

MBA 753 : Causal Inference Methods for Business Analytics

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Agenda

- Housekeeping
- DID - Issues
- Regression Discontinuity Design

Announcement

- Final Exam: 15th September, Sunday, 13:00-15:00
- Project Presentation: 14th September, Saturday, 10:30-12:30 – C5
 - 6 teams
- Pop quiz in every class

DID

DID Issues

- Standard Errors in DID
 - Practical applications of DID strategies use data from many years: not just 1 pre and 1 post period
 - The variables of interest only vary at a group level and outcome variables are often serially correlated
- Solution:
 - Clustering standard errors at the group level and time-level
 - Bootstrapped SE

DID Issues

- Threats to validity
 - Non-parallel trends
 - Ashenfelter dip: earnings often fall just prior to entering a training program, which complicates measurement of treatment effect
 - Other simultaneous treatment/intervention
 - Functional form dependence
 - Assumption: DID regression equation is linear
 - Matching DID
 - Multiple treatment times
 - Treatment occurs at different times for treated
- Robustness check for DID design: Falsification test using placebo outcome

Regression Discontinuity Design

Regression Discontinuity Design

- A precise rule, based on a continuous characteristic determines participation in intervention/program
- Examples:
 - Academic test scores: scholarships or prizes, higher education admission, certificates of merit
 - Poverty scores: (proxy-)means-tested anti-poverty programs
 - Date: age cutoffs for pensions; dates of birth for starting school with different cohorts

RDD Treatment Assignment

- A continuous variable X that determines who gets treatment - running var., assignment var., or forcing var.
- We should know the cut-off or threshold c for X
- Assumption: there is no manipulation at the threshold
- Treatment variable: D_i

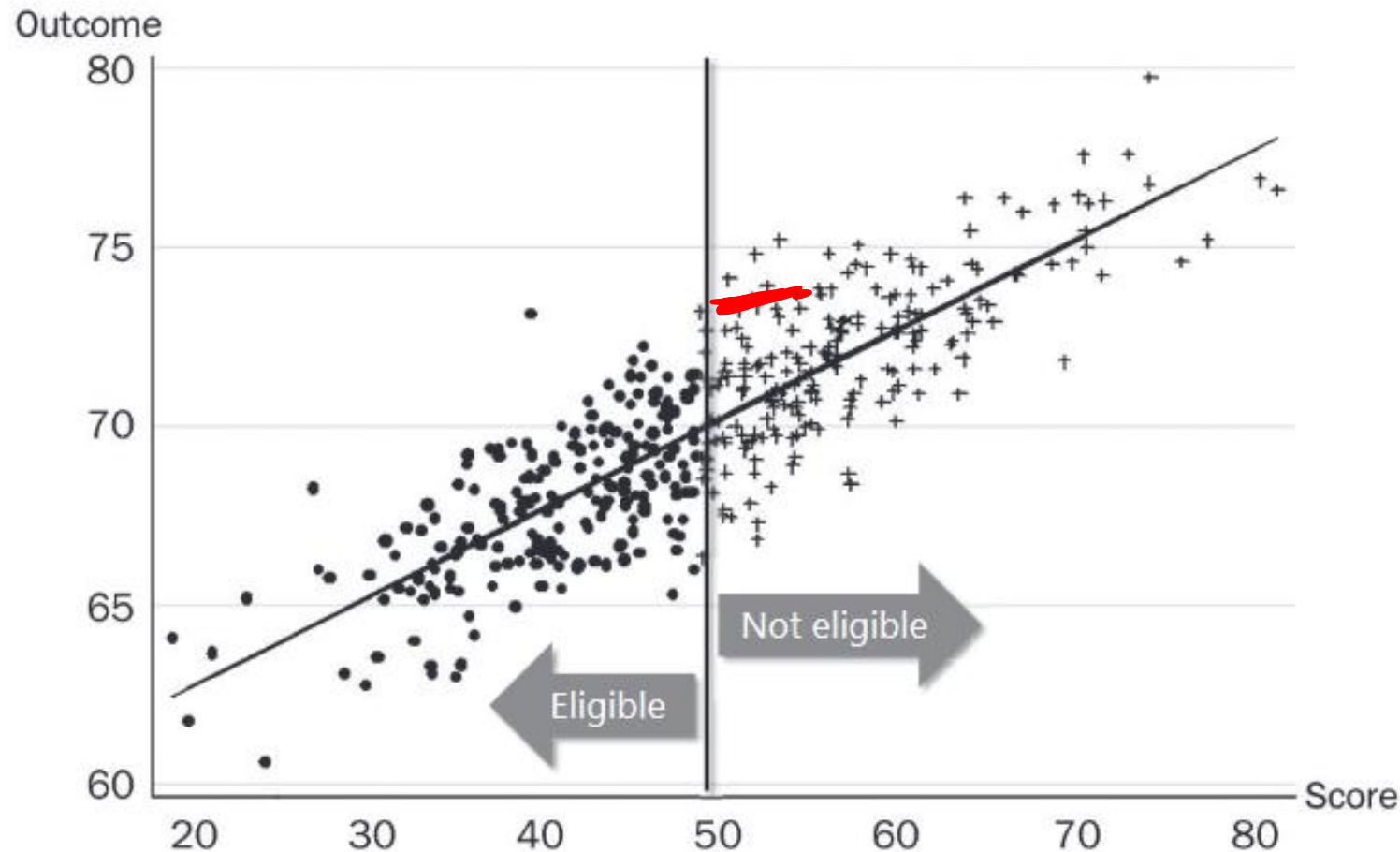
$$D_i = \begin{cases} 1 & \text{if } X_i \geq c \\ 0 & \text{if } X_i < c \end{cases}$$

RDD Treatment Assignment Type

- In general, depending on enforcement of treatment assignment, RDD can be categorized into two types:
 - **Sharp RDD**: nobody below the cutoff gets the “treatment”, everybody above the cutoff gets it (or vice versa)
 - Everyone follows treatment assignment rule (all are compliers).
 - Local randomized experiment with perfect compliance around cutoff.
 - **Fuzzy RDD**: the probability of getting the treatment jumps discontinuously at the cutoff (NOT jump from 0 to 1)
 - Not everyone follows treatment assignment rule.
 - Local randomized experiment with partial compliance around cutoff.
 - Using initial assignment as an instrument for actual treatment

$$X_i - C = Z_i \quad Z_i = 0$$

RDD – Treatment Assignment Example



$$\beta_2 = 0.3$$

$$X \rightarrow Y$$

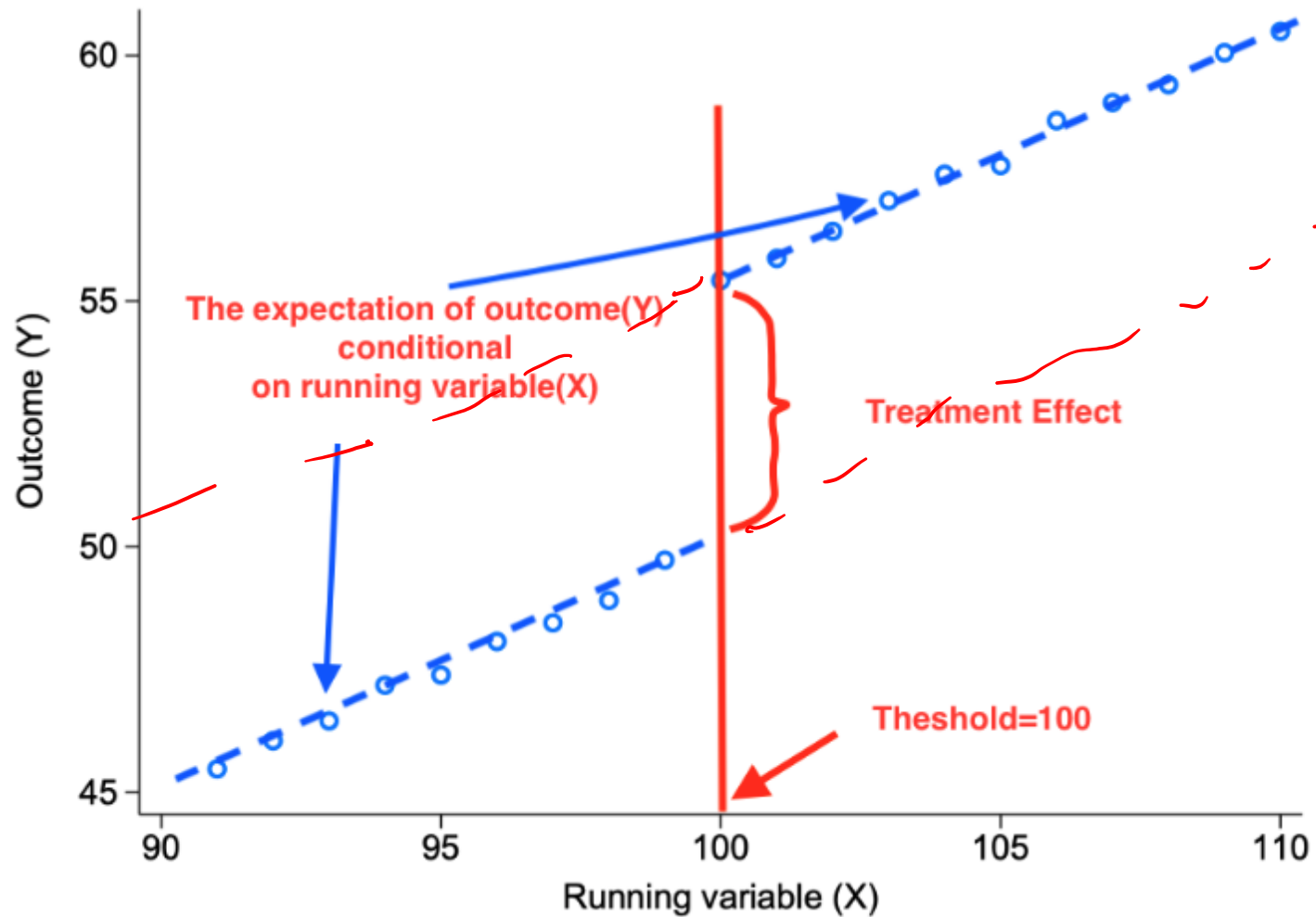
$$Y = \beta_0 + 0.3X$$

$$Y = \beta_0 + 0.3(X - C)$$


$$Y = \beta_0 + 0.3Z_i$$

Source: Gertler, P. J.; Martinez, S., Premand, P., Rawlings, L. B. and Christel M. J. Vermeersch, 2010, Impact Evaluation in Practice: Ancillary Material, The World Bank, Washington DC (www.worldbank.org/ieinpractice)

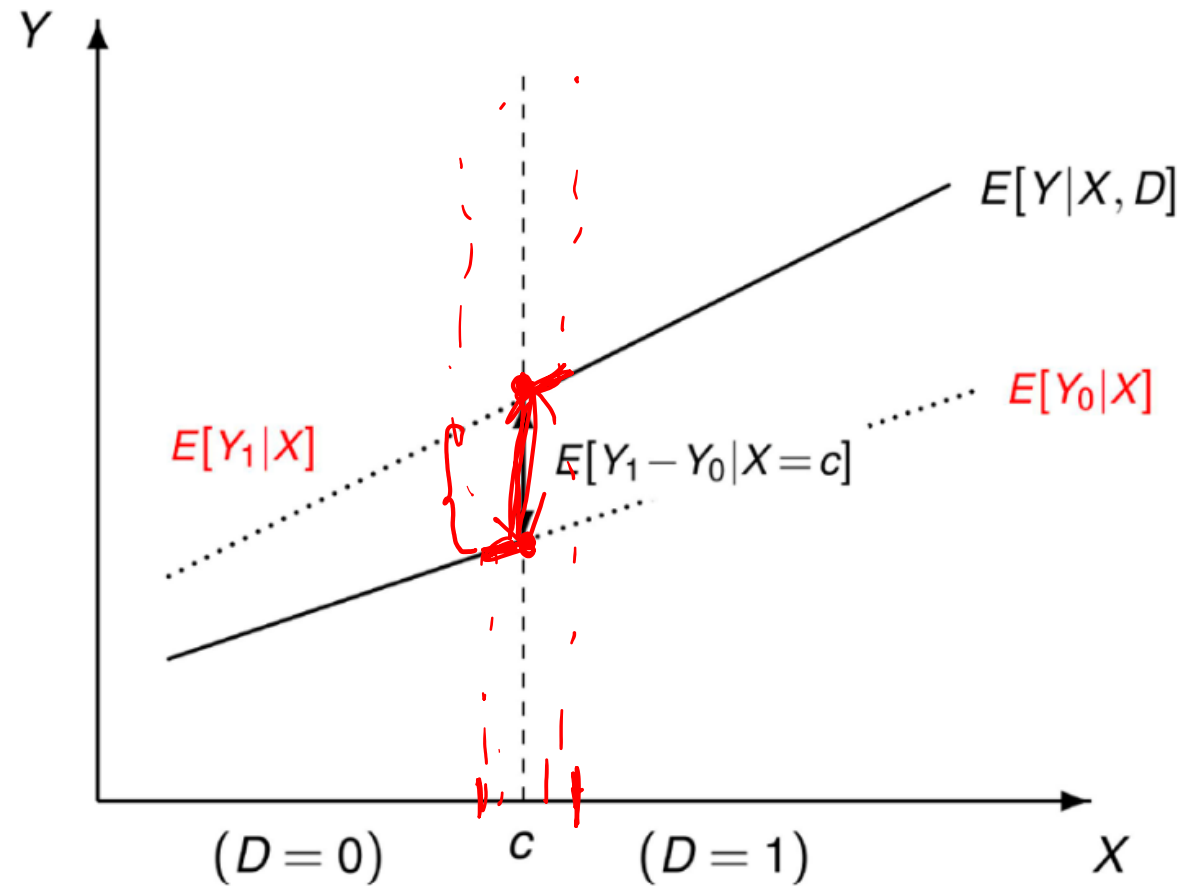
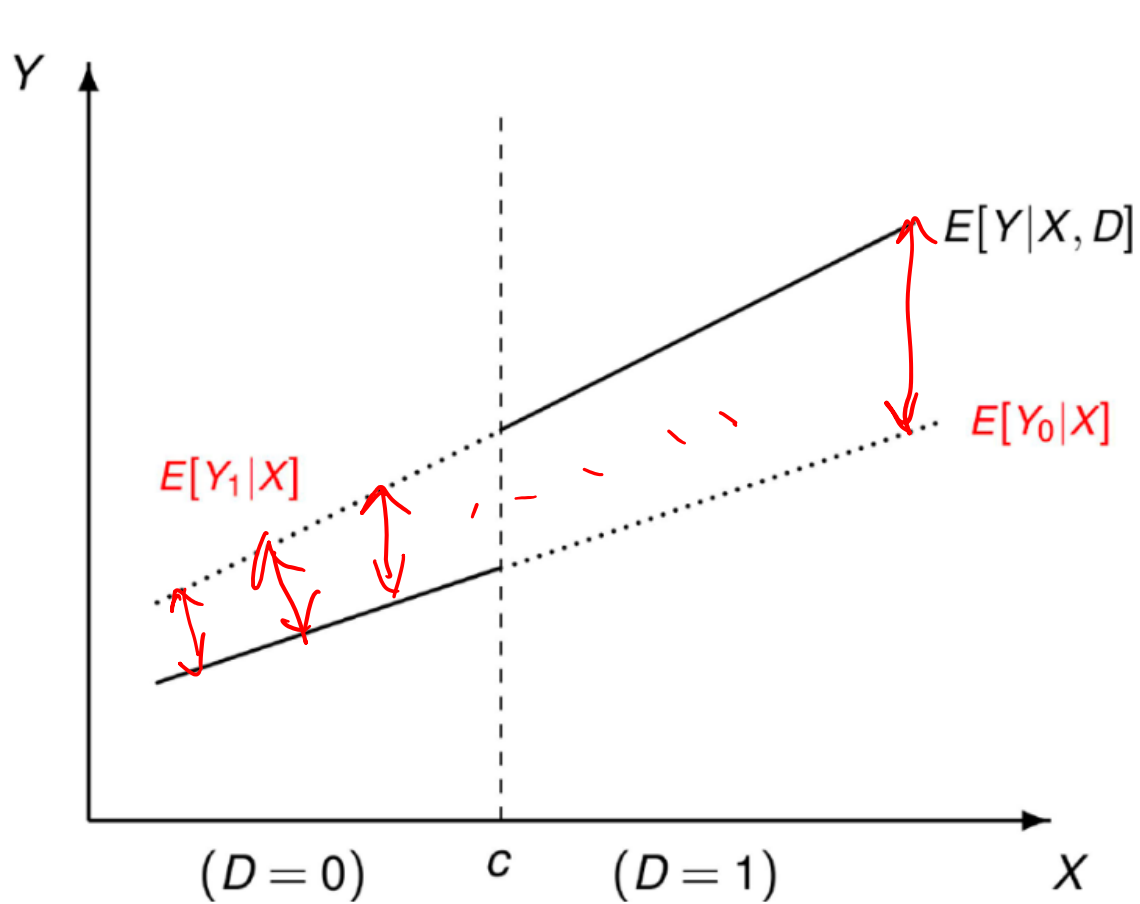
RDD – Basic Idea



RDD Assumptions

- Deterministic assumption: Treatment assignment is a deterministic function of the assignment variable X and the threshold c
- Continuity assumption: $E(Y_{1i}|X_i)$ and $E(Y_{0i}|X_i)$ are continuous at $X_i = c$
 - Potential outcomes do not change at cutoff
 - All other unobserved determinants of Y_i are continuous at cutoff c
 - No other confounding factor affects outcomes at cutoff c 
 - Any observed discontinuity in the outcome can be attributed to treatment assignment

Assumptions



LATE – Local ATE

Identification Result

The treatment effect at the threshold c is identified by:

$$\begin{aligned}\tau_{\text{LATE}} &= E[Y_{1i} - Y_{0i} | X = c] \\ &= E[Y_{1i} | X = c] - E[Y_{0i} | X = c]\end{aligned}$$

But we can't observe both of these! However, **if the potential outcomes are continuous around c** , then we can estimate these values through the limits of the observed outcomes from above and below c :

$$\hat{\tau}_{\text{LATE}} = \lim_{X \downarrow c} E[Y_i | X = c, D_i = 1] - \lim_{X \uparrow c} E[Y_i | X = c, D_i = 0]$$

RDD Regressions

$$D_i = \begin{cases} 1 & \text{if } X_i > c \\ 0 & \text{if } X_i \leq c \end{cases}$$

$$D = \begin{cases} X & \text{if } X > 100 \\ X-100 & \text{if } X \leq 100 \end{cases}$$

-ve
-ve
0
+ve
+ve
/

X_i Threshold

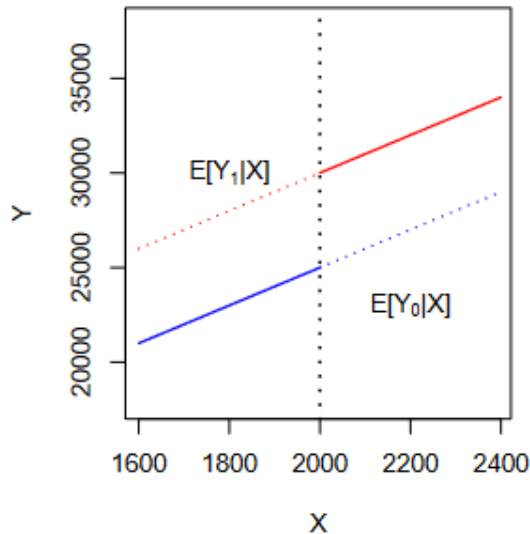
$$Y_i = \beta_0 + \beta_1 D_i + \beta_2 (X_i - c) + \beta_3 D_i (X_i - c) + \epsilon_i$$

D_i is the treatment variable; X_i is the running variable; c is the threshold

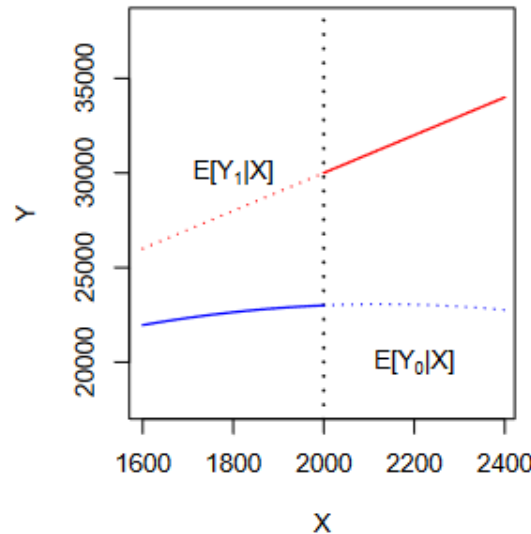
Predictor

$$\beta_2 = 0.3$$

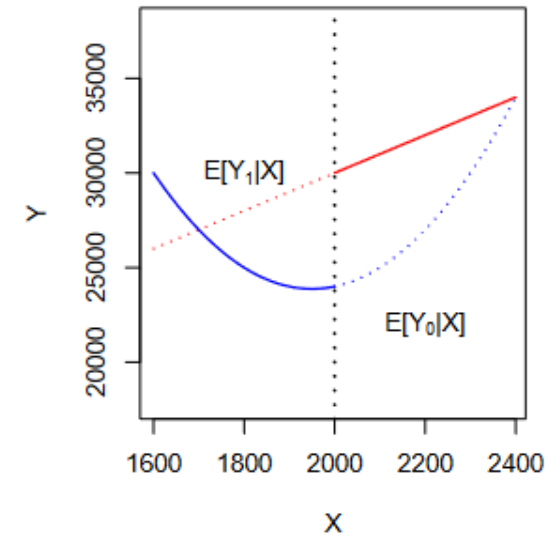
No heterogeneity



Moderate heterogeneity

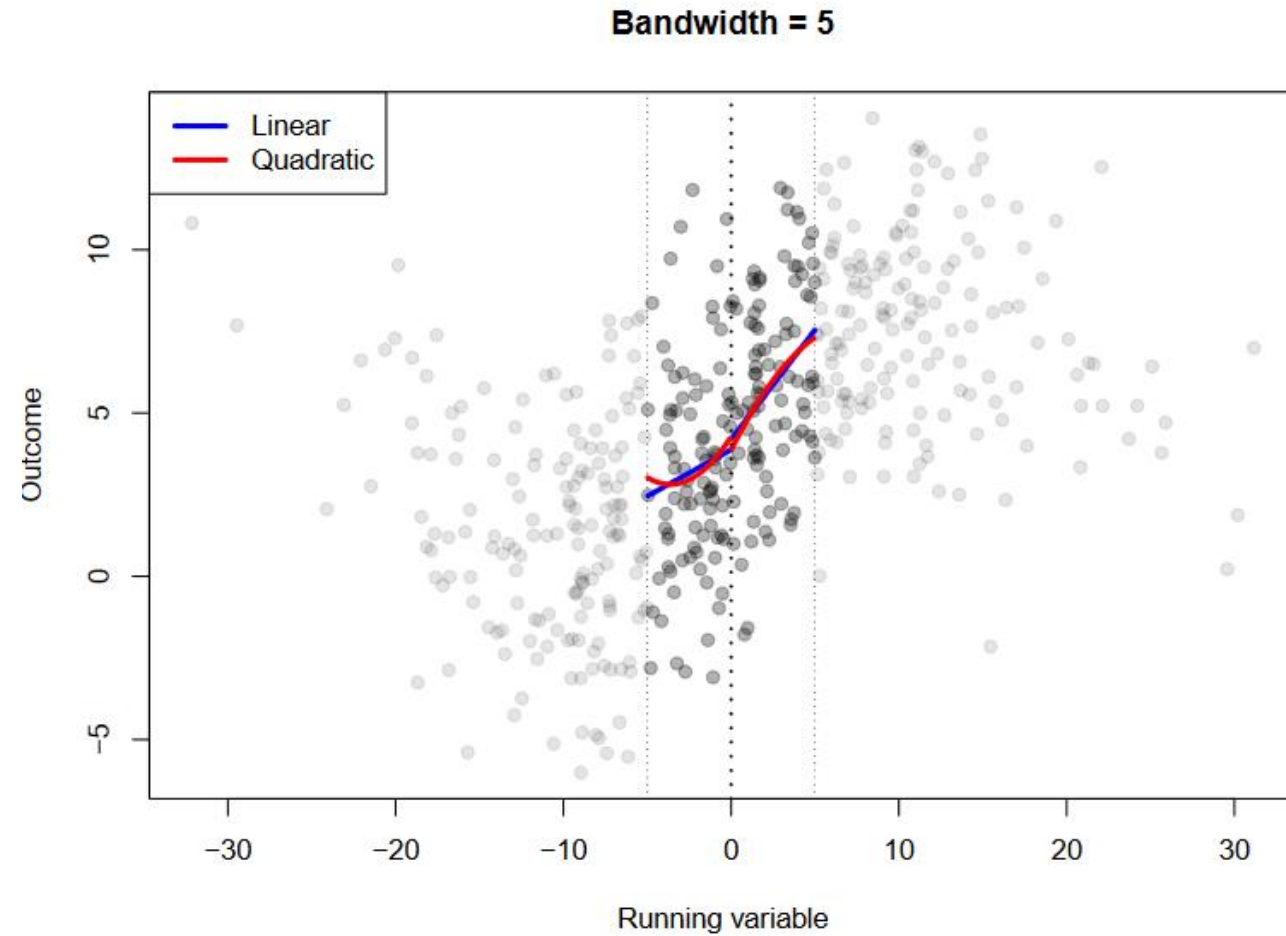


Severe heterogeneity



Bandwidth Method

- Idea: Subjects barely to either side of the cutoff are basically the same other than for the cutoff
 - any differences between them are really the fault of treatment
$$c - h \leq X_i \leq c + h$$
 - h directly affects the properties of the estimation process and empirical findings can be sensitive to the particular value that one chooses for h



Implications of Bandwidth

- Comparing average outcomes in a small neighbourhood to the right and left of the cutoff leads to
 - Estimates of LATE that are less dependent on the functional form specification
 - Decreases the bias that comes from misspecification
 - Leads to a smaller sample size, thus increasing the variance

Bandwidth Approach

- “Optimal” bandwidth selection
 - Use algorithmic bandwidth selection methods
 - Most common → Imbens-Kalyanaraman procedure
 - Choose h to balance bias-variance tradeoff
 - h is chosen to minimise the expected mean-square error of the RD estimator
- Reporting results from multiple bandwidths
 - In practice, it is common to show that how much (if at all) the estimate of $\hat{\tau}_{LATE}$ changes as we vary the bandwidth

Example

- Effect of alcohol consumption on mortality rates - Carpenter and Dobkin (2009)
- Selection in two groups based on their age: young adults who are below the age of 21 are not legally allowed to drink while young adults above the age of 21 are allowed to drink
- Research question: Does alcohol consumption increase mortality rate?

Variable	Description
agecell	Age of individual (the study focuses on adults between 19-22 year)
all	Overall mortality rate
alcohol	Mortality rate for alcohol-related causes
homicide	Mortality rate for homicides
suicide	Mortality rate for suicide
mva	Mortality rate for car accidents
drugs	Mortality rate for drug-related causes (alcohol excluded)
externalother	Mortality rate for other external causes

Recap

Summary

- Use robustness checks for DID
- RDD
 - Setup: continuous running variable, threshold c , and sharp design
 - Can take any functional form
 - LATE can be ATE if the treatment effect is homogenous
- Objectives achieved:
 - Can understand the advantages and design of Regression Discontinuity
 - Can interpret the regression coefficients of RDD

References

- Scott Cunningham, Causal Inference: The Mix Tape, Yale University Press.
- Cook, T. D., & Campbell, D. T. (2007). *Experimental and quasi-experimental designs for generalized causal inference*.
- Angrist, J. D., & Pischke, J. S. (2009). *Mostly harmless econometrics: An empiricist's companion*. Princeton university press.
- Pearl, J., Glymour, M., & Jewell, N. P. (2016). *Causal inference in statistics: A primer*. John Wiley & Sons.

Thank You 😊

Nature: Look at all the symmetric and smoothness I've built

Mankind:



Source: Matheus Facure Alves