

Article

## A novel approach for modeling malaria incidence using complex categorical household data: The minimum message length (MML) method applied to Indonesian data

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### Abstract

We investigated the application of a Minimum Message Length (MML) modeling approach to identify the simplest model that would explain two target malaria incidence variables: incidence in the short term and on the average longer term, in two areas in Indonesia, based on a range of ecological variables including environmental and socio-economic ones. The approach is suitable for dealing with a variety of problems such as complexity and where there are missing values in the data. It can detect weak relations, is resistant to over-fitting and can show the way in which many variables, working together, contribute to explaining malaria incidence. This last point is a major strength of the method as it allows many variables to be analysed. Data were obtained at household level by questionnaire for villages in West Timor and Central Java. Data were collected on 26 variables in nine categories: stratum (a village-level variable based on the API/AMI categories), ecology, occupation, preventative measures taken, health care facilities, the immediate environment, household characteristics, socio-economic status and perception of malaria cause. Several models were used and the simplest (best) model, that is the one with the minimum message length was selected for each area. The results showed that consistent predictors of malaria included combinations of ecology (coastal), preventative (clean backyard) and environment (mosquito breeding place, garden and rice cultivation). The models also showed that most of the other variables were not good predictors and this is discussed in the paper. We conclude that the method has potential for identifying simple predictors of malaria and that it could be used to focus malaria management on combinations of variables rather than relying on single ones that may not be consistently reliable.

**Keywords** malaria; Indonesia; model; Minimum Message Length (MML); classification.

### 1 Introduction

Similar to Chikungunya and Dengue (Radhika et al., 2011; Ramathilaga et al., 2012), malaria is a disease of the tropics and subtropics. It is a global problem, endemic in 106 countries with an estimated 3.3 billion people at risk of malaria in 2010. In 2010 there were 216 million cases of malaria world wide, with an estimated

655,000 deaths (World Health Organisation, 2011). In Indonesia around half the population lives in malarious areas SEARO (2010).

The pathogens, species of *Plasmodium*, are transmitted by mosquitoes of the genus *Anopheles*. Although most research on malaria has been carried out in Sub-Saharan Africa, malaria is important in south-east Asia. The ecology of malaria is complex. Research over several areas in Indonesia has shown that its relationship with environmental variables (biophysical and socio-economic) is spatially and temporally heterogeneous (Dale et al., 2005). Most other studies are area-specific within Indonesia (e.g., Anthony et al., 1992; Baird et al., 1996; Barcus et al., 2002; Syafruddin et al., 2006; Syafruddin et al., 2007).

Control of malaria often focuses on control of mosquitoes either by excluding them from contact with people using insecticide treated nets (ITNs) or by indoor residual spraying (IRS) of insecticide WHO (2009). It is difficult to relate specific mosquito control activities to malaria incidence, although mosquito control in parts of Australia has been shown to be related to the incidence of Ross River virus, also a mosquito-borne disease (Tomerini et al., 2011). This paper is about a novel modeling method applied to the incidence of malaria, an increasing field of research. McKenzie (2000) reviewed malaria modeling, noting that since 1928 there have been many modeling approaches focussing on malaria. More recently, a simple internet search (March 2012) for 'malaria' and 'model' in the title found 358 references in the refereed literature dating from 1974. Of these there were 67 that related specifically to models of malaria incidence, as opposed to treatment and other modeling approaches, and 60% were published since 2005 (Dale unpublished data). Smith and Ruktanonchai (2010), in their review, note that the early mathematical models of malaria transmission remain useful conceptually but have some important shortcomings. They need to be applied to real systems and extended to find new ways explain malaria incidence. Malaria presents a complex problem, with a variety of anopheline mosquito vectors in a wide range of habitats and transmitting the disease via several related pathogens of which *Plasmodium falciparum* is the most serious. This is a complex area and models are powerful tools to assist the understanding of complex issues, to integrate information from different areas. This has been facilitated by advances in computer modeling that extend traditional analytic approaches (McKenzie, 2000). Modeling malaria can help identify the variables that are important to its incidence and has potential application in disease management.

That modeling is important to understanding malaria is evidenced by the range of approaches in the modeling literature. These include disease dynamics such as transmission, vector/disease relationships with environment (especially with climate) as well as more detailed clinical studies, vaccine development, entomologic modeling of vectors and genetic research.

Mathematical disease models for malaria may consider the dynamics (Tumwiine et al., 2007) or transmission (Ishikawa et al., 2003) including entomological parameters (Vargas-De-Leon, 2012) or transmission and resistance (Smith et al., 2007). Mathematical models may extend to a broader range of variables. For example Gu et al., (2003) modelled *Plasmodium falciparum* transmission using both epidemiological and entomological data. In a different ecological context, Ballesteros and Qiu (2012) have used a machine learning technique to model change in (location of) land use. MML is a mathematical technique from Bayesian information theory."

There are several approaches that are used to model malaria. Recent examples include Bayesian methods (Gosoni et al., 2010; Riedel et al., 2010). Also there are more complex arrangements such as using Bayesian modeling with Markov Chain Monte Carlo (MCMC) techniques and both generalized linear models (GLM) and generalized additive mixed models (GAMM) (Nkurunziza et al., 2010). The interest here is in the very complex area of environmental modeling, using a combination of biophysical and socio-economic and behavioral variables. This complex area of malaria research needs to be explored, using powerful computers

and innovative analytic tools. An early paper by Jones and O'Neill (1993) modelled malaria using land use and population as independent variables in the Brazilian Amazon. Ngawa and Shu (2000) developed a mathematical model of endemic malaria using human population and mosquitoes and deterministic differential equations with variable human and mosquito populations. More recent research has shown how a range of environmental factors can be used to model malaria at relatively high resolution (at sub district level in Malawi, Africa) using regression analysis (Kazembe, 2007). The most comprehensive model is the conceptual one of De Vries and Martens (2000) that includes both biophysical and socioeconomic variables, though, as far as the authors are aware, it has not been fully implemented. Nevertheless it is a useful model.

An innovative approach that has been used in other areas is that of using a Minimum Message Length (MML) criterion to select the best model (see for example (Dowe, 2008; Dowe et al., 2007)). It has never been published in the malaria modeling literature and so we explore its use here. It is more fully described below.

Complex systems need innovative modeling techniques to discover the most appropriate (best fit) model. Clustering can suggest groupings of like things and MML can evaluate the best fit, based on the shortest message length needed to describe the model.

This paper develops a model using MML to discover the best model to explain malaria incidence. The modeling is optimized using the Minimum Message Length (MML) principle of machine learning and inductive inference (Wallace and Boulton, 1968; Boulton and Wallace 1973; Wallace and Dowe, 1999; Wallace, 2005; Dowe, 2008, 2011). It is statistically invariant (meaning that transforming the co-ordinates does not affect the answer) and it is resistant to noise, (a common problem with ecological data); it generates simple models that predict well (Comley and Dowe, 2003; Comley and Dowe, 2005; Dowe et al., 2007) and it is useful in several different tasks where model uncertainty is important (Dale and Dale 2004). MML is a method which involves both model and fit. MML uses a two-part message, the first part of which encodes the model (and whose length is the complexity of the model) and the second part of which encodes the data, given the model (and whose length is the log-likelihood of the data given this model). A more complex model is only acceptable if the extra 'cost' (measured by message length) of specifying the model gives an increase in the fit to data sufficient to reduce the overall message length. It is thus an implementation of Ockham's Razor (Needham and Dowe, 2001; Dowe, 2011, sec. 4).

## 2 Methods

### 2.1 Data collection

Data were collected by household in villages in two provinces which both had endemic malaria. These were West Timor and Central Java (Fig. 1). The villages were selected by stratified random sampling, subject to an access constraint. Stratification was based on malaria status (incidence of malaria – high or medium) and village topographic character: coastal, hilly or highland topography, which is related to the distribution of various mosquito vectors of malaria in the area (Ndoen, 2010).

Malaria incidence data were collected at the district health office, based on the monthly routine surveillance data reports from health centres. These were assigned to two malaria status categories (High or Medium) based on the Annual Malaria Incidence (AMI) or the Annual Parasite Incidence (API).

The main data used here were 26 attributes, in nine categories, as shown in Table 1. They were selected from 67 attributes collected in a broader household survey (Ndoen, 2008). The selection was based on variables identified as important in the literature and identified by Ndoen (2008). Data were collected by interview, using a semi-structured questionnaire. Trained health centres staff conducted the interviews. One day training was provided for the interviewers prior to data collection. The trainings were conducted in health centres or in district health offices. The sampling unit was household or family, selected systematically. There

were 529 households (respondents); 339 in West Timor and 190 in Central Java. Each respondent was an adult family member (18 years old or older), preferably the head of household. Information was obtained about the independent variable: recent malaria history and that of the family over the previous year. Dependent variables were the 26 variables in nine categories, referred to above (Table 1).

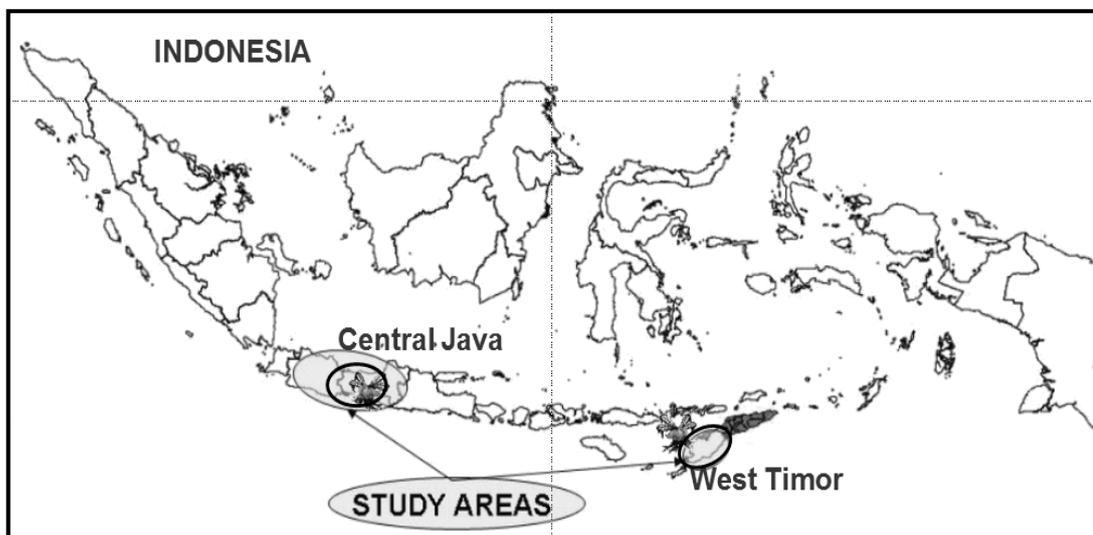


Fig. 1 Location of the study areas

## 2.2 Aim of the modeling

Our aim is to use the data in a predictive model of the incidence of malaria in house-holds. Table 1 summarises each attribute in 9 categories. All attributes are either binary or ordinal.

Malaria incidence (in a house-hold) is represented by two target variables. The first is the recent malaria ratio (Recent Ratio), which is the average number of malaria cases per house-hold member during the last three months. The Recent Ratio is an objective measure of malaria incidence in the recent past. The second target variable (Av. Malaria) is a subjective estimate of how often a household had malaria in the previous year.

The challenges in modeling the link between these attributes and the incidence of malaria (our two target variables) include that:

- there are many attributes compared to the number of respondents
- there are many missing values
- many attributes are not independent of each other
- several attributes may interact with each other in complex ways to affect malaria incidence

Our methods must therefore:

- deal appropriately with missing data
- be able to detect weak relations
- be resistant to over-fitting
- have a solid foundation in Bayesian probability theory
- be able to handle the high ratio of attributes to respondents
- be able take advantage of the relations between attributes
- take into account the fact that all attributes affect the incidence of malaria simultaneously (We do not want to look at the relations between malaria incidence and each attribute separately. We are instead

interested in complete models that show how all attributes work together to contribute to malaria incidence.)

- produce results that are easy to interpret
- be able to select between models of different complexities

**Table 1** Attributes selected for analysis

Category	Attribute Name	Description
Stratum	Stratum	malaria stratum of the respondents village
Ecology	Highland	.
Ecology	Hilly	.
Ecology	Coastal	.
Occupation	Farmer	.
Occupation	Fisher	.
Occupation	Other	true if not fisher or farmer
Preventative Measures	Clean Backyard	frequency of cleaning backyard
Preventative Measures	IRS	indoor residual spraying
Preventative Measures	Long Sleeve Use	wearing covering clothing
Preventative Measures	Bed-net Ratio	ratio of house-hold members using bed-nets
Health Care Facilities	HF Access	ease of access the health care facilities
Health Care Facilities	Distance HF	distance to the nearest health care facility
Immediate Environment	Pond	presence of a pond near the home
Immediate Environment	Rice Field	presence of a rice field near the home
Immediate Environment	Breeding Place	presence of a potential mosquito breeding place near the home
Immediate Environment	Paddock	presence of a paddock near the home
Immediate Environment	Garden	presence of a garden near the home
Immediate Environment	Bushes	presence of bushes near the home
House-Hold	Toilet	indoor or outdoor
House-Hold	Lighting	electric or non-electric
House-Hold	Cooking Fuel	cooking fuel
House-Hold	Wall	type of walls in home
House-Hold	HH Members	number of people in the house-hold
SES	SES	socio-economic status
Perception	Perception	Accuracy of respondent's perception of malaria and its causes

## 2.3 Description of the model

### 2.3.1 Two Bayesian network models

We use customised Bayesian network models (also known as directed graphical models) for the analysis. The idea of using MML for hybrid Bayesian network models with both discrete (categorical) and continuous-

valued attributes was discussed in Dowe and Wallace (1998) before then being first implemented in Comley and Dowe, (2003 and 2005), with discussions in Tan and Dowe (2004, sec. 5), Wallace (2005, sec. 7.4), Dowe (2008, sec. 0.2.5) and Dowe (2011).

The minimum message length (MML) principle is used to encode the discrete structure of the Bayesian network and point estimates of the weights of parameters on network arcs - all of which is encoded in the first part of the two-part MML message, with the second part encoding the data given this Bayesian network model. The total two-part message length gives a measure of goodness of the suitability of the model, trading off the length of the first part of the message (model complexity) with the length of the second part of the message (goodness of fit to the observed data).

The nodes of our Bayesian networks fall into three categories.

- I. Target: These nodes each represent a vector of observed values for one attribute, which is to be explained (Av. Malaria and Recent Ratio).
- II. Input: These nodes each represent a vector of observed values for one attribute which is not to be explained but is used to explain the target variables (e.g., causes of malaria).
- III. Hidden: These nodes each represent a vector of unobserved values, which are inferred.

The arrows in Figs. 2 and 3 (below) represent conditional independences and are examples of two models. Red nodes (at the top of level) are used to represent targets, black nodes (at the base) for inputs and blue nodes (in the middle level) for hidden. Below is an example of what we are calling a Type C network diagram (Figure 2). In Fig. 2 there are 4 input attributes ( $x_1, x_2, x_3, x_4$ ) and 2 targets ( $y_1, y_2$ ). A single parameter is associated with each arrow. All parameters take values between -1 and 1. Similarly the observed input attributes and target variables have been mapped onto a discrete set of values between -1 and 1. A positive value for  $p_1$  in this example would mean that  $x_1$  tends to increase  $y_1$  while a negative value for  $p_1$  would have the reverse effect. The strength of this influence depends on  $|p_1|$ . The influences of separate arrows to a single node are combined. The inferred parameter vector  $p$  would show how the 4 inputs combined influence the target  $y_1$ . We will refer to this type of network as Type-C.

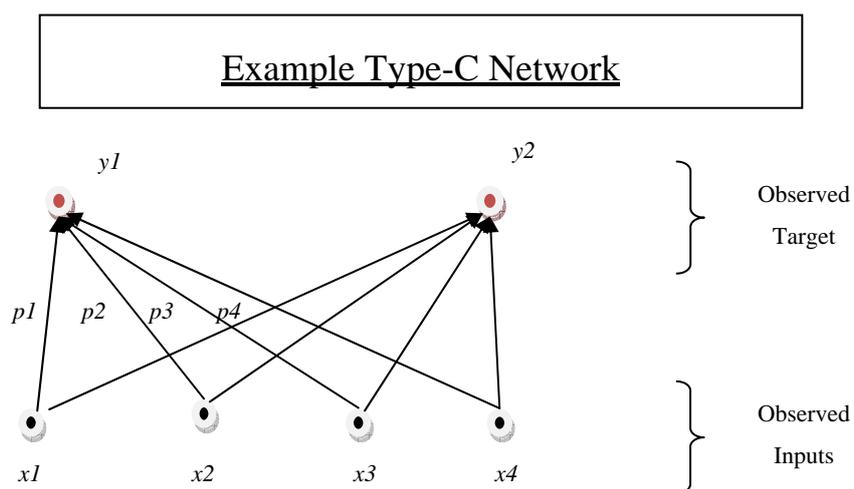


Fig. 2 A Type C network

By creating intermediate (hidden) nodes our models can express more complex relations. We will refer to this type of network as Type-A. We will use names such as A1, A2 and A3 to refer to such networks with 1, 2 and 3 hidden nodes or features respectively. The name A0 will be used for the case where there is assumed no link between inputs and target. A0 can be thought of as a null hypothesis. Model A2 is illustrated in Fig. 3. As with the C model all parameters take values between -1 and 1. The influence of the input variable  $x$  on the target variable  $y$  via the hidden feature  $h$  is such that negatives between both  $x$  and  $h$  and between  $h$  and  $y$  lead to a positive influence on  $y$  and a negative in one with a positive in the other has a negative influence on  $y$ . This is demonstrated later in the results.

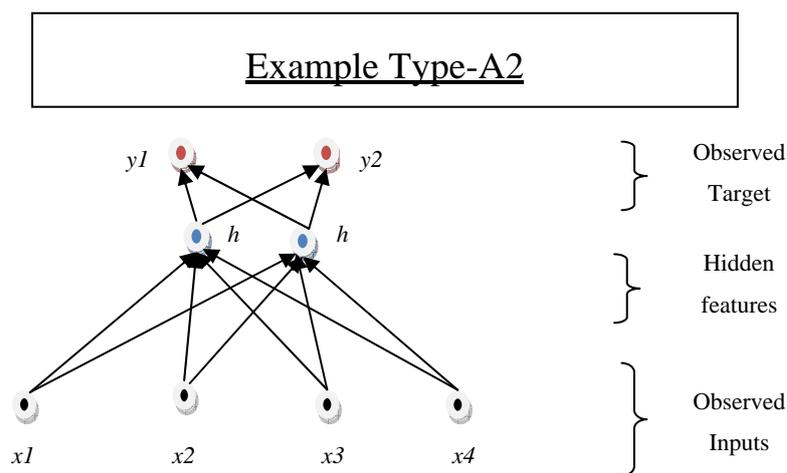


Fig. 3 A type A-2 network

### 2.3.2 Parameters and prior probabilities (priors)

Bayesian prior probabilities are assigned to all parameters to be inferred. In Figs. 2 and 3 we have mentioned that there is a parameter associated with each link depicted. Aside from these link parameters there is also 1 parameter associated with each input node, 2 parameters associated with each target node and 1 for each hidden node. These additional parameters are necessary to make the networks flexible enough to represent the types of relations expected. Here it is sufficient to look at only the link parameters to interpret our results.

For the type-C network (with 26 input nodes and 2 target nodes) there are  $82 = (26 + 4 + (26*2))$  parameters. For the type-A1 network there are  $59 = (26 + 1 + 4 + (26 + 2))$ . For the type-A2 network there are  $87 = (26 + 1 + 4 + (26+2)*2)$ . For the type-A3 network there are  $117 = (26 + 3 + 4 + (26+2)*3)$ . Clearly estimating this many parameters reliably (without over-fitting) is quite difficult considering that we only have 529 respondents and also because the relation between input nodes and target nodes is, in our data, relatively weak.

We do not want to look at the relations between malaria incidence and each attribute separately. We are instead interested in complete models that show how all attributes work together to contribute to malaria incidence. The problem with this is that there are a huge number of distinct and very different solutions (instantiations of all parameters). Given enough data it is, in theory, possible to narrow the solution down to a single best network structure and accompanying point estimates. However we do not have that much data.

Our solution here is to infer a large set of typical solutions. While each solution by itself is hard to interpret due to the nature of the models used, by looking at commonalities between members of the inferred

set of solutions, one can come to some solid conclusions. For each link parameter we calculate a mean and standard deviation over all the values it takes in the solution set. A high standard deviation indicates that the value of a link parameter depends a lot on the values of other parameters. A low standard deviation means the influence of that parameter depends little on the effects of other parameters. This allows us to isolate those input attributes that have a consistent relation with malaria incidence even when the effects of all other attributes are taken into account.

The problem of having many parameters can be further alleviated by assigning strong priors to all parameters. Our prior over the parameters gives a strong preference to solutions which set most of the parameters to zero (so that those links have no effect) and some preference to values with low magnitude (so that those links have little effect). This prior reduces the uncertainty about the solution, allowing more to be accomplished with less data. It also has the added bonus of giving preference to solutions that are simpler and easier to interpret.

The reader may have noticed that these models have a lot in common with artificial neural-networks. While they function in a similar way, our models are strictly Bayesian networks with complete priors defined. This design is intended to be correct in terms of Bayesian modeling and to make solutions (point-estimates) less sensitive to small changes in parameter values.

### 2.3.3 Analysis setup

Table 2 shows the 26 input attributes and the values they take. The two target variables are shown at the end of the table. All values have been mapped to real values between -1 and 1 to be used by the program.

We have used models A0, A1, C, A2 and A3 on the data for Central Java and West Timor to infer point estimates of all parameters. Message lengths were used to select the best models: that is, those models with the minimum lengths. This was applied to responses from both provinces (West Timor, Central Java) separately. That was done because we expect each area to be distinct enough to have different characteristics where cause of malaria is concerned. West Timor has a greater malaria problem, with year-long transmission, whereas the problem is less in Central Java (Ndoen et al., 2011), although malaria is endemic in both areas.

## 3 Results

### 3.1 Results of modeling

The results generally found that an A type model had the shortest message length and hence is the preferred one. The results presented below show both the A and C model only where there were *useful predictors*. That is where connecting link parameters had means of absolute value greater than 0.10 and standard deviations less than 0.3. The *most consistent* predictors were determined by having a small standard deviation compared to the mean (a mean of absolute value greater than 0.10 *and* a standard deviation (SD) of less than half the mean). The message length is measured in nits, where 1 nit (of information) =  $\log_2(e)$  bits approx. 1.4427 bits.

### 3.2 Results for Central Java

The analysis of 190 respondents from Central Java found that model A1 provided the best explanation of the target variables (Table 3). Model C provided no consistent predictors of malaria and will not be considered further here.

**Table 2** Attributes and values

Attribute Name	Possible Values	Transformed Values Used
Stratum ( <i>village malaria</i> )	Medium, High	-1, 1
Highland ( <i>ecology</i> )	False, True	-1, 1
Hilly ( <i>ecology</i> )	False, True	-1, 1
Coastal ( <i>ecology</i> )	False, True	-1, 1
Other ( <i>occupation</i> )	False, True	-1, 1
Farmer ( <i>occupation</i> )	False, True	-1, 1
Fisher ( <i>occupation</i> )	False, True	-1, 1
Clean Backyard	1,2,3,4,5 (ordinal categories, 1 = never)	-1, -.5, 0, -.5, 1
IRS	1,2,3,4,5 (ordinal categories, 1 = never)	-1, -.5, 0, -.5, 1
Long Sleeve Use	1,2,3,4,5 (ordinal categories, 1 = never)	-1, -.5, 0, -.5, 1
Bednet Ratio	1,2 (ratio, 1 means more nets)	-1, 1
HF Access	1,2 (walking, motorbike)	-1, 1
Distance HF	1,2,3 (<1km, 1-2km, >2km)	-1, 0, 1
Pond	False, True	-1, 1
Rice Field	False, True	-1, 1
Breeding Place	False, True	-1, 1
Paddock	False, True	-1, 1
Garden	False, True	-1, 1
Bushes	False, True	-1, 1
Toilet	1, 2 (1 separate, 2 own)	-1, 1
Lighting	1, 2 (1 kerosene, 2 electric)	-1, 1
Cooking Fuel	1, 2 (1 wood, 2 stove)	-1, 1
Wall	1, 3 (1 brick, 3 bamboo)	-1, 1
HH Members	0-1, 1-2, 3-4, 5-7, >7	-1, -.5, 0, .5, 1
SES	Low, Med, High	-1, 0, 1
Perception ( <i>of malaria</i> )	Wrong, Right	-1, 1
Ratio Recent (is a <b>Target</b> )	0-.1, .1-.4, .4-.6, .6-.8, >.8	-1, -.5, 0, .5, 1
Average Malaria (Av Mal- is a <b>Target</b> )	1,2,3,4,5 (ordinal categories)	-1, -.5, 0, .5, 1

**Table 3** Models for Central Java (best model is in bold)

Model	Best Message Length (nits)
A0	247
<b>A1</b>	<b>230*</b>
C	238
A2	234

### 3.3 Model Type-A1 for Central Java

Fig. 4 shows the means and standard deviations of the inferred link parameters for nodes that had predictor value (where connecting link parameters have means of absolute value greater than 0.1 and standard deviations less than 0.3 (or less than half the mean for most consistent predictors)).

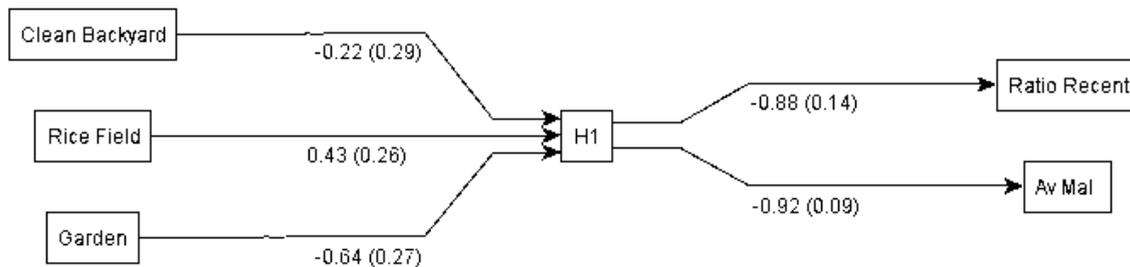


Fig. 4 Results of the Model A1 Central Java showing mean (SD)

### 3.4 Consistent predictor attributes

The *most consistent* predictor was the presence of a garden with a positive relationship. That is, both recent malaria and average malaria were positively related to a household having a garden. Having a clean backyard and being near rice fields were *useful predictors* and were also related to increased malaria incidence.

### 3.5 Results for West Timor

The analysis of the 330 respondents in West Timor also resulted in the A1 model providing the best explanation. The best message lengths are shown in Table 4. Model C, although not the best model, did contain some consistent predictors and will be included here.

Table 4 Models for West Timor (best model is in bold)

Model	Best Message Length (nits)
A0	727
<b>A1</b>	<b>640*</b>
C	664
A2	653

### 3.6 Model Type-A1 for West Timor

Fig. 5 shows the means and standard deviations of the inferred link parameters for nodes that were valuable predictors.

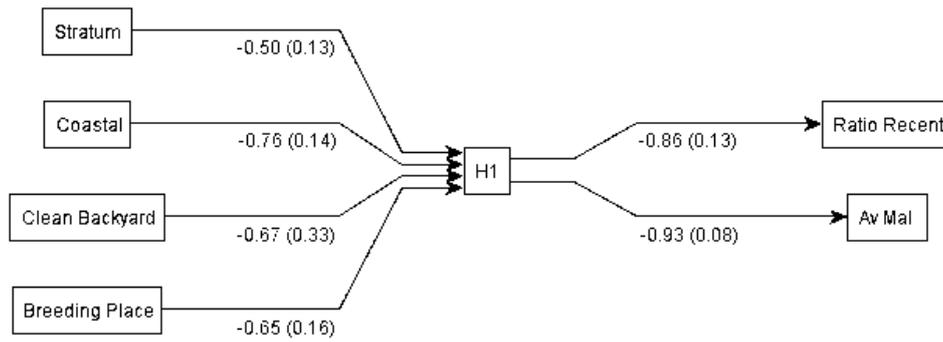


Fig. 5 Results of the Model A1 model for West Timor

### 3.7 Consistent predictor attributes

There are four attributes that met the *most consistent predictors* criteria, for both recent and longer-term average malaria. These all had a positive influence on malaria incidence. They are Stratum in the high category, a coastal location, having a clean backyard and the presence of mosquito breeding place.

### 3.8 Model Type-C for West Timor

Fig. 6 shows the means and standard deviations of the inferred link parameters for nodes that had predictor value.

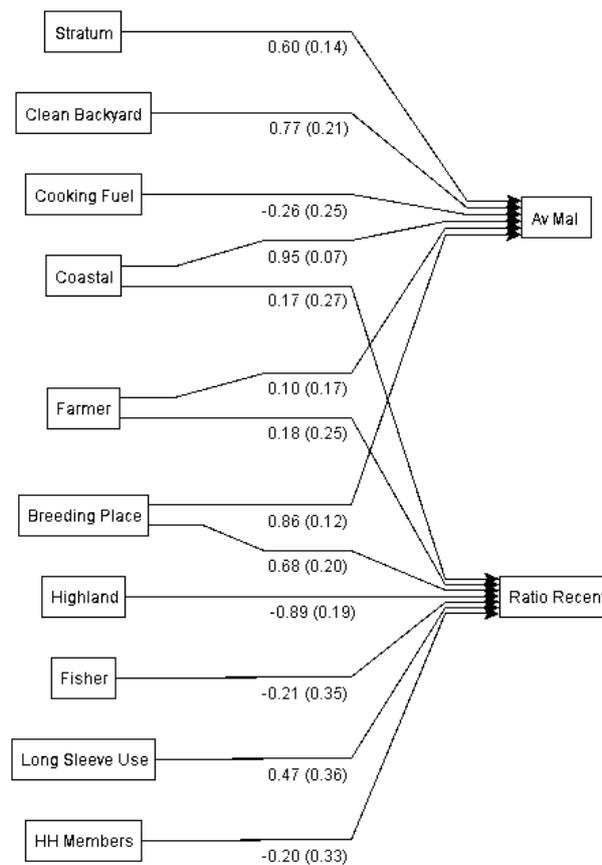


Fig. 6 Results of the C model for West Timor

### 3.9 Consistent predictor attributes

The *most consistent predictors* are Stratum, clean backyard, a coastal location (for Av malaria) presence of mosquito breeding place and highland location (the latter only for recent malaria and with a negative relationship). The relationship to the two target variables is not completely consistent and is summarised in Table 5. For recent malaria the only strong positive predictor is the presence of a mosquito-breeding place; a highland location is strongly negatively related to recent malaria. For the longer-term average malaria the relationships are clearer with strong positive relationships with high stratum, clean backyard, coastal location and mosquito breeding place.

**Table 5** Consistent predictors of the C model for West Timor

<b>Attribute Names</b>	<b>Influence on Recent Malaria Ratio</b>	<b>Influence on Av Malaria</b>
Stratum (is high)	none	positive
Clean Backyard (more often)	none	positive
Coastal (is coastal)	none	positive
Breeding Place (is present)	positive	positive
Highland (is highland)	negative	none

### 3.10 Summary of predictors

Table 6 summarises the important predictors and those that were discarded because they did not meet the criteria described above.

**Table 6** Summary of the variables as predictors in the analyses (by category).

<b>Consistent predictors</b>	<b>Variables with little predictive value</b>
Stratum	
Ecology: Highland (negative), Coastal	Ecology: Hilly
Preventative measures: Clean backyard	Preventative measures: IRS, Long Sleeve Use, Bed-net Ratio
Environment: Breeding place, Garden, Rice field	Environment: Pond, Paddock, Bushes,
	Occupation: Farmer, Fisher, Other
	Health care facilities (HF): HF Access, Distance HF
	Household (HH): Toilet (indoor or outdoor), Lighting, Cooking Fuel, Wall, HH Members
	Socio-economic status
	Perception

## 4 Discussion

The discussion focuses first on the methodological issues and then on the substantive results.

## 4.1 Methodological

### 4.1.1 Strengths

The data, with the exception of Stratum, was all collected at the same level of resolution (household) and hence there should be no discrepancies related to disparate scale.

The method has modeled malaria based on a wide range of variables, selected as important based on the literature, and representing a diverse range of attribute categories. It used a modeling process that identifies the best and simplest model to account for the data. This results in a relatively few variables being selected as combined strong predictors and hence relatively simple to interpret.

In practice, MML's quantitative Ockham's razor trade-off between model complexity and goodness of fit means that MML models tend to be less complicated than rival statistical and machine learning methods - with MML models tending to involve less explanatory variables and attributing them slightly less influence than rival methods, yet with MML tending to predict better (Dowe, 2008, sec. 0.2.5, p539, col. 1).

In cases where the amount of data is relatively limited compared to the number of parameters which have to be estimated (as happens with, e.g., single and especially multiple latent factor analysis, the classical Neyman-Scott problem and more recent panel data versions of Neyman-Scott), it appears that MML is the only method known so far which will in general be statistically consistent - i.e., for which the parameter estimates ultimately become correct as the amount of data increases (Dowe and Wallace, 1997; Wallace 2005, chap. 4; Dowe, 2008, sec. 0.2.5; Dowe, 2011, secs. 5.2, 6.4 and 6.5).

### 4.1.2 Weaknesses

The data used may not be completely reliable. The reporting of recent malaria (last three months) is likely to be more reliable than recollections over a longer period (average malaria). An even shorter period for recollection (of two months) was used by Dye *et al* (2010) for their qualitative African study. That the Stratum is not always a consistent predictor may also indicate that there may be discrepancies between local knowledge and the official data.

## 4.2 Substantive results

The results of the predictor attributes were expected; however some of the ones that did not predict well were surprising. At a general level this would mean that, although they may appear to be important when taken singly, when included in a complex model the combined effects of others may have greater predictive value. From a practical perspective dealing with several variables may be a better management option rather than focussing on one, which may, or may not be reliable (see for example bednets and references to these below). The following discusses both the expected predictors and the occasionally surprising evictions/omissions.

### 4.2.1 The expected predictors

*Stratum*: this was to be expected and, in a sense, acts to validate the data, though does not do so completely. This may be explained by self-reported data (albeit based on professional diagnosis) with possibly some cases of memory lapse.

*Ecology*: Highland (negative). It was not surprising that a highland location had a negative relationship with malaria: highland areas may not contain wetlands and temperatures may be cool, thus slowing the incubation and transmission times for the pathogen. However this may change as global temperatures increase. With climate change anopheline malaria vectors may be able to move to higher elevations and increase transmission, as has already been observed in east Africa (Pascual *et al.*, 2006). Ndoen *et al.* (2010) also showed that some malaria vectors were already common in the highlands in Indonesia (e.g., *Anopheles barbirostris*) and thus might contribute to highland malaria increasing as climate changes (and land use also may play a role).

A coastal location had a positive relationship with malaria and this is likely because coastal areas include wetlands and rice fields. This is likely to be related to the significant relationship between malaria vectors and coastal locations in West Timor (Ndoen et al., 2010).

*Preventative measures:* Clean backyard. Clean backyard is not usually associated with mosquito risk as backyard rubbish (i.e., not a clean backyard) can provide refuge for mosquitoes and hence be associated with a higher incidence of malaria; it may be that maintaining a clean backyard exposes people to mosquito activity, especially to day-biting mosquitoes, of which there are several species in Central Java and West Timor (Ndoen et al., 2011). In the present study there are five categories of cleaning the backyard ranging from rarely to daily and the latter behavior may be putting people at extra risk.

*Environment:* Breeding place, Garden, Rice field. Rice fields may be associated with temporary water bodies. In the data set breeding place included a range of wetlands including brackish and fresh water wetlands. In the case of garden (cultivated for food crops) and rice fields it is likely that some form of irrigation would be used, creating ideal mosquito larval conditions with humans working in these environments providing a local blood meal (Van den Berg and Knols, 2006; Afrane et al., 2004). Increased malaria may also be related to sleeping outdoors as reported by (Mueller et al., 2006) for their research in Papua New Guinea.

#### 4.2.2 Unexpected non-predictors /surprise evictions from the models

*Ecology:* A hilly topography may not have many wetland areas suitable for anopheline mosquito habitats. However (Ndoen et al., 2010; Ndoen, 2008) found that hilly areas, if they also had rice fields, were associated with increased malaria and this was related to the mosquito species associated with that topography and land use. Here we found an association with rice fields, but only as part of the model (see above).

*Occupation:* Farming and fishing have been associated with increased risk of malaria in the larger study (Ndoen, 2008) and in other studies with increased risk of malaria related to both occupations (Barcus et al., 2002; Nalim et al., 2002; Worrall et al., 2003). However when included in a whole model as we have done here the effect does not appear to be important. The association between fishing and malaria incidence is variable, depending on the type of fishing. For example fish farms, if properly maintained, would not usually support mosquito production but, if abandoned, then mosquito problems and malaria have been shown to increase (Howard et al., 2007).

*Preventative measures:* these included Indoor Residual Spraying, wearing Long Sleeves and having Bed-nets. In the models developed here bed nets, often cited as effective prevention tools, were never selected as good predictors. Bednets (and IRS) can reduce the incidence of malaria (Clarke et al., 2001; Mnzava et al., 2001; Alten et al., 2003; Dye et al., 2010) but this is not always the case (Al-Ta'iar et al., 2008). Another factor that may explain the lack of relationship in our models may be related to the distribution or usage practices: distribution after an epidemic and misuse for fishing or other activities (Ndoen, 2008).

Indoor Residual Spraying (IRS) was never selected as a consistent predictor but is often cited as an effective control measure (for example: Singh et al., 2006). In Indonesia research in a hilly area of Central Java at District level showed an increase in malaria incidence as IRS was reduced between 1986 and 1995 (Barcus et al., 2002). To ensure effective indoor residual spraying against malaria vectors, knowledge of factors such as mosquitoes' resting places is essential (Takken et al., 1990; Pates et al., 2002; Warrell and Gilles, 2002). It is only effective against mosquitoes seeking hosts indoors and mostly at night. In the study areas there was no clear pattern of mosquitoes preferring indoors and night biting, though for example *An. barbirostris* in West Timor showed some preference for indoors, but not in Central Java (Ndoen et al., 2011). Mosquitoes were generally more active outdoors and IRS would not be recommended, at least as a priority action or if resources are scarce (Ndoen et al., 2010). Another study in Central Java also reported no relationship between IRS and

malaria incidence (Dale et al., 2005). There appears to be a large variability and hence IRS may not be a generally reliable predictor for all areas.

*Health care facilities (HF):* HF Access, Distance HF. Noor et al., (2003) showed that distance was an important factor important in accessing health services for malaria in Kenya. However Ndoen (2008) showed that living within 1 km of a health care facility was associated with increased malaria incidence. This may be related to ease of diagnosis and subsequent reporting. The average distance to health care facilities from villages in the Central Java and West Timor village study were 5.74 and 7.17 km respectively (Ndoen, 2008). On the other hand there is some evidence in Indonesia that, as distance to health care facilities increases, so does malaria incidence (Sipe et al., 2005, unpublished data). This is consistent with the findings of Al-Taiar et al., (2008) who found increased incidence of severe malaria if distance to a health centre was  $> 2$  km. Both these points may account for the apparent lack of a clear relationship with reported malaria incidence. In other research access to health care has been shown to be important. For example Unger et al., (2006) showed that health service access resulted in increased malaria cure rates in Mali. Bell et al., (2005), in their Philippines study, found that malaria parasite prevalence was significantly higher in villages without a resident village health worker.

*Environment:* Pond, Paddock, Bushes. In theory these all provide resources for mosquitoes: the pond provides larval habitats, paddocks may provide access to a blood meal (for zoophilic mosquitoes) and bushes provide shelter for adult mosquitoes during the day, reducing the risk of dehydration and increasing survival (mosquitoes need to survive at least 8 days for incubation of the pathogen (Bruce-Chwatt, 1980)). Paddock has been shown to be especially important. It tends to include association with animals in barns etc. and some mosquito species feed preferentially on animals (are zoophilic). Barodji et al., (1992) showed that, in Central Java, moving cattle shelters from inside to the outside of the house, significantly reduced the number of *An. aconitus* (a malaria vector) indoors. In China, animals are commonly kept at the boundaries of the villages between mosquito breeding habitats and human dwellings, reducing the human-mosquito contact (Warrell and Gilles, 2002). In Ethiopia, Seyoum et al., (2002) reported that separating animal sheds from human dwellings reduced the human-mosquito contact. Van der Hoek et al., (1998) also noted that cattle near housing was related to increased malaria incidence. What the modelling in our study has shown is that these environment variables, although they individually may be important, when taken as a whole, other combinations of variables have more predictive power.

*Household (HH):* Toilet (indoor or outdoor), Lighting, Cooking Fuel, Wall, HH Members. There is some evidence that house characteristics are important for malaria incidence, but they are also related to SES (see below). Thus Ghebreyesus et al., (2000), in their study in Ethiopia, found risk factors associated with malaria including earth roof, windows, open eaves, no separate kitchen, having one sleeping room all of which would facilitate entry and dispersal of mosquitoes. These variables were not important in our analyses, though they do also reflect SES and the lack of importance here may reflect the discussion in the previous paragraph. Household size was found to be important in an Indonesian study with lower malaria incidence in smaller households (Rooshermatie et al., 2000) but this was not the case here.

*Socio-economic status.* In our study SES was not identified as a predictor by the models. However there is a relationship between housing standard, socioeconomic status and malaria. Generally lower SES and poorer quality housing are related to higher incidences of malaria. For example, in Sri Lanka, poorly constructed houses, and other factors have been shown to increase malaria incidence (Van der Hoek et al., 1998). Similarly in The Gambia, Koram et al., (1995) found that malaria among children was associated with poor housing and low socio-economic status. The general view is that SES is important, with lower SES people being less able to access resources and information that would reduce malaria incidence (e.g., Macintyre et al., 2002). Keating et

al., (2005) in a survey in Kenya with self-reported malaria (as we have here), reported that high SES was associated with malaria prevention (mosquito control) and reduced incidence of malaria. A useful review by Worrall et al., (2003) reported that, at an international level, poorer areas experience higher rates of malaria than richer ones, but that this did not necessarily reflect relationships at local levels.

*Perception:* Dye et al., (2010) found, for their African study, that perceptions of malaria were generally correct, as did Sanjana et al., (2006) for Central Java and also Ndoen (2008) who found in his broader Indonesian study that it did not, as in our analyses, influence malaria incidence. This is consistent with other research in the area (Dale et al., 2005). However some research has found that better knowledge appears to lead to more informed protection measures and lower malaria incidence (e.g., Nkuo Akenji et al., 2005).

## 5 Conclusion

The modelling method has produced simple and relatively easy to interpret results that focus on combinations of variables that contribute to explain malaria incidence. In the results we have unpacked these in order to consider each, but it is important to remember that they work in consort. Despite possible inaccuracy in the data from household survey, the research indicates that, there are consistent explanatory combinations of variables. Although some variables have been shown to affect malaria incidence in individual research projects as reported in the literature, they may not be consistently reliable. This would include the use of bed nets and indoor residual spraying, especially in areas where malaria vector mosquitoes bite during the day and outdoors. Caution should of course be exercised, as areas with malaria will have their own unique features, requiring management solutions tailored to the circumstances, including resources. If we took the consistent predictors from this research we would advocate personal care (repellents, covering clothing) when outdoors and managing mosquito larval habitats by introducing predators to wetlands (breeding place) and possibly using larvicides (if resources permit) in rice fields.

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