frequency of type I error. In the cases of both a continuous and a binary  $x_{ij}$ , where  
286 the true slope of the regression line was non-zero, we found that the cluster-unadjusted OLS and RI  
287 models gave on average very similar estimates of effect for any level of ICC. However, despite the  
288 average value of difference in point estimates from the two methods being zero, differences occurred  
289 in both directions and varied more when the level of ICC increased. The largest differences in  
290 estimates of effect between OLS and multi-level RI regression modelling were only about 20% of the  
291 true value and they occurred when the ICC was high (0.3). For a continuous  $x_{ij}$ , the largest errors in  
292 the differences of estimated effects occurred when the dispersion of the  $x_{ij}$  within clusters was  
293 approximately the same as that between clusters, while, for a binary explanatory variable, differences  
294 increased with increasing dispersion of prevalence of  $x_{ij}$  across clusters.

295 Conclusions drawn from comparison of SEs estimated from cluster-unadjusted OLS and RI models  
296 are somewhat different for continuous as compared with binary  $x_{ij}$ . When  $x_{ij}$  was continuous, the  
297 SEs of regression coefficients were generally larger for the multi-level RI model than for the cluster-  
298 unadjusted OLS model, their ratio being highest ( $>4$ ) for a high ICC (0.3) and where the dispersion of  
299 the mean value of  $x_{ij}$  was large. However, contrary to what is widely stated, the spuriously greater  
300 precision of OLS method was not universal. When dispersion of mean values of  $x_{ij} < 1$ , OLS  
301 regression gave larger SEs than multi-level modelling. When  $x_{ij}$  was binary, SEs estimated from the  
302 RI model, were higher than those from the cluster-unadjusted OLS model for lower ICCs ( $< 0.03$ ) and  
303 larger dispersion of prevalence of  $x_{ij}$  across clusters, and lower than those from the cluster-unadjusted  
304 OLS model for smaller dispersion of prevalence of  $x_{ij}$  across clusters. The SEs differed by up to 15%  
305 for the highest ICC value (ICC=0.3).

306 The rates of coverage of 95% confidence intervals for estimates of effect, whether of a continuous or  
307 a binary  $x_{ij}$ , when derived from a RI model were at the nominal level of 95%, irrespective of other  
308 parameters (i.e. ICC, dispersion across clusters of the mean value of a continuous  $x_{ij}$ , or dispersion of  
309 the prevalence of the binary  $x_{ij}$  across clusters). When  $x_{ij}$  was binary, the cluster-unadjusted OLS  
310 model also resulted in an appropriate coverage of the 95% confidence intervals when ICC was low ( $\leq$   
311 0.01). However, for higher values of ICC, coverage varied slightly (range: 87% - 98%) around the  
312 nominal value of 95% depending on the overall prevalence and the dispersion of the cluster-specific  
313 prevalence rates of  $x_{ij}$ . In contrast, when  $x_{ij}$  was continuous, the model that failed to account for  
314 clustering resulted in poor coverage rates, especially as ICC increased, reaching a rate as low as 30%  
315 for ICC=0.3.

316 Setting the effect of  $x_{ij}$  on the outcome variable to zero allowed exploration of the frequency of type I  
317 error. With the RI model, in all of the scenarios explored, type I error was very close to 5%. When  $x_{ij}$   
318 was continuous, we found that failure to allow for clustering increased rates of Type I error, and that  
319 the inflation of type I error was particularly pronounced (up to 70%) when the degree of clustering  
320 was high (ICC=0.3). In contrast to this, when  $x_{ij}$  was binary, type I error under the OLS model was

321 close to the expected value of 5% for low levels of clustering ( $ICC < 0.1$ ). However, when ICC was  
322 high (0.1 or 0.3), type I error rates varied more widely around 5%, with values as low as 2% (for low  
323 overall prevalence of  $x_{ij}$  and small dispersion of its prevalence across clusters) and as high as 13%  
324 (for low overall prevalence of  $x_{ij}$  and large dispersion of its prevalence across clusters).

325 The analysis for each specification of parameters (expected ICC, dispersion of  $x_{ij}$ , overall prevalence  
326 or dispersion of prevalence rates across clusters of a binary  $x_{ij}$ ) was based on 1,000 simulated  
327 samples of 10,000 observations grouped in 100 clusters, each of 100 individuals. By using such a  
328 large sample size (larger than in most epidemiological investigations), we reduced random sampling  
329 variation, making it easier to characterise any systematic differences between the two methods of  
330 analysis. However, the approach may have led to underestimation of the maximum differences  
331 between estimates of effect that could arise from OLS as compared with multi-level modelling.  
332 Additionally, the number of observations per cluster was the same in all simulations, making it  
333 impossible to draw conclusions about effects of ignoring clustering for varying cluster sizes. Also,  
334 data were simulated following the specification of the RI regression model rather than that of the  
335 random-effects model described in section -2-. That was done because the RI model is more  
336 frequently used, especially when there is no a priori expectation of differential effects of the  
337 explanatory on the outcome variables across the different clusters. Simulating data following the  
338 specification of the random effects model would have added complexity to the algorithm used for  
339 simulation, and the computational time required.

340 The effect of clustering when a cluster-unadjusted model is fitted could also have been assessed by  
341 calculating bias as  $[(\text{estimated effect} - \text{true effect})/\text{true effect}]$ , as defined in earlier studies (23).  
342 Instead, we defined bias by the difference in the effect estimates derived from the two analytical  
343 models. The data were simulated following the model specification of RI linear regression, which is  
344 one of the most well established and frequently chosen analytical approaches to account for  
345 clustering. As such, given that all resulting effect estimates were positive, deviations of the difference  
346 in regression coefficients from the value of zero can only represent deficiencies of the OLS model,  
347 provided that the assumptions of the RI model are met. Therefore, there is no reason to expect that the

348 conclusions one would draw from an alternative definition of bias would be more reliable, provided  
349 that the conditions under which data were simulated and the models fitted were the same.

350 When multilevel RI modelling was applied to the simulated clustered datasets with a continuous or a  
351 binary explanatory variable, the rate of Type I error was 5%, and the coverage by 95% CIs was 95%,  
352 as would be expected, given the method by which the simulated samples were generated. In  
353 comparison, when cluster-unadjusted models were fitted to clustered data with a continuous  $x_{ij}$ , rates  
354 of Type I error were higher, particularly when the ICC was high. For the highest level of ICC  
355 examined (0.3), type I errors were as frequent as 70%. However, even with an ICC of only 0.01, rates  
356 of Type 1 error were more than 10%. Consistent with this, coverage by 95% confidence intervals was  
357 considerably lower than the nominal value for higher ICC levels. The lowest coverage of 30% was for  
358 the highest ICC level. In contrast to these results Huang et al (24) have reported values of coverage  
359 very close to 95% from the OLS model for a continuous explanatory variable. Differences between  
360 findings presented in this study and those presented by Huang et al (24) can be explained by zero  
361 clustering in the explanatory variable assumed in the latter. Sensitivity analysis restricting the  
362 simulated datasets only to those in which clustering in the explanatory variable was not meaningful  
363 showed that interval coverage rates were very close to 95% independent of clustering in the outcome  
364 variable (results not shown). When  $x_{ij}$  was binary, both the interval coverage and Type I error rates  
365 varied little around the nominal values of 5% and 95%, and only for ICC values higher than 0.01.  
366 Overall coverage rates were higher for higher ICCs and decreased for increasing dispersion of the  
367 cluster-specific prevalence rates of  $x_{ij}$  across clusters and for decreasing overall prevalence of the  $x_{ij}$ .  
368 A similar observation of small variation of interval coverage around 95% for higher ICC values has  
369 been made before (25). Type I error when  $x_{ij}$  was binary and its prevalence was low, varied around  
370 5% with values falling below 5% for small dispersion of prevalence of  $x_{ij}$ , and above 5% for large  
371 dispersion. For larger overall prevalence of  $x_{ij}$ , Type I error rates fell below 5%. In accordance with  
372 these findings, Galbraith et al (26) have shown that cluster-unadjusted models resulted in relatively  
373 conservative Type I error. Also, in a context of individually randomised trials, Kahan et al (27) have

374 shown that Type I error increased with increasing ICC and increasing difference in the probability of  
375 assignment of patients to treatment arms.

376 It has been widely stated that when data are clustered, effects estimated by OLS regression are  
377 unbiased (23, 25, 27-30). Our results confirm that for data of the type simulated, coefficients from  
378 OLS regression were on average very similar to those from RI multi-level modelling. Previous  
379 studies based on simulation data have shown similar results (23-25, 31). However, for individual  
380 simulated samples, the estimates may differ, and the potential magnitude of the differences depends  
381 on the level of within-cluster similarity of the outcome variable. For an ICC of 0.3, the estimates of  
382 effect from the two analytical methods could differ by up to 20%. In addition, when  $x_{ij}$  is continuous,  
383 the error in estimates of the regression coefficient is larger when the between-cluster dispersion of  $x_{ij}$   
384 is similar to that within-cluster. When  $x_{ij}$  is binary, the error increases as the dispersion of the  
385 prevalence rates across clusters increases, and when the overall prevalence rate across all clusters is  
386 lower (<10%). These errors in the estimated effect indicate that in an individual study, failure of  
387 regression analysis to account for clustering of observations could result in considerably higher or  
388 lower estimates of effect than those derived from multilevel analysis. This has been illustrated in  
389 numerous published papers of real data, which have shown that estimates from the two analytical  
390 methods can differ to a lesser or greater extent (1, 8, 14, 17, 32). However, in those publications, no or  
391 very limited information is provided to establish whether the error observed was due to dispersion of  
392 the cluster-specific mean values of the continuous  $x_{ij}$ , or dispersion of prevalence rates for the binary  
393  $x_{ij}$  across clusters.

394 Most often it is stated that regression coefficients are spuriously precise when clustering is not taken  
395 into account in regression models. However, in several reports, authors have failed to specify the  
396 conditions under which this applies (1, 31, 33-36). Other authors have pointed out that when  $x_{ij}$  is  
397 identical within each cluster, and a cluster-unadjusted approach is followed, SEs tend to be spuriously  
398 low, and that the opposite occurs when  $x_{ij}$  varies within clusters (24, 27, 37, 38). Bias in SEs for  
399 effects of cluster-varying  $x_{ij}$  has been shown in results from real data when both models were fitted

400 (17, 32, 39). However, others have reported contradictory results in which SEs of effects of  
401 individual-level  $x_{ij}$  from OL regression were very similar to, or lower than, those from a multi-level  
402 model (14-16, 40). It should be noted that the dichotomy between cluster- and individual-level  
403 variables is not clear-cut. There can be varying degrees of clustering in  $x_{ij}$ , with the extremes being  
404 variables for which the values are completely unclustered (mean values are the same for all clusters),  
405 and variables for which the values are the same within each cluster. However, in real data, an  
406 explanatory variable can lie anywhere in between. An early report focused on this issue by  
407 considering the level of clustering in  $x_{ij}$  as the main driver for the expected bias of the precision of  
408 the effect estimates (29), rather than the absolute distinction between cluster-constant and cluster-  
409 varying  $x_{ij}$ . The authors reported that as clustering in  $x_{ij}$  decreases, the bias in SEs from a cluster-  
410 unadjusted model is expected to be upwards, and the opposite is expected when clustering in  $x_{ij}$   
411 increases. Taking into consideration clustering in  $x_{ij}$  ( $\rho_x$ ) as well as in the outcome variable ( $\rho_y$ ), a  
412 later study using simulated data showed that for a given level of  $\rho_y$ , increasing  $\rho_x$  resulted in  
413 increasing the ratio of estimated SEs ( $SE_{\beta}^{RI}/SE_{\beta}^{OLS}$ ) from values  $<1$  to values  $\approx 1$  (41). Our results for  
414 continuous explanatory variables differ slightly from this, with ratios of SEs ( $SE_{\beta}^{RI}/SE_{\beta}^{OLS}$ ) moving  
415 from values  $<1$  to values  $>1$ , as clustering in the explanatory variable, expressed as dispersion of  $\bar{x}_j$   
416 across clusters, increased.

417 Bias in the precision of effect estimates for binary  $x_{ij}$  when clustering is ignored has received very  
418 limited attention in the published literature. Several of the reported studies have used real data to  
419 compare standard and multi-level models, using both continuous and binary individual-level  $x_{ij}$  (14,  
420 17). For the majority of binary  $x_{ij}$  used in the models fitted in these studies, SEs derived from the  
421 OLS model were larger than those derived from the multi-level model. The same conclusion was  
422 drawn from a study using simulated data (25). However, none of the studies using real data has  
423 explored the level of bias in relation to variation in the prevalence of the binary  $x_{ij}$ , and the study of  
424 simulated data assumed constant prevalence of  $x_{ij}$  in all clusters. Simulation results presented here  
425 suggest that, irrespective of the dispersion of prevalence of  $x_{ij}$  across clusters and the overall

426 prevalence in all clusters, in most circumstances SEs from the multi-level model are lower than those  
427 from the OLS model, and the bias is higher for higher ICC values.

428 The focus of this paper was on the association between a continuous outcome and an explanatory  
429 variable that was defined at the individual level ( $x_{ij}$  within cluster). We showed that when  $x_{ij}$  was  
430 continuous, and most of the variation occurred within rather than between clusters, the cluster-  
431 unadjusted OLS model gave larger SEs for the regression coefficient than multi-level modelling. This  
432 is consistent with reports in which ignoring clustering resulted in spuriously high SEs when  $x_{ij}$  varied  
433 within cluster. The reverse occurred when most of the dispersion of  $x_{ij}$  was between rather than  
434 within clusters. In this situation  $x_{ij}$  approaches the characteristics of a cluster-specific variable. We  
435 additionally showed that when  $x_{ij}$  under investigation was binary, ignoring clustering in statistical  
436 modelling in most cases resulted in higher SEs for the estimated effect than those derived from the  
437 random-intercept model. The SEs differed more for higher ICCs but not with the overall prevalence of  
438  $x_{ij}$ , nor with the dispersion of its prevalence across clusters (Figure 3B). Unlike SEs, the point  
439 estimates were unbiased for either continuous or binary  $x_{ij}$  (Figure 2 A and B).

440 In conclusion, our results support the use of multi-level modelling to account for clustering effects in  
441 linear regression analyses of data that are hierarchically structured, especially where ICCs might  
442 exceed 0.01. Failure to do so is likely to result in incorrect estimates of effect (either too high or too  
443 low) mostly with spurious precision in the case of continuous  $x_{ij}$  or with underestimated precision in  
444 the case of binary  $x_{ij}$ , and may lead to incorrect inferences. The errors in estimates of effect of a  
445 continuous  $x_{ij}$  will be smaller when most of its dispersion is between rather than within clusters – i.e.  
446 the variable comes closer to being cluster-specific. Similarly, when  $x_{ij}$  is binary, smaller differences  
447 in the effect estimates occur when the dispersion of the prevalence of  $x_{ij}$  across clusters is small, or  
448 when its overall prevalence across clusters is high.

449 Additionally, we identified situations in which a standard analytical approach is more likely to  
450 importantly affect statistical inference, i.e. when rates of Type I error and interval coverage deviate

451 more from the nominal values of 5% and 95% respectively. These occur when  $x_{ij}$  is continuous, and  
452 ICC levels are greater than 0.01. It is then that Type I error rates are higher than 10% and interval  
453 coverage rates are lower than 80%. On the other hand, statistical inference when a standard regression  
454 model is fitted is less likely to be of concern when  $x_{ij}$  is binary, as the error and coverage rates  
455 deviate very little from the nominal values. However, even for a binary  $x_{ij}$ , error rates can sometimes  
456 be greater than 10%, and corresponding interval coverage rates lower than 90% (but possibly not  
457 lower than 80%). This occurs when ICC is high, the overall prevalence of  $x_{ij}$  is low (approximately  
458 5%), and the dispersion of the cluster-specific rates is large. In all circumstances in which the ICC is  
459 very small, clustering is minimal and there is little difference between RI and OLS regression.

#### 460 **Abbreviations**

461 RI: random-intercept; OLS: ordinary least squares; ICC: intra-class correlation coefficient; SE:  
462 standard error

#### 463 **Acknowledgements**

464 Not applicable

#### 465 **Authors' contribution**

466 GN, HI, and DC conceived the concept of this study. GN carried out the simulations, analysed the  
467 data and drafted the manuscript. CO provided expert statistical advice on aspects of results presented.  
468 DC and HI critically reviewed and made substantial contributions to the manuscript. All authors read  
469 and approved the final manuscript.

#### 470 **Funding**

471 During completion of this work, GN was supported by the Colt Foundation (PhD scholarship) and a  
472 grant award from Versus Arthritis (formerly Arthritis Research UK) (22090).

#### 473 **Availability of data and materials**

474 The simulated datasets used and analysis described in the current study are available from the  
475 corresponding author on reasonable request.

476 **Ethics approval and consent to participate**

477 Not applicable

478 **Consent for publication**

479 Not applicable

480 **Competing interests**

481 The authors declare that they have no competing interests

482 **References**

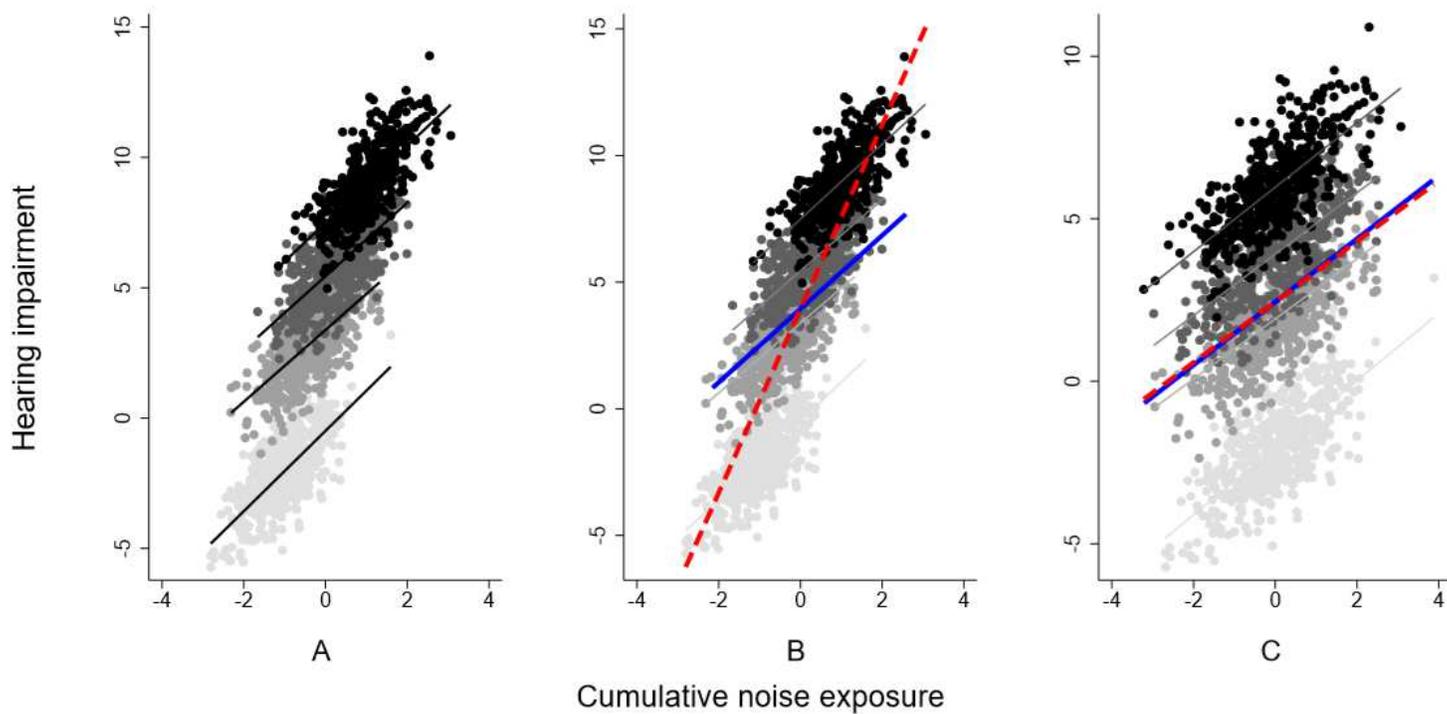
- 483 1. Park S, Lake ET. Multilevel modeling of a clustered continuous outcome: nurses' work hours  
484 and burnout. *Nursing research*. 2005;54(6):406-13.
- 485 2. Stimson JA. Regression in Space and Time: A Statistical Essay. *American Journal of Political*  
486 *Science*. 1985;29(4):914-47.
- 487 3. Bingenheimer JB, Raudenbush SW. Statistical and substantive inferences in public health:  
488 issues in the application of multilevel models. *Annu Rev Public Health*. 2004;25:53-77.
- 489 4. Bland JM. Cluster randomised trials in the medical literature: Two bibliometric surveys.  
490 *BMC Medical Research Methodology*. 2004;4.
- 491 5. Crits-Christoph P, Mintz J. Implications of therapist effects for the design and analysis of  
492 comparative studies of psychotherapies. *Journal of consulting and clinical psychology*. 1991;59(1):20.
- 493 6. Lee KJ, Thompson SG. Clustering by health professional in individually randomised trials.  
494 *Bmj*. 2005;330(7483):142-4.
- 495 7. Simpson JM, Klar N, Donner A. Accounting for cluster randomization: A review of primary  
496 prevention trials, 1990 through 1993. *American Journal of Public Health*. 1995;85(10):1378-83.

- 497 8. Biau DJ, Halm JA, Ahmadiéh H, Capello WN, Jeekel J, Boutron I, et al. Provider and center  
498 effect in multicenter randomized controlled trials of surgical specialties: an analysis on patient-level  
499 data. *Ann Surg.* 2008;247(5):892-8.
- 500 9. Oltean H, Gagnier JJ. Use of clustering analysis in randomized controlled trials in orthopaedic  
501 surgery. *BMC Medical Research Methodology.* 2015;15(1).
- 502 10. Diaz-Ordaz K, Froud R, Sheehan B, Eldridge S. A systematic review of cluster randomised  
503 trials in residential facilities for older people suggests how to improve quality. *BMC Medical*  
504 *Research Methodology.* 2013;13(1).
- 505 11. Goldstein H. Multilevel Mixed Linear Model Analysis Using Iterative Generalized Least  
506 Squares. *Biometrika.* 1986;73(1):43-56.
- 507 12. Astin AW, Denson N. Multi-campus studies of college impact: Which statistical method is  
508 appropriate? *Research in Higher Education.* 2009;50(4):354-67.
- 509 13. Cheong YF, Fotiu RP, Raudenbush SW. Efficiency and robustness of alternative estimators  
510 for two- and three-level models: The case of NAEP. *Journal of Educational and Behavioral Statistics.*  
511 2001;26(4):411-29.
- 512 14. Grieve R, Nixon R, Thompson SG, Normand C. Using multilevel models for assessing the  
513 variability of multinational resource use and cost data. *Health economics.* 2005;14(2):185-96.
- 514 15. Niehaus E, Campbell CM, Inkelas KK. HLM Behind the Curtain: Unveiling Decisions  
515 Behind the Use and Interpretation of HLM in Higher Education Research. *Research in Higher*  
516 *Education.* 2014;55(1):101-22.
- 517 16. Steenbergen MR, Jones BS. Modeling multilevel data structures. *American Journal of political*  
518 *Science.* 2002:218-37.
- 519 17. Wendel-Vos GCW, Van Hooijdonk C, Uitenbroek D, Agyemang C, Lindeman EM,  
520 Droomers M. Environmental attributes related to walking and bicycling at the individual and  
521 contextual level. *Journal of Epidemiology and Community Health.* 2008;62(8):689-94.
- 522 18. Walters SJ. Therapist effects in randomised controlled trials: what to do about them. *Journal*  
523 *of clinical nursing.* 2010;19(7-8):1102-12.

- 524 19. Newman D, Newman I, Salzman J. Comparing OLS and HLM models and the questions they  
525 answer: Potential concerns for type VI errors. *Multiple Linear Regression Viewpoints*. 2010;36(1):1-  
526 8.
- 527 20. Goldstein H. *Multilevel Statistical Models*: Wiley; 2010.
- 528 21. Rabe-Hesketh S, Skrondal A. *Multilevel and Longitudinal Modeling Using Stata*: Taylor &  
529 Francis; 2005.
- 530 22. Bradburn MJ, Deeks JJ, Berlin JA, Russell Localio A. Much ado about nothing: a comparison  
531 of the performance of meta-analytical methods with rare events. *Stat Med*. 2007;26(1):53-77.
- 532 23. Clarke P. When can group level clustering be ignored? *Multilevel models versus single-level*  
533 *models with sparse data*. *Journal of Epidemiology and Community Health*. 2008;62(8):752-8.
- 534 24. Huang FL. Alternatives to multilevel modeling for the analysis of clustered data. *The Journal*  
535 *of Experimental Education*. 2016;84(1):175-96.
- 536 25. Chu R, Thabane L, Ma J, Holbrook A, Pullenayegum E, Devereaux PJ. Comparing methods  
537 to estimate treatment effects on a continuous outcome in multicentre randomized controlled trials: a  
538 simulation study. *BMC medical research methodology*. 2011;11(1):1.
- 539 26. Galbraith S, Daniel JA, Vissel B. A study of clustered data and approaches to its analysis. *The*  
540 *journal of Neuroscience*. 2010;30(32):10601-8.
- 541 27. Kahan BC, Morris TP. Assessing potential sources of clustering in individually randomised  
542 trials. *BMC Medical Research Methodology*. 2013;13(1).
- 543 28. Arceneaux K, Nickerson DW. *Modeling Certainty with Clustered Data: A Comparison of*  
544 *Methods*. *Political Analysis*. 2009;17(2):177-90.
- 545 29. Scott AJ, Holt D. The effect of two-stage sampling on ordinary least squares methods. *Journal*  
546 *of the American Statistical Association*. 1982;77(380):848-54.
- 547 30. Barrios T, Diamond R, Imbens GW, Kolešar M. Clustering, spatial correlations, and  
548 randomization inference. *Journal of the American Statistical Association*. 2012;107(498):578-91.
- 549 31. Maas CJ, Hox JJ. The influence of violations of assumptions on multilevel parameter  
550 estimates and their standard errors. *Computational Statistics & Data Analysis*. 2004;46(3):427-40.

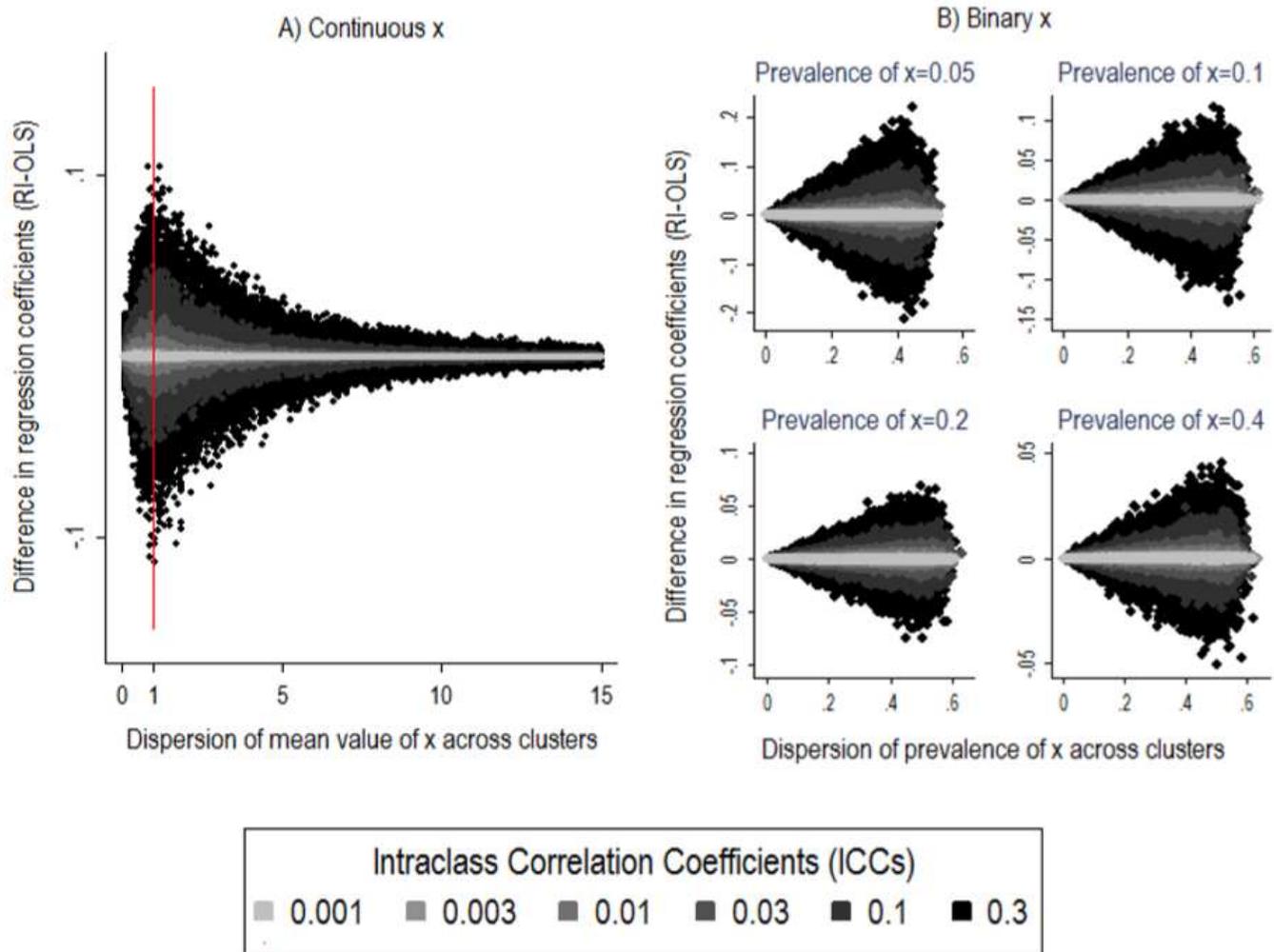
- 551 32. Dickinson LM, Basu A. Multilevel modeling and practice-based research. *The Annals of*  
552 *Family Medicine*. 2005;3(suppl 1):S52-S60.
- 553 33. Austin PC, Goel V, van Walraven C. An introduction to multilevel regression models.  
554 *Canadian Journal of Public Health*. 2001;92(2):150.
- 555 34. Lemeshow S, Letenneur L, Dartigues JF, Lafont S, Orgogozo JM, Commenges D. Illustration  
556 of analysis taking into account complex survey considerations: The association between wine  
557 consumption and dementia in the PAQUID study. *American Journal of Epidemiology*.  
558 1998;148(3):298-306.
- 559 35. Roberts C, Roberts SA. Design and analysis of clinical trials with clustering effects due to  
560 treatment. *Clinical Trials*. 2005;2(2):152-62.
- 561 36. Hox J. Multilevel Modeling: When and Why. In: Balderjahn I, Mathar R, Schader M, editors.  
562 *Classification, Data Analysis, and Data Highways: Proceedings of the 21st Annual Conference of the*  
563 *Gesellschaft für Klassifikation eV, University of Potsdam, March 12–14, 1997. Berlin, Heidelberg:*  
564 *Springer Berlin Heidelberg; 1998. p. 147-54.*
- 565 37. Chuang J-H, Hripcsak G, Heitjan DF. Design and Analysis of Controlled Trials in Naturally  
566 Clustered Environments: Implications for Medical Informatics. *Journal of the American Medical*  
567 *Informatics Association : JAMIA*. 2002;9(3):230-8.
- 568 38. Sainani K. The importance of accounting for correlated observations. *PM & R : the journal of*  
569 *injury, function, and rehabilitation*. 2010;2(9):858-61.
- 570 39. Jones K. Do multilevel models ever give different results? 2009.
- 571 40. Hedeker D, McMahan SD, Jason LA, Salina D. Analysis of clustered data in community  
572 psychology: with an example from a worksite smoking cessation project. *American journal of*  
573 *community psychology*. 1994;22(5):595-615.
- 574 41. Bliese PD, Hanges PJ. Being Both Too Liberal and Too Conservative: The Perils of Treating  
575 Grouped Data as though They Were Independent. *Organizational Research Methods*. 2004;7(4):400-  
576 17.
- 577

# Figures



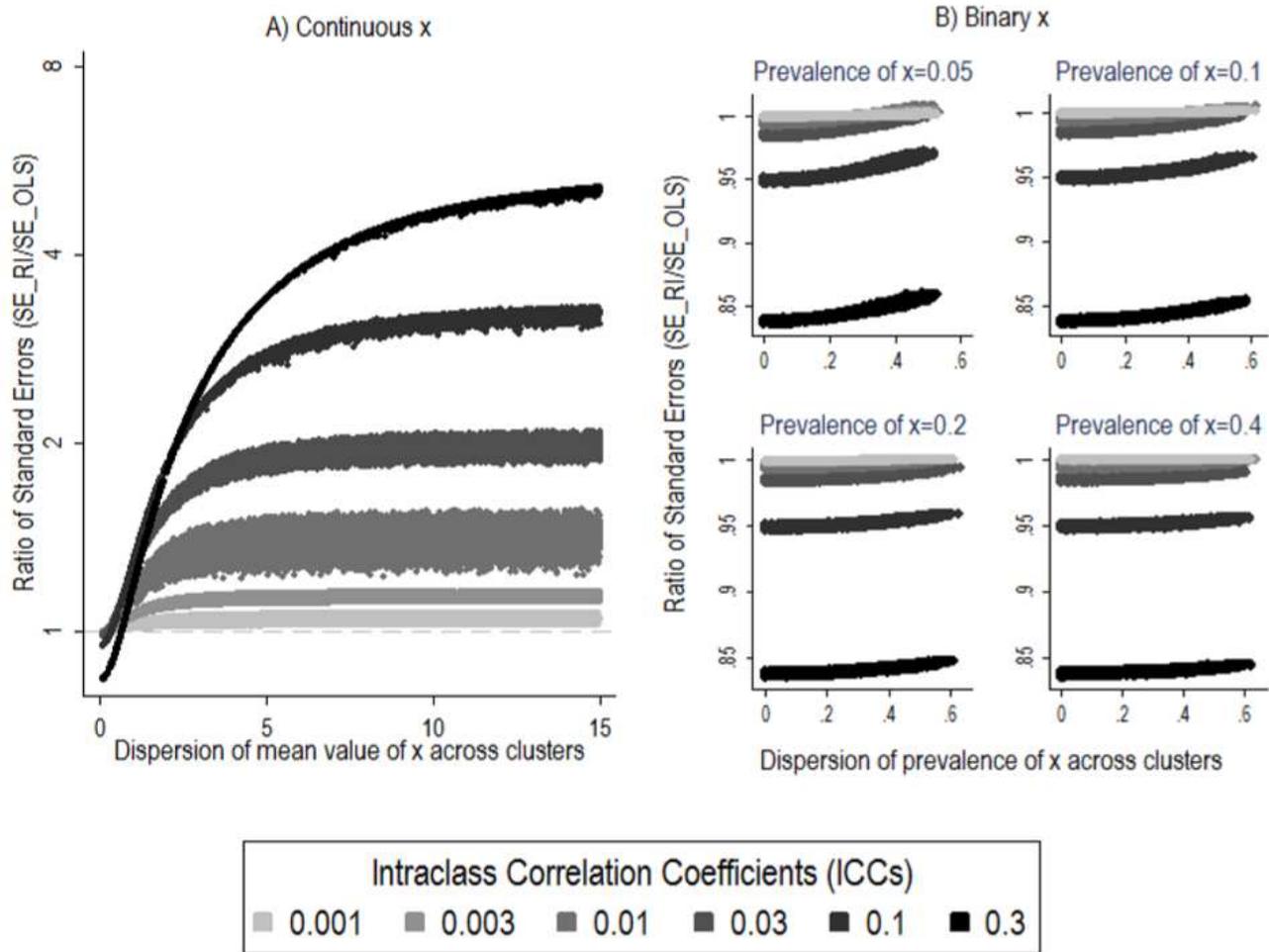
**Figure 1**

Hypothetical relationship of hearing impairment to cumulative noise exposure in four cities. Units for noise exposure and hearing impairment have been specified arbitrarily for ease of presentation. Data for each city are distinguished by the shading of data points. Cluster-specific regression lines are indicated, along with the regression line for the full dataset when clustering is ignored (dotted red line), and that when adjustment is made for cluster (solid blue line)



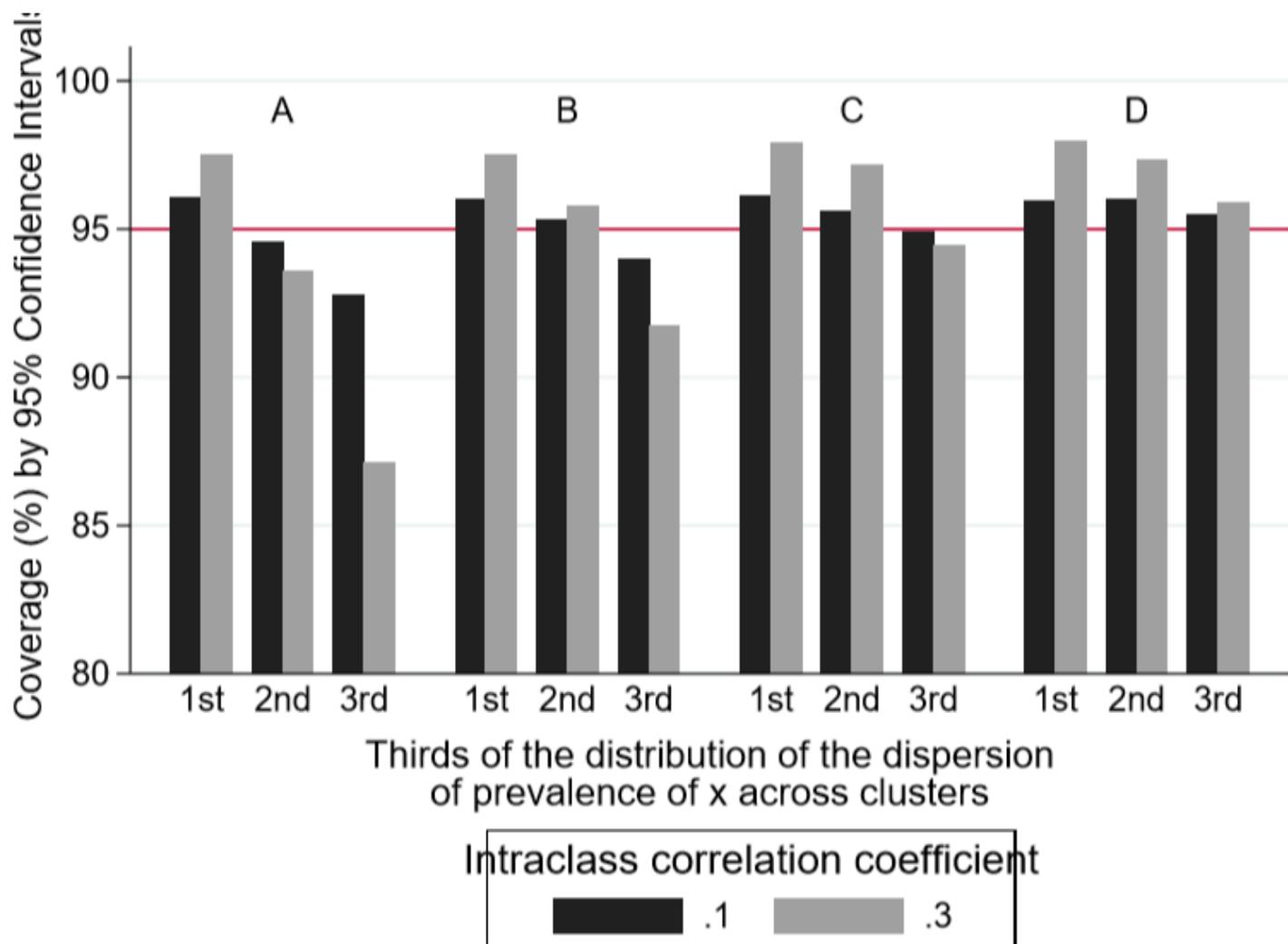
**Figure 2**

Difference between regression coefficients estimated from RI and OLS models ( $\beta_1^{RI} - \beta_1^{OLS}$ ) plotted against dispersion (expressed as SD) of mean value/prevalence of  $x_{ij}$ , for different levels of intraclass correlation (shades of grey as indicated in the legend). Figure A: Continuous  $x_{ij}$ . Figure B: Binary  $x_{ij}$



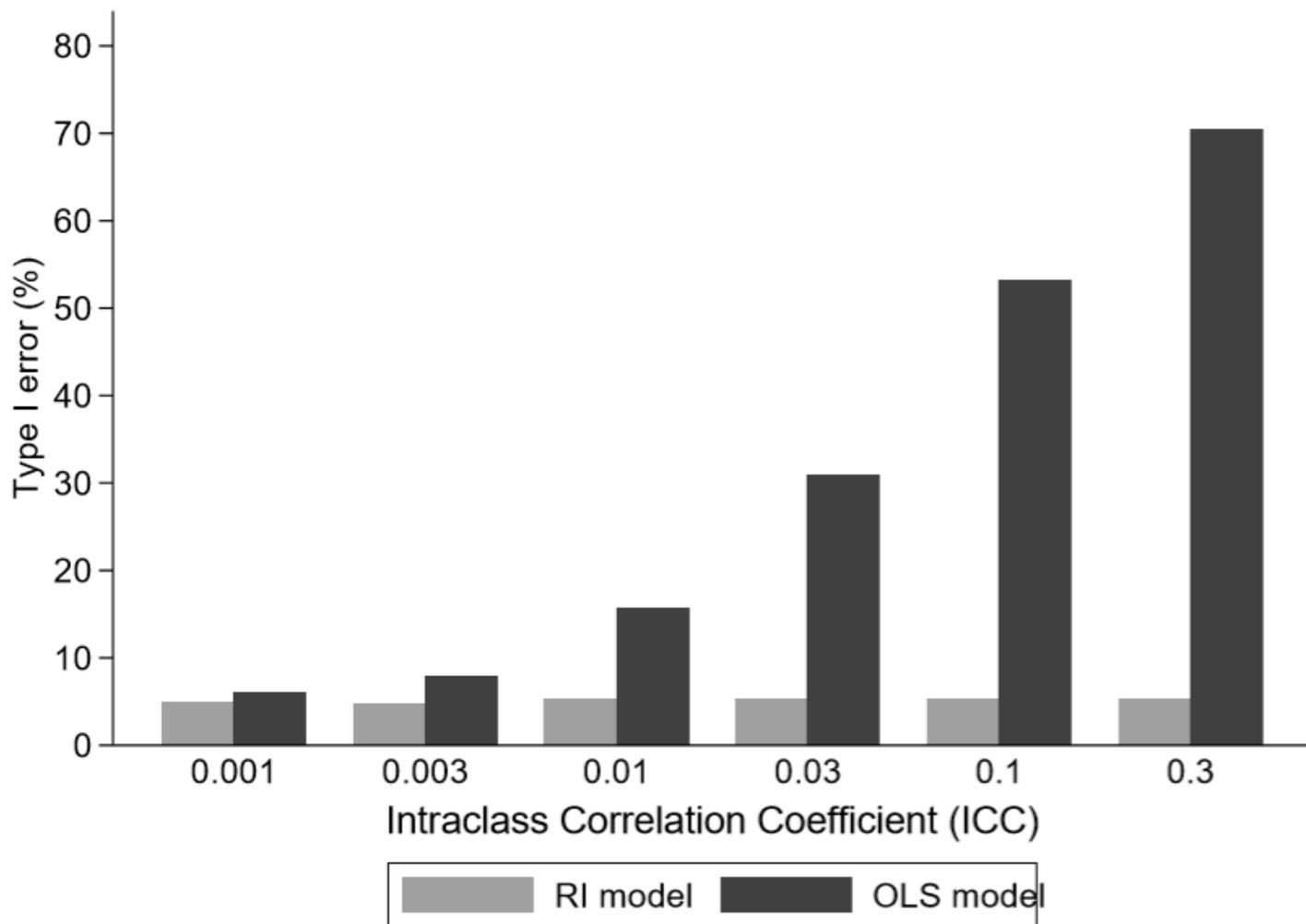
**Figure 3**

Ratios of standard errors estimated from RI and OLS models ( $SE(\beta_1^{RI})/SE(\beta_1^{OLS})$ ) plotted against relative between- to within-clusters dispersion (expressed as SD) of explanatory variable  $x_{ij}$ . Figure A: Continuous  $x_{ij}$ . Figure B: Binary  $x_{ij}$



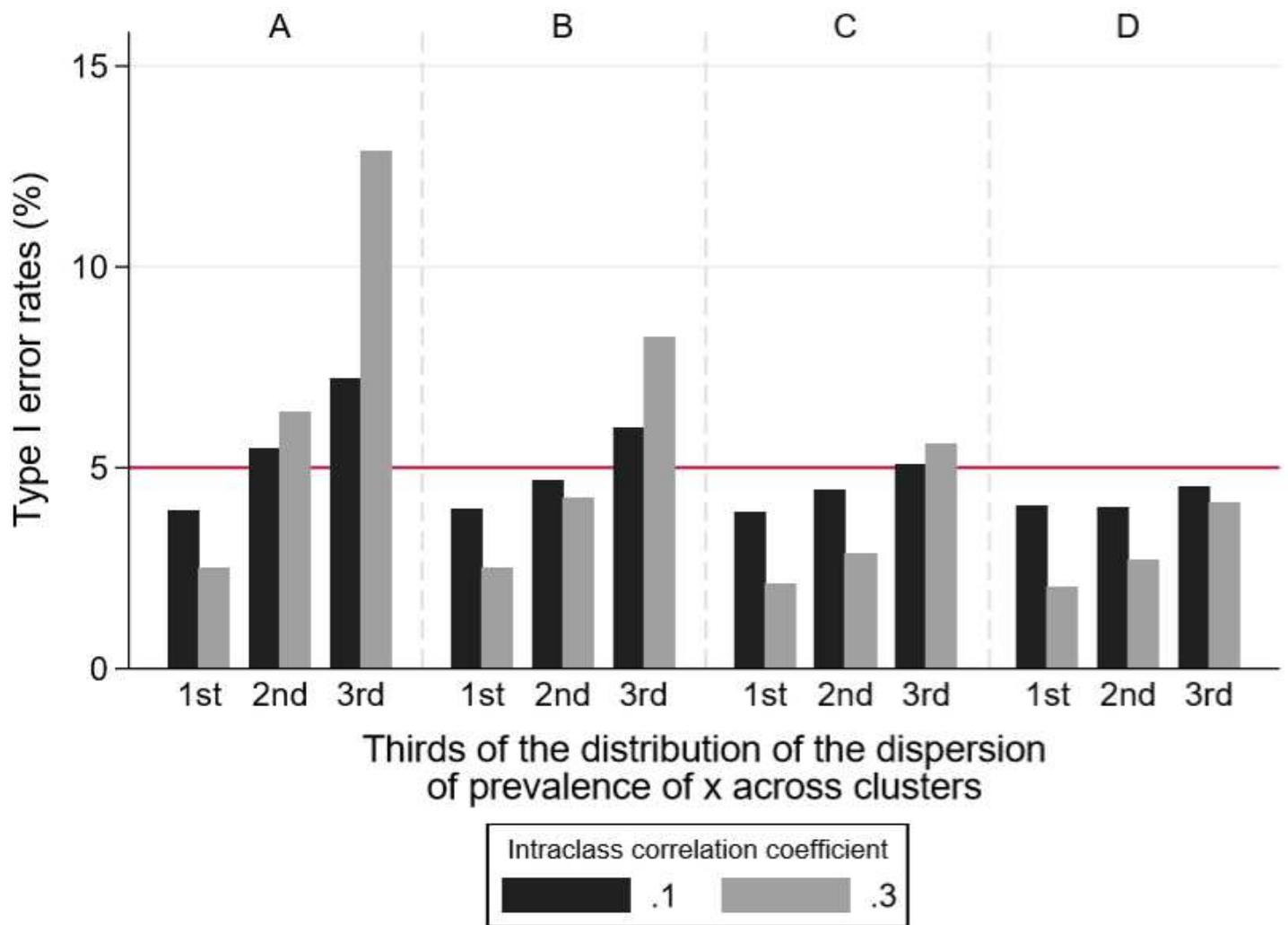
**Figure 4**

Coverage (%) by 95% confidence intervals from the OLS model for ICC=0.1 and 0.3, by overall prevalence rates of x (A) 0.05, B) 0.10, C) 0.20, and D) 0.40), and thirds of the distribution of the dispersion (expressed as SD) of prevalence of across clusters



**Figure 5**

Proportion (%) of datasets for which the null hypothesis was rejected according to level of ICC when  $\beta_1^{RI}=0$  and  $x_{ij}$  was continuous



**Figure 6**

Type I error rates (%) from the OLS model for ICC=0.1 and 0.3, by overall prevalence rates of  $x_{ij}$  (A) 0.05, B) 0.10, C) 0.20, and D) 0.40), and thirds of the distribution of the dispersion (expressed as SD) of prevalence of  $x$  across clusters