

Regression Discontinuity

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Abstract

1. Regression Discontinuity Designs (RDD)

2 Regression Discontinuity Designs (RDD) are used when the **assignment rule** for treatment is **well known** and based on a **specific continuous variable** called the **running variable**. These 3 designs **exploit discontinuities in policy assignment** that occur at a 4 known cutoff value of the running variable.

5 Examples of running variables (assignment variables):

- 6 Income/score threshold to receive financial aid.
- 7 Percentage of votes to win elections.
- 8 Maximum number of students in a class.
- 9 Time (in minutes) applying for a legal permit.

10 These variables can serve as the dimension along which assignment
11 to treatment changes discontinuously.

12 **Key Assumption:** Units on different sides of the threshold are
13 similar.

- 14 The distribution of units along the running variable must be
15 **smooth** around the cutoff.
- 16 That is, units just below and just above the threshold should be
17 comparable.
- 18 Formally: the conditional expectations $E[Y(0) | X]$ and
19 $E[Y(1) | X]$ must be **continuous** at the cutoff value of X .

20 **Interpretation:** For units close to the cutoff, treatment is effectively
21 randomly assigned due to the institutional setup.

- 22 They are super similar just one happened to be on one side and
23 take up treatment the other happened to be on the other side
- 24 Around the threshold, the assignment mimics a randomized experiment.
- 25 This allows causal identification under mild continuity conditions.

30 Two Main Designs:

- 31 **Sharp RDD:** Assignment follows a deterministic rule.
 - 32 Treatment $T = 1$ if and only if running variable X is above
33 the threshold.
 - 34 The probability of treatment jumps from 0 to 1 at the cut-off.
 - 35 The assignment rule is a step function: $\mathbb{P}(T = 1 | X)$ is
36 discontinuous and deterministic when plotted against the
37 running variable.
 - 38 Example: financial aid given to students with a score
39 above 80.
- 40 **Fuzzy RDD:** Probability of treatment is discontinuous at the
41 threshold.
 - 42 Assignment does not strictly follow a rule: the probability
43 of treatment changes at the cutoff but not deterministically.
 - 44 The rule is **probabilistic**; not all units above the threshold
45 are treated, and some below may still be treated.

- 46 This allows for both treated and untreated units on each
47 side of the cutoff.
- 48 The discontinuity is in *propensity*, not certainty. So the y
49 axis is the probability to get the treatment (proensity score)
- 50 Possible reasons:
 - 51 1. Assignment may depend on many **unobserved variables** and you observe just one.
 - 52 2. You only observe an indicator of eligibility, not compliance. Then risk of **Endogenous assignment**:
53 some units at the threshold may **choose** to comply or
54 not (e.g., eligible but refuse treatment).

55 1.1. Sharp RDD

56 **Treatment Rule** Assume treatment is determined by one covariate,
57 say x_i , according to the rule:

$$D_i = 1[x_i \geq c]$$

58 This is an indicator function equal to 1 if x_i is greater than or equal
59 to the threshold c , and 0 otherwise. In other words, the rule forces
60 units into treatment or control based on whether they are above or
61 below the cutoff.

62 **Observed Variables** We observe:

- 63 The covariate x_i , called the **forcing variable** or **running variable**,
- 64 The treatment assignment D_i ,
- 65 The outcome:
$$Y_i = Y_{0i} + D_i(Y_{1i} - Y_{0i})$$

66 This setup defines a standard potential outcomes model where the
67 observed outcome depends on whether the unit is treated ($D_i = 1$)
68 or not.

69 1.1.1. Potential Outcome Framework

70 Model for Potential Outcome Means

$$E(Y_0 | x) = \mu_0(x), \quad E(Y_1 | x) = \mu_1(x)$$

71 **Conditional Independence Assumption (CIA)** Since D is a deterministic function of x , i.e., $D_i = D_i(x_i)$, the **Conditional Independence Assumption** holds:

$$E(Y_g | x, D) = E(Y_g | x), \quad \text{for } g = 0, 1$$

78 recall up to now we have seen it as $(Y_0, Y_1) \perp D | X$

- 79 This holds because once we condition on x , which fully determines D , there's no remaining variation in D to explain potential outcomes.

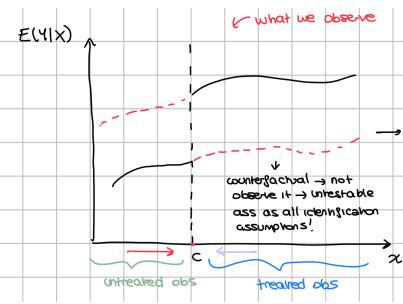
80 **Overlap Assumption Fails** Although CIA holds, the overlap assumption does not:

- 81 There is no value of x for which we observe both treated and untreated units.
- 82 If $x < c$, then we only observe control units.
- 83 If $x \geq c$, then we only observe treated units.

- Formally:

$$p(x) = 0 \text{ if } x < c, \quad p(x) = 1 \text{ if } x \geq c$$

where $p(x)$ is the probability of treatment given x .



*see how the distance between the two lines is constant as the treatemtn effect is constant!

- This lack of overlap makes strategies like regression with controls problematic, as they rely on extrapolation beyond observed data (recall lecture on seleciton on observables).
- Any regression or parametric adjustment would require extrapolating $Y_0(x)$ for treated units or $Y_1(x)$ for control units across the cutoff, which is risky.
- To overcome this, we need strategies to extrapolate y_0 (or y_1) for units above (below) the cutoff

1.1.2. Homogeneous Treatment Effects

Assume the treatment effect is constant across individuals:

$$Y_{1i} - Y_{0i} = \rho \Rightarrow Y_i = Y_{0i} + \rho D_i$$

Then, taking the expectation conditional on x_i :

$$E(Y_i | x_i) = E(Y_{0i} + \rho D_i | x_i) = E(Y_{0i} | x_i) + \rho E(D_i | x_i)$$

$$E(Y_i | x_i) = \mu_0(x_i) + \rho \cdot \mathbf{1}[x_i \geq c]$$

note that the lhs is observed in the data: the distribution of y_i across each covariate!

Key Identification Assumption:

$\mu_0(x_i)$ is continuous at c

recall that $\mu_0(x_i) := E(Y_{0i} | x_i)$.

- this means that limit form above and below of $E(Y | X)$ are the same.
- This ensures that any discontinuity in $E(Y_i | x_i)$ at $x_i = c$ is entirely due to treatment effect ρ .

Define the limits of the conditional expectation of Y_i approaching the threshold c from the left and from the right:

$$m^-(c) = \lim_{\Delta \rightarrow 0} E(Y | c - \Delta < x < c) = \lim_{x_i \uparrow c} \mu_0(x_i) + \rho \cdot \mathbf{1}[x_i \geq c] = \mu_0(c)$$

$$m^+(c) = \lim_{\Delta \rightarrow 0} E(Y | c < x < c + \Delta) = \lim_{x_i \downarrow c} \mu_0(x_i) + \rho \cdot \mathbf{1}[x_i \geq c] = \mu_0(c) + \rho$$

the limits ask: what happens to $E(Y | X)$ as i get as close as possible to the cutoff from the one or the other side?

Then the discontinuity in the outcome at the cutoff is:

$$\rho = m^+(c) - m^-(c)$$

- The ATE at a certain value of x is the vertical distance between the two regression curves at that value of x .
- But, we never observe the two regression curves at the same point, only at the cutoff we "almost" observe both curves.
- Thanks to the continuity assumption for the potential outcomes functions, we can recover the ATE at the threshold. MORE in the estiamtion section.

Conclusion: Under the assumption that $\mu_0(x_i)$ is continuous at c , the homogeneous treatment effect ρ is identified as the jump in the conditional expectation of Y at the threshold. The limit of $E(Y | X)$ from the left and right of c differ only because of ρ . Counterfactual outcomes $E(Y_0 | X \geq c)$ are not observed, making this assumption untestable but necessary for identification.

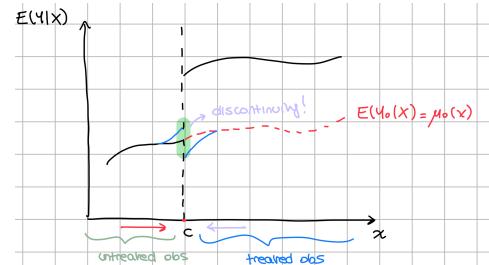


Figure 1. Enter Caption

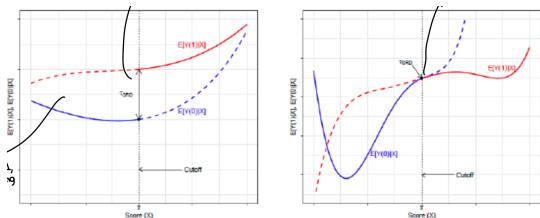
HAVE YOU SEEN ESTIMATORS OF LIMITS? No! So, very difficult in practice to estimate τ !!

1.1.3. interpretation of the Treatment Effect

- Under unrestricted treatment effect heterogeneity, the ATE is not identified.
- **What RDD identifies is a very specific parameter: the treatment effect at $x = c$.**
 - $\rho_c = E[Y_{1i} - Y_{0i} | x_i = c] = \mu_1(c) - \mu_0(c)$
 - This is the ATE for units who are exactly at the cutoff or at the margin of c (marginal idndividuals). SEE THE EQUATIONS ABOVE IN THSI CASE IS NOT ρ is ρ_c of that specific individuals at cutoff c .
 - A very local treatment effect is identified (not LATE, different concept than compliers etc). You could lower the cutoff to get a bit more T units.

- 152 – Not relevant to decide whether to switch on or off the policy entirely. Is relevant to understand whether scaling up
153 or down the policy would be effective.
154

155 SO even if we have heterogeneous treatment effects:



156 Note that now you need both an assumption on the continuity of
157 $\mu_0(x)$ and $\mu_1(x)$. Why? Before, if $\mu_0(x)$ was continuous, then also
158 $\mu_1(x)$ was (as it was simply a sum with a fixed effect). Now it could be
159 that the treatment effect you are observing is not due to the policy but
160 to the fact that people with a running variable higher than a certain
161 level have far higher counterfactual outcomes. BEFORE RED LINE
162 BY CONSTRUCTION WAS CONTINUOUS AS BLUE + rho.

1.1.4. Estimation

Generic issue

163 You want units to be at the cutoff, but the closer to the cutoff the
164 less the observations. The choice of the bandwidth leads to a bias-
165 variance trade-off: A) the smaller the sample the more comparable,
166 so the less bias and the more you are closer to the theoretical pa-
167 rameter you want to estimate, but B) low observations lead to high
168 variance and low efficiency due to low observations.
169

Sharp RDD. Option 1: Global regression using polynomials (not much used anymore)

- 173 reduce variance by using all the observations, limit bias by
174 adding a flexible way to specify the conditional expectation
175 function
- Use the full sample observations, even those away from the cut-
off, and run a regression of Y_i on a constant, D_i , $(x_i - c)$, $D_i(x_i - c)$.
If the relationship between the x and the outcome y is easy and
trivial and you can easily approximate it with your functional
form, you are fine because you can then spot the discontinuity in y driven by treatment. We use the two strange terms to
model the eventual change in slope in the relationship between
the running variable and the outcome before and after treatment
(I mean it could happen that the structural relationship between
the running variable and y changes after a certain level
of the running variable).

$$Y_i = \alpha + \rho D_i + \beta(x_i - c) + \gamma D_i(x_i - c) + \varepsilon_i$$

176 At the cutoff $x_i = c$:

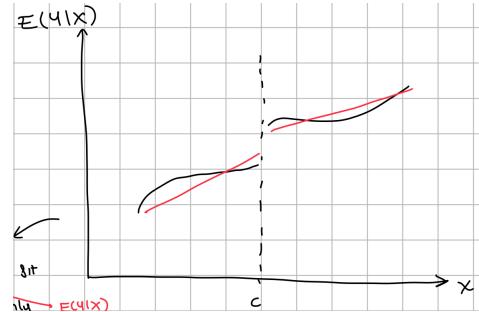
$$\begin{aligned} \text{If } D_i = 0 : \quad Y_i &= \alpha \Rightarrow \mathbb{E}(Y_i | D_i = 0, x_i = c) = \alpha \\ \text{If } D_i = 1 : \quad Y_i &= \alpha + \rho \Rightarrow \mathbb{E}(Y_i | D_i = 1, x_i = c) = \alpha + \rho \end{aligned}$$

- 177 We can add a high-order polynomial on $(x_i - c)$ use its squares,
cubes etc.
- The flexibility of a polynomial is important because RDD is sen-
sitive to the functional form of x .

Problems with this method:

- 182 concepwtually bad: it aims at a global optimization but we care
at not making errors at cutoff.
- The optimization is global, but we care about errors at the
boundaries.

- 186 It can give large weight to points far from the cutoff (if the func-
187 tional form is wrong you use observations far away + not well
188 approximated)
- Estimates are sensitive to the degree of the polynomial.
- if you use this approach you need to show the RD estimates are
robust to different orders of the polynomials used to approximate
 $E(Y | x)$



Sharp RDD. Option 2: Local linear regression

- 193 • Idea: we care about the outcomes for the units close to the
cutoff.
- Restrict the sample using a bandwidth h such that $c - h < x_i < c + h$.
- Run the same regression, now locally (Athey and Imbens,
2017).
- Can add polynomials to the local regressions, but not necessary.
- Or run two separate regressions:

- Y_i on a constant and $(x_i - c)$ for $x_i < c$;
- Y_i on a constant and $(x_i - c)$ for $x_i \geq c$.

- Estimate for ρ_c is the difference between the intercepts (think
that the intercept is the expected value when the $x_i - c = 0$).
- Can add other regressors X_i : regress Y_i on a constant, D_i , $(x_i - c)$,
 $D_i(x_i - c)$, and X_i .

Problems with this method:

- Small bandwidth \rightarrow low bias but high variance.
- Large sample size needed near cutoff.
- Must experiment with different h to check robustness.

Two ways of choosing the bandwidth h

1. Optimal Bandwidth (Kalyanaraman 2012; Calonico et al. 2014a)

- Optimal choice depends on:
 - Second derivative of regression function at $x = c$ (very large curvature means you will make a lot of error through your linear model, so better use smaller bandwidth),
 - Conditional variances (if outcome variable has a lot of variance you want more observations to estimate the effects),
 - Kernel used in nonparametric regression (the weights you use affect the bandwidth choice).

2. Cross-validation (Imbens and Lemieux, 2008)

- Run $N - 1$ regressions leaving out one observation and pre-
dict its outcome.
- Choose h that minimizes squared difference between ac-
tual and predicted outcomes.

3. Calonico et al. (2014b, 2017): Choose h as the largest window such that pre-treatment differences are not significant between treated and control groups.

233 Notes on functional form and bias

- In global approach, risk of misspecification and large bias at boundaries.
- In local linear model:

237 1.2. Fuzzy RDD

238 Assignment to treatment is not deterministic.

- Imperfect compliance to treatment assignment rule.
- The probability of treatment changes discontinuously at $x = c$, but it does not change from 0 to 1.
- Propensity Score: $P(D = 1 | x)$ is the probability of being treated.
- **Assumption 1:** We assume **continuity** at c for both $\mu_0(x_i)$ and $\mu_1(x_i)$ (allow heterogeneous TE).
- **Assumption 2:** We also need $P(D = 1 | x)$ **discontinuous** at c .
- We are going to use this jump in the probability of being treated as an Instrumental Variable for Treatment.

TE repeating the discussion above on the limits

$$\rho(c) = \frac{m^+(c) - m^-(c)}{P^+(D = 1 | x = c) - P^-(D = 1 | x = c)}$$

250 This proves identification of $\rho(c)$.

251 This result has an instrumental variables (IV) flavor:

- Use a variable indicating whether the observation is on the right-hand side (RHS) of the cutoff as an instrument for treatment assignment.
- **First stage:** how much does being on the RHS of the cutoff affect the probability of receiving treatment (denominator).
- **Reduced form:** contrast in mean outcomes between observations just to the right and just to the left of the cutoff.

259 1.3. Estimation

260 We can estimate the four terms in the ratio by local linear regression.

261 We need four regressions:

1. Regress Y_i on a constant and $(x_i - c)$ for $c < x_i < c + h$.
 - The intercept estimates $m^+(c)$.
2. Regress Y_i on a constant and $(x_i - c)$ for $c - h < x_i < c$.
 - The intercept estimates $m^-(c)$.
3. Regress D_i on a constant and $(x_i - c)$ for $c < x_i < c + h$.
 - The intercept estimates $P^+(D = 1 | x = c)$.
4. Regress D_i on a constant and $(x_i - c)$ for $c - h < x_i < c$.
 - The intercept estimates $P^-(D = 1 | x = c)$.

270 Here we can choose a bandwidth h once, or choose two separate
271 bandwidths (for numerator and denominator).

272 IV interpretation

Fuzzy RDD Estimation as IV: The fuzzy RDD estimator from the previous slide is equivalent to an IV estimator. Hahn, Todd, and Van der Klaauw (2001) show that we can estimate ρ_c as the coefficient on D_i in the following IV regression:

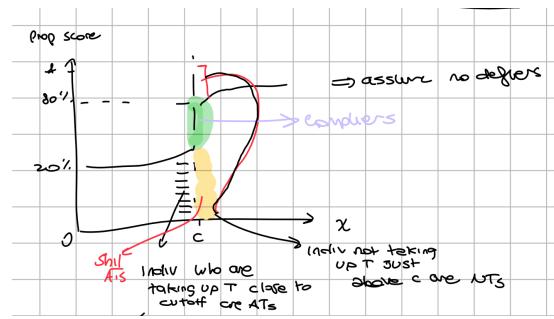
$$Y_i = \alpha + \rho_c D_i + \beta(x_i - c) + \delta D_i(x_i - c) + \varepsilon_i$$

- IVs: use $z_i = \mathbf{1}[x_i \geq c]$ and $z_i \cdot (x_i - c)$ and a Restricted sample with $x_i \in (c - h, c + h)$.
- Use standard IV estimation to recover the LATE at $x = c$. This is the treatment effect for **compliers at c** , i.e., those whose treatment status changes as x_i crosses c .

First Stage Equation:

$$D_i = \alpha + \beta \mathbf{1}(x_i \geq c) + \gamma(x_i - c) + \delta \mathbf{1}(x_i \geq c)(x_i - c) + \varepsilon$$

- $\beta \neq 0$ implies a jump in the probability of treatment at the cutoff (relevance assumption).
- **Randomness/Exogeneity:** $Z \perp Y_0, Y_1$ in this context means $\mathbf{1}(x_i \geq c) \perp Y$ this holds by controlling for $x - c$ in both the first stage and the structural equation



* Defiers would lead to a negative shift in the curve

similarly as before we identify the ATs when $Z = 0$, but we focus around the cutoff.

Estimator Consistency:

- The estimator is consistent for the treatment effect of compliers at $x = c$, **provided** we assume monotonicity (i.e., no defiers).
- monotonicity assumption: If $D_i(k)$ is a function of the cutoff k , we require $D_i(\cdot)$ to be non-decreasing at $k = c$.

Reinterpreting IV Assumptions in Fuzzy RDD:

- **Relevance:** discontinuous jump in the propensity score at the cutoff.
- **Exclusion restriction:** $z_i = \mathbf{1}[x_i \geq c]$ affects Y_i only via D_i . the channel is just that. Note that in the identification section we defined the outcome y_i as just a function $y_i(x, D)$ but not a function of $1(x > c)$ (exclusion restriction is implied).
- **Exogeneity:** z_i behaves like random assignment near c . the assignment is random. note you could have settings where the assignment is random but the channel is multiple (recall crime exam...).
- **Monotonicity:** ensures identification of compliers.

Identification:

- The denominator of the IV estimator identifies the **proportion of compliers at c** .

RDD as Quasi-Experiment (Lee and Lemieux, 2010):

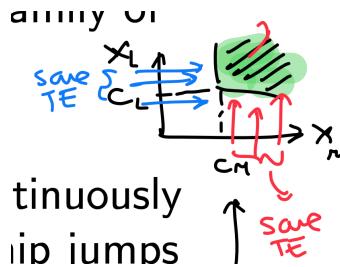
- RDD fails if individuals can precisely manipulate x .
- But, if individuals -even when having some influence- cannot exactly manipulate the assignment variable, the variation in treatment near the threshold is as good as random (bc it still remains continuous please think about it with calm). And we have that even individual will have the same probability of having an x that is just above or below the threshold (to be just above or below the threshold)
- This allows RDD to approximate a randomized experiment. We can test for mean differences in baseline characteristics below and above the threshold.
- Fuzzy RDD is analogous to an experiment with imperfect compliance only ITT is randomized, so we must instrument for treatment.

321 **Extensions**322 • **Multiple Cutoffs:**

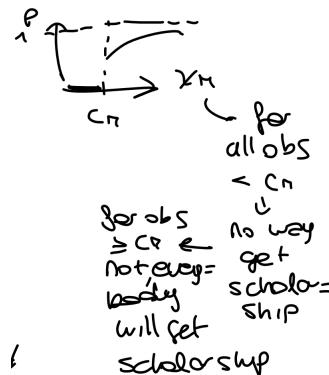
- example: in one district a party l has 40% of the votes and wins because party k has 38% in another district party l has 20% ad wins because party k has 14%.
- Pool observations with different cutoffs using a normalized score.
- Estimation still valid but parameter represents a weighted average of local effects (eg margin of winning election in different districts with more than 2 parties).

321 • **Multiple Scores: 54'**

- If treatment depends on exceeding thresholds in multiple tests (e.g. Math and Language), run RD for each score.



- This yields a family of RD treatment effects.
- if you observe both the grades you have a sharp deterministic rule. if you observe just one you have a one side fuzzy RDD.

338 • **Regression Kink Design (RKD):**

- Treatment depends continuously on x , but slope of $D(x)$ changes at cutoff. Equivalent to an RDD on first derivative.
- RKD estimates treatment effects at the *derivative* level:

$$D = \mathbf{1}(x_{\text{math}} \geq c_M \text{ and } x_{\text{lang}} \geq c_L)$$

- Observing only one score implies sharp design (deterministic rule).
- Suppose the scholarship amount D_i is continuous, but varies with income:
 - * Below 30k: you get 5,000 minus 100 per 1,000 income (linear decrease).
 - * Above 30k: the decrease becomes steeper, say 300 per 1,000.

350 Then:

- * D_i is continuous at 30k.
- * But the slope $\frac{dD}{dx}$ jumps at $x = 30$.

353 This is a Regression Kink Design (RKD): *treatment doesn't jump, but its slope changes → kink in the policy rule*. The

355 slope becomes steeper (red line), or even negative: this suggests that additional increases in x are now more associated with increases in treatment probability or possibly decrease it. The slope becomes flatter (blue line), or even negative: this suggests that additional increases in x are now less associated with increases in treatment probability or possibly decrease it.

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362 2. Sumamry

363 ■ Sharp Regression Discontinuity Design (RDD)

- 364 1) Requires SUTVA (Stable Unit Treatment Value Assumption).
 2) **Discontinuity assumption:** The probability of treatment jumps at the threshold:

$$P(D = 1 | x) \text{ is discontinuous at } c.$$

365 *discrete and full compliance, discuss at lenght In practice,
 TEST 1: Check Discontinuity in treatment at threshold

- 366 3a) **Continuity assumption:** Units just above and below the cut-
 368 off are similar (all below are equiv).

369 3a1) $\mu_0(x_i)$ is continuous at c . In practice, TEST 2: Check No
 370 jump in density of the forcing variable at the threshold
 (McCrary density test; Null hypothesis: the density of
 371 x is continuous at the cutoff (no manipulation). If we
 372 fail to reject the null, there is no statistical evidence for
 373 manipulation, which supports the validity of the RDD)
 In practice, TEST 3: Check No Discontinuities in baseline
 374 covariates at the threshold
 375

- 377 3b) **Conditional Independence Assumption (CIA/ Uncon-**
foundedness):

$$E(Y_g | x, D) = E(Y_g | x), \quad \text{for } g = 0, 1$$

378 * *we are assuming homogeneous TE, CIA guarantees continuity
 379 at a point and is flat, the other thing guarantees continuity on
 380 the full space.

- 381 3a and 3b are connected to randomness (local randomization ap-
 382 proach).

383 Test both 3a and 3b No manipulation of the running variable near c
 (with manipulation both explode)

384 Under these assumptions, the setup identifies the **ATE** effect, This is
 385 not estimating an ITT but directly the ATE you have no intermediate
 386 step (take-up), is conceptually different (effect is direct)

388 ■ Fuzzy Regression Discontinuity Design (RDD)

- 389 1) Requires SUTVA.
 3) **Continuity assumption:** Both potential outcome functions
 are continuous at the cutoff (bc we are directly allowing for het-
 erogeneous TE):

$$\mu_0(x_i) \text{ and } \mu_1(x_i) \text{ are continuous at } c.$$

- 390 3b **Conditional Independence Assumption (CIA / Uncon-**
foundedness): Eq

392 \Rightarrow Under these assumptions, the setup identifies the **Intent-to-**
Treat (ITT) effect, as in the IV chapter (actuaoly you do not
 393 need 2) for ITT you don't care about the channel being $Z =$ the
 394 first stage).

- 395 2) **Discontinuity assumption: (p to be treated)**

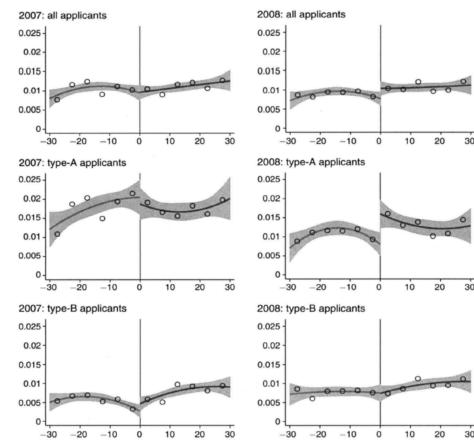
$$P(D = 1 | x) \text{ is discontinuous at } c$$

- 396 2a) This is equivalent to the **first stage** (relevance) condition
 397 in IV frameworks.

- 398 4) **Exclusion restriction:** The running variable Z affects the out-
 399 come Y only through the treatment D .

- 400 5) **Monotonicity:** No defiers; the direction of treatment assign-
 401 ment is the same for all units at the threshold.

402 In practice, TEST 4: Placebo check, no discontinuities in the out-
 403 come at other placebo cut-offs.



*Common trends are equivalent to the randomness of the instrument.

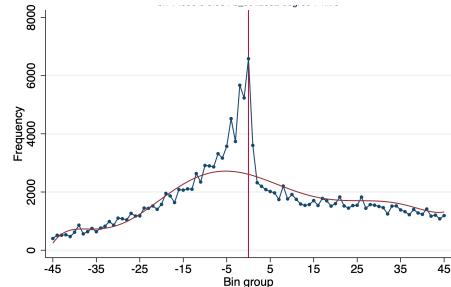
General point: failure overlap assumption.

404 ■ Appendix

408 About the tests: Great if you have repeated cross section! you can
 409 show the discontinuity is there only in the yr of the policy! (Pinotti
 410 AER, knocking at heaven's door)

411 3. Bunching Estimator

412 The **bunching estimator** identifies behavioral responses (e.g., in-
 413 come elasticity) to non-linear policy rules by detecting excess mass
 414 in the density of outcomes near *kink points*, where incentives change
 415 discretely (e.g., marginal tax rate jumps). We have a cutoff and we
 416 have huge manipulation, we cannot do an RDD, but this is perfect
 417 for a bouncing!



418 Agents choose income z under a piecewise-linear budget con-
 419 straint. At kink z^* (e.g., where tax rate rises from t_0 to t_1), utility-
 420 maximizing individuals may concentrate ('bunch') to avoid higher
 421 marginal tax rates. Let:

- $f(z)$: observed income density,
- $h(z)$: counterfactual smooth density (no kink),
- z^* : kink location.

422 The key identifying assumption is that $h(z)$ is smooth near z^* ; de-
 423 viations of $f(z)$ from $h(z)$ capture behavioral responses.

427 Estimation Strategy

- 428 1. Fit $\hat{h}(z)$ (e.g., polynomial) to $f(z)$ in a bandwidth $[z^* - \Delta, z^* + \Delta]$,
 429 omitting a small neighborhood $[z^* - \delta, z^* + \delta]$.
 2. Compute excess mass:

$$\hat{B} = \sum_{z \in [z^* - \delta, z^* + \delta]} (f(z) - \hat{h}(z))$$

430 **Caveats**

- 431 • Requires no confounding structural breaks at z^* .
432 • Sensitive to bandwidth choice, functional form of $h(z)$.