MY457/MY557: Causal Inference for Observational and Experimental Studies

Week 1: Causal Frameworks

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Winter Term 2024

Lecture Roadmap

- Potential outcomes
- Causal estimands
- Identification
- Graphical Causal Framework
- 6 Assignment mechanisms
- Summary

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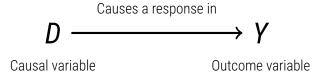
Causal variable

DCausal variable

DCausal variable

Y

Outcome variable



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No causation without manipulation.

Holland, 1986

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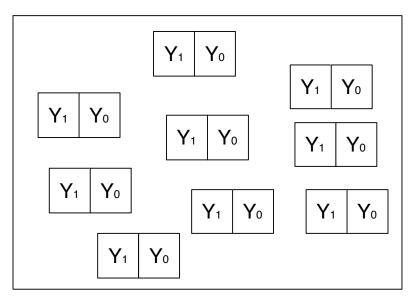
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 - Holocaust → modern AFD election support

Neyman Urn Model



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Definition (Potential Outcome)

 Y_{0i} and Y_{1i} : Potential outcomes for unit i:

$$Y_{1i}$$
 Outcome for unit i when $D_i = 1$
 Y_{0i} Outcome for unit i when $D_i = 0$

(Alternative notation: $Y_i(d)$, Y_i^d , etc.)

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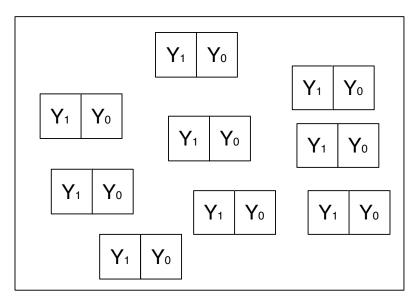
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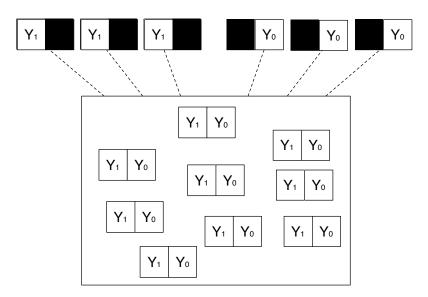
$$\begin{array}{rcl} Y_i &=& D_i \cdot Y_{1i} + (1-D_i) \cdot Y_{0i} \\ \text{i.e.} & Y_i &=& \left\{ \begin{array}{ll} Y_{1i} & \text{if } D_i = 1 \\ Y_{0i} & \text{if } D_i = 0 \end{array} \right. \end{array}$$

- A priori each potential outcome could be observed (manipulability!)
- After treatment assignment, one is observed, the other is counterfactual

Neyman Urn Model



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Introduction

Stable Unit Treatment Value Assumption (SUTVA)

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- No interference between units
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SUTVA comprises two sub-assumptions:

- No interference between units
 - Potential outcomes for a unit not affected by treatment status of other units
 - Violations: spill-over effects, contagion, dilution
- No different versions of treatment (stability, consistency)
 - Nominally identical treatments are in fact identical
 - Violations: variable levels of treatment, technical errors

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$$\begin{split} & Y_{(1,1)1} - Y_{(0,0)1}, \quad Y_{(1,1)1} - Y_{(0,1)1}, \\ & Y_{(1,0)1} - Y_{(0,0)1}, \quad Y_{(1,0)1} - Y_{(0,1)1}, \\ & Y_{(1,1)1} - Y_{(1,0)1}, \quad Y_{(0,1)1} - Y_{(0,0)1}. \end{split}$$

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Without SUTVA, causal inference is exponentially more difficult as $n \uparrow$.

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Imagine a population with 4 units:

i	Di	Yi	Y _{1i}	Y _{0i}
1	1	3	3	0
2	1	1	1	1
3	0	0	1	0
4	0	1	1	1

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- We take the values of both Y_{1i} and Y_{0i} to be real and fixed for all i
- But we can only observe one of them for any i ...
- This is known as the fundamental problem of causal inference (FPCI)

... because of the FPCI we see only this:

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Our goal:

• define causal estimands in terms of potential outcomes (previous table)

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- define causal estimands in terms of potential outcomes (previous table)
- estimate them using observable data on this slide (previous table)
- essentially: fill in the missing counterfactuals as best as possible!

- Potential outcomes
- Causal estimands
- 3 Identification
- Graphical Causal Framework
- Assignment mechanisms
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Estimand:

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Estimate:

→ A specific output of said function.

Unit-Level Causal Estimands

Definition (Individual Treatment Effect)

Causal effect of the treatment on the outcome for unit *i*, defined by the comparison of two potential outcomes:

$$\tau_i = Y_{1i} - Y_{0i}$$

This cannot be observed, and is also very hard to estimate:

- We cannot observe both potential outcomes Y_{1i} and Y_{0i} for the same unit i.
- Hard to reliably fill in the missing potential outcome for any one unit *i*.

Group-Level Causal Estimands

- Consider a fixed group (population) of units i = 1, ..., N
- Values of the potential outcomes for this population can be represented as two vectors:

$$\mathbf{Y}_1 = (Y_{11}, Y_{12}, \dots, Y_{1N})$$

 $\mathbf{Y}_0 = (Y_{01}, Y_{02}, \dots, Y_{0N})$

- A population causal estimand is a comparison of Y_1 and Y_0
- A common choice is a difference of their expected values (means).

Definition (Average treatment effect, ATE)

$$au_{ATE} = \frac{1}{N} \sum_{i=1}^{N} (Y_{1i} - Y_{0i})$$

or equivalently

$$au_{ATE} = \mathbb{E}[Y_{1i} - Y_{0i}]$$

- In the rest of this course, we will consider various assumptions under which τ_{ATE} can be identified from observed information
- Note on notation: We represent the estimand as a greek letter (in this case τ , but could be anything). We typically represent an estimator for that estimand as a greek letter with something on top (e.g. $\tilde{\tau}$ or $\hat{\tau}$). An estimate will be a realised number (interval, etc.).

Definition (Average treatment effect on the treated, ATT)

$$au_{ATT} = rac{1}{N_1} \sum_{i=1}^{N} D_i (Y_{1i} - Y_{0i})$$
 where $N_1 = \sum_{i=1}^{N} D_i$

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$$\tau_{ATT} = \mathbb{E}[Y_{1i} - Y_{0i}|D_i = 1]$$

(Note: The mathematical symbol | means "conditional on".)

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- Exercise: Define τ_{ATII} , ATE on the untreated (control) units, also called the ATU.

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Definition (Conditional average treatment effects, CATE)

$$au_{CATE}(\mathbf{X}) = \mathbb{E}[Y_{1i} - Y_{0i}|X_i = \mathbf{X}]$$

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- This estimand sometimes goes by other names (e.g. local average treatment effect or LATE).
- This is an increasing important area for causal inference (e.g. optimal policy targeting), and we will return to it later!

Let's return to our population of 4 units:

i	Di	Y _i
1	1	3
2	1	1
3	0	0
4	0	1

What is
$$\tau_{ATE} = \mathbb{E}[Y_{1i} - Y_{0i}]$$
?

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Let's return to our population of 4 units:

i	Di	Yi	
1	1	3	
2	1	1	
3	0	0	
4	0	1	
$\mathbb{E}[Y_i \mid D_i = 1]$		2	
$\mathbb{E}[Y_i \mid D_i = 0]$		0.5	
$\mathbb{E}[Y_i \mid D_i = 1] - \mathbb{E}[Y_i \mid D_i = 0]$		1.5	

What is
$$\tau_{ATE} = \mathbb{E}[Y_{1i} - Y_{0i}]$$
?

Naïve estimator:

$$ilde{ au} = \mathbb{E}[Y_i \mid D_i = 1] - \mathbb{E}[Y_i \mid D_i = 0]$$
 (observed difference in means)
= $\frac{3+1}{2} - \frac{0+1}{2} = 1.5$ Could this be wrong?

Let's return to our population of 4 units:

i	Di	Yi	Y _{1i}	Y_{0i}	$ au_{i}$
1	1	3	3	?	?
2	1	1	1	?	?
3	0	0	?	0	?
4	0	1	?	1	?

What is $\tau_{ATE} = \mathbb{E}[Y_{1i} - Y_{0i}]$? We need potential outcomes that we do not observe!

Let's return to our population of 4 units:

i	Di	Yi	Y _{1i}	Y_{0i}	$ au_{i}$
1	1	3	3	0	?
2	1	1	1	1	?
3	0	0	1	0	?
4	0	1	1	1	?

Suppose hypothetically: $Y_{01} = 0$, $Y_{02} = Y_{13} = Y_{14} = 1$.

Let's return to our population of 4 units:

i	Di	Yi	Y _{1i}	<i>Y</i> _{0<i>i</i>}	$ au_{i}$
1	1	3	3	0	3
2	1	1	1	1	0
3	0	0	1	0	1
4	0	1	1	1	0
$\mathbb{E}[Y_{1i}]$			1.5		
$\mathbb{E}[Y_{0i}]$				0.5	
$\mathbb{E}[Y_{1i}-Y_{0i}]$					1

$$au_{ATE} \ = \ \mathbb{E}[Y_{1i} - Y_{0i}] \ = \ \mathbb{E}[\tau_i] \ = \ \frac{3 + 0 + 1 + 0}{4} \ = \ 1.$$

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$$\tau_{ATE} = \mathbb{E}[Y_{1i} - Y_{0i}] = \mathbb{E}[\tau_i] = \frac{3+0+1+0}{4} = 1.$$

Why does $\tau_{ATE} \neq \tilde{\tau}$? When would they be equal?

Introduction

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i	Di	Yi	Y _{1i}	Y_{0i}	$ au_{m{i}}$
1	1	3	3	?	?
2	1	1	1	?	?
3	0	0	?	0	?
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What is
$$\tau_{ATT} = \mathbb{E}[Y_{1i} - Y_{0i} \mid D_i = 1]$$
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2	1	1	1	1	0
3			1		1
$\boxed{\mathbb{E}[Y_{1i} \mid D_i = 1]}$			2		
$\mathbb{E}[Y_{0i} \mid D_i = 1]$				0.5	
$\mathbb{E}[Y_{1i}-Y_{0i}\mid D_i=1]$					1.5

$$\tau_{ATT} = \mathbb{E}[Y_{1i} - Y_{0i} \mid D_i = 1] = \mathbb{E}[\tau_i \mid D_i = 1] = \frac{3+0}{2} = 1.5.$$

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Average Treatment Effect on the Treated

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Because $\mathbb{E}[Y_{1i}] \neq \mathbb{E}[Y_{1i}|D_i=1]$ (and likewise for $\mathbb{E}[Y_{0i}]$)

That is, D_i and Y_{di} are associated

- Note that when we talk about the 'population' in causal inference settings
 we often mean *only* to the N units for whom we have observed data (i.e.
 what we would typically call the 'sample')
- The estimands considered on this course are defined and estimated for this population (not for some super-population from which a sample was drawn)
- Internal validity refers to the validity of our estimates of these effects. This class is focused only on internal validity.

• External validity refers to the validity generalising our estimates of causal effects from the 'population' of **N** units to any other population (note, this could include generalising from a realised sample to a population)

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 - Representative sampling (ideally probability sampling) of the N units from a larger population. This is a population inference task, as in survey research (see MY456).)
 - Some re-weighting strategy designed to adjust the observed sample. Again, this is a population inference task.
 - ullet Substantive theory / assumptions / wishful thinking about why a causal effect for these $m{N}$ units would also apply elsewhere

- Potential outcomes
- Causal estimands
- Identification
- Graphical Causal Framework
- Assignment mechanisms
- Summary

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- Recall that in causal inference, estimands are population causal effects but the FPCI tells us that at least half of the potential outcomes are always missing
- An identification strategy is a combination of data and assumptions which allows us to identify a causal estimand by estimating ("filling in") the missing potential outcomes (usually at a group level)

Consider again the naïve difference of observed means in the treatment groups:

$$\underbrace{E(Y_i|D_i=1)-E(Y_i|D_i=0)}$$

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$$= \underbrace{E(Y_{1i}|D_i = 1) - E(Y_{0i}|D_i = 1)}_{ATT}$$

Consider again the naïve difference of observed means in the treatment groups:

$$\underbrace{E(Y_i|D_i=1)-E(Y_i|D_i=0)}_{\text{Changed difference in purpose}} = E(Y_{1i}|D_i=1)-E(Y_{0i}|D_i=0)$$

$$= \underbrace{E(Y_{1i}|D_i=1) - E(Y_{0i}|D_i=1)}_{\text{ATT}} + \underbrace{E(Y_{0i}|D_i=1) - E(Y_{0i}|D_i=0)}_{\text{Selection bias}}$$

Consider again the naïve difference of observed means in the treatment groups:

$$\underbrace{E(Y_i|D_i=1)-E(Y_i|D_i=0)}_{\text{Observed difference in average outcome measures}} = E(Y_{1i}|D_i=1)-E(Y_{0i}|D_i=0)$$

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- The same observed mean difference could be due to different combinations of the ATT (estimand!) and selection bias terms. We might say the causal effect of *D* on *Y* is confounded.
- Thus ATT is not identified from the naïve observed mean difference: it is not uniquely mapped from the observed data. We need more assumptions.
- Correlation [association, here observed mean difference] is not necessarily causation.

$$E(Y_i|D_i = 1) - E(Y_i|D_i = 0)$$

$$= [E(Y_{1i}|D_i = 1) - E(Y_{0i}|D_i = 1)] + [E(Y_{0i}|D_i = 1) - E(Y_{0i}|D_i = 0)]$$

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• $E(Y_{0i}|D_i=1)-E(Y_{0i}|D_i=0)$ is referred to as selection bias because if it is not 0, it implies treatment and control groups are systematically different in potential outcome Y_{0i} .

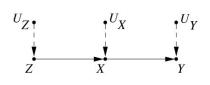
Selection Bias

$$E(Y_i|D_i = 1) - E(Y_i|D_i = 0)$$

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- $E(Y_{0i}|D_i=1)-E(Y_{0i}|D_i=0)$ is referred to as selection bias because if it is not 0, it implies treatment and control groups are systematically different in potential outcome Y_{0i} .
- Canonical example: Job training program
 - participants are self-selected from a population of individuals in difficult labor situations
 - perhaps better resourced or more motivated individuals decide to take part
 - even in the absence of the program, post-training period earnings for those people would then have been higher than those for those who did not opt in $(E[Y_0|D=1]-E[Y_0|D=0]>0)$

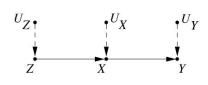
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So far we have reasoned about causal effects using potential outcomes. An alternative (but intimately connected) framework is the graphical approach.

This uses causal diagrams, tools that allow us to:

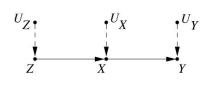


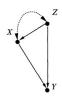


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1. Specify the variables (observed and unobserved) we care about

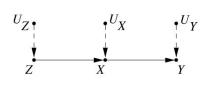


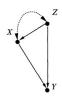


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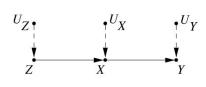
Introduction

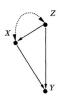
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This uses causal diagrams, tools that allow us to:

- 1. Specify the variables (observed and unobserved) we care about
- 2. Specify how those variables are connected
- 3. See what we can learn about causal effects, and with what assumptions.



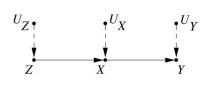


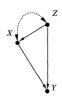
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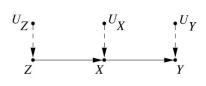
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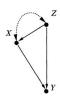
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1. Study how conditioning affects our research designs





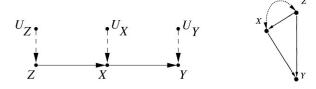
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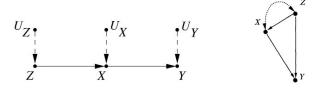
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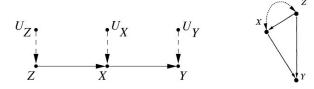
- 1. Study how conditioning affects our research designs
- 2. Create new research designs and methodologies.





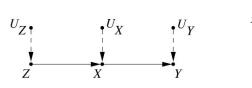
Components of a causal diagram as a Directed Acyclic Graphs (DAG):

Nodes



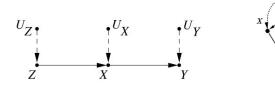
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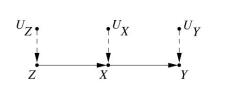




- Nodes: Representing "variables" (also called vertices)
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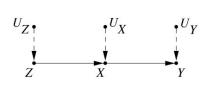


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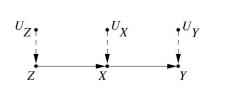


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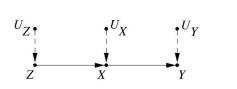
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Features of a DAG:

Acyclic



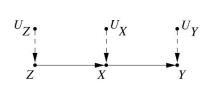


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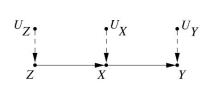


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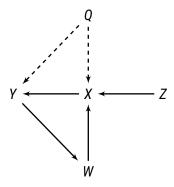


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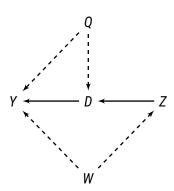
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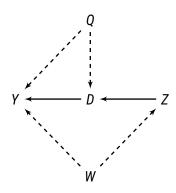
- Acyclic: No directed cycles (e.g. A does not terminate A)
- Non-connections: The absence of relationships between variables



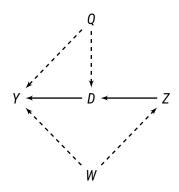


"These aren't the DAGs you're looking for"



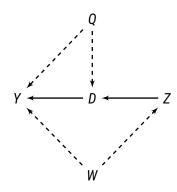


What can we learn from this DAG?



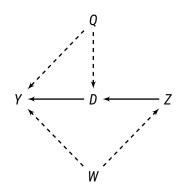
What can we learn from this DAG?

• $Z \rightarrow Y$ is confounded by W



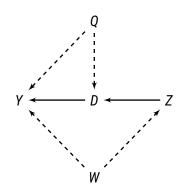
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- ullet $D \rightarrow Y$ is confounded by Q



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- ullet $D \rightarrow Y$ is confounded by Q
- $Z \rightarrow D$ is identified



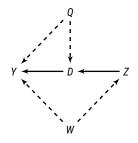
What can we learn from this DAG?

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- ullet $D \rightarrow Y$ is confounded by Q
- ullet $Z \to D$ is identified

But only if our DAG is correct!

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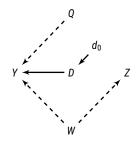
Representing Interventions



Treatments (interventions) are represented by the do() operator.

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Representing Interventions

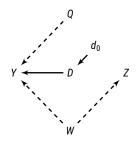


Treatments (interventions) are represented by the do() operator.

For example, $do(d_0)$ holds $D = d_0$ exogenously.

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Identification

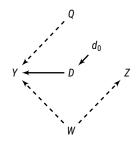


ATE of **D** on **Y** defined as the average difference in **Y** between two interventions:

$$\mathbb{E}[Y\mid do(d_1)]-\mathbb{E}[Y\mid do(d_0)]$$

Problem: Can this be estimated without an explicit intervention (identification)?

Identification



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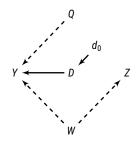
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Identification



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Insight: If the DAG is equivalent with and without do(), yes.

Generally: We can identify the effect of *D* on *Y* if all back-door paths are blocked.

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- Potential outcomes
- Causal estimands
- Identification
- Graphical Causal Framework
- 6 Assignment mechanisms
- Summary

Assignment Mechanism

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- Most causal inference methods achieve identification by restricting the (assumed) assignment mechanism
- For example, if we are willing to assume that treatment assignment is independent of potential outcomes under no treatment, then:

$$E(Y_{0i}|D_i=1)-E(Y_{0i}|D_i=0)=0$$

i.e. selection bias is zero and the observed mean difference is (in expectation) equal to ATT (and also ATE in that case)

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Assuming the above, we can distinguish:

- Experiments: The assignment mechanism is both known and controlled by the researcher, and
- Observational studies: The assignment mechanism is not known to, or not under the control of, the researcher

Our Key Assignment Mechanisms

Randomised Experiments:

- These come in many flavours, only a few of which we will discuss!
 - → Within designs, between designs
 - → Unit-randomized, cluster-randomized, dynamic randomization

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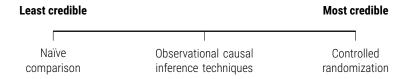
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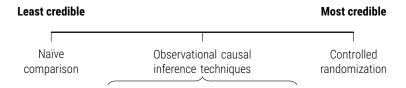
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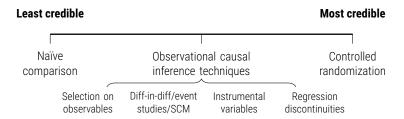
Observational Studies:

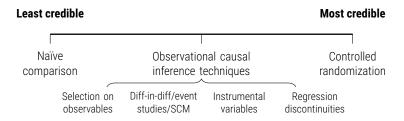
- Adjustment: Selection on observables with regression, matching, etc.
- Temporal: Diff-in-diff, event studies, synthetic control methods
- Instrumental variables, shift-share designs, etc.
- Sharp and fuzzy regression discontinuity designs

Least credible Most credible

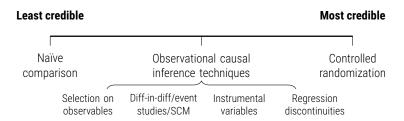








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Key ideas from this week

- Learned to think about causal effects in terms of potential outcomes, not realized (observed) outcomes
- Observed association is neither necessary nor sufficient for causality focused on one big problem, selection bias
- Introduced an alternative framework for thinking about causal models the graphical approach
- Learning about causal effects should start from understanding the assignment mechanism for treatment
- Evaluate the plausibility of your assumptions to understand the credibility of your conclusions