# Statistics and Data science

Theory: Causality and RCT

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### Overview

- 1. Why causality?
- 2. The fundamental problem of causal inference
- 3. Problems
- 4. Solutions
- 5. The gold-standard (RCT, A/B testing)



### Why causality?

- Every decision we take relies on causal relationships :
  - Individuals :
  - If I go vegan, I'll reduce my ecological footprint.
  - If I drink this tequila shot, I'll dance better.
  - Companies :
  - Home-office reduces productivity.
  - Spamming users with YouTube Premium Ads will increase the number of subscribers.
  - Policy makers :
  - Replacing nuclear power plants with renewables will help to reach the Paris Agreement.
  - Lockdowns will reduce the spread of the covid-19.
- Failing to properly assess causality might lead to costly mistakes.



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https://www.youtube.com/watch?v=0zvrGiPkVcs&t=58s

There is only one Africa - if we try to understand if the aid we are giving is helping -> must understand was impact the aid has, Africa might be better without Aid or with more Aid?



- https://www.youtube.com/watch?v=0zvrGiPkVcs&t=58s
- "How do we know what would have happened without the aid? We have no idea. We don't know what the counterfactual is. There is only one Africa."
- It's impossible to observe the outcome with and without treatment for the same entity at the same point in time.

Rubin Causal Model

- Treatment :  $D_i = 1$  if treated, 0 otherwise D = Dummy = Treated group
- Potential outcome
  - Y<sub>i0</sub>: Individual i outcome without treatment
  - Yi1: Individual i outcome with treatment
  - $\Rightarrow$   $Y_i = Y_{i0}$  if  $D_i = 0$  or  $Y_i = Y_{i1}$  if  $D_i = 1$
  - $\Rightarrow Y_i = Y_{i0} + (Y_{i1} Y_{i0})D_i$

can't necessarily observe both outcomes like eg: Africa but I must understand -> So what to do?



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- Causal effect :  $Y_{i1} Y_{i0}$  impossible to observe



Rubin Causal Model

ausal Model • Instead of  $Y_{i1} - Y_{i0}$  we can measure  $E(Y_i|D_i = 1) - E(Y_i|D_i = 0)$ 

A=expected average outcome of treated group B= expected average outcome of treated group -> look at difference between A &B

$$= E(Y_{i,1} | D_{i=1}) - E(Y_{i,0} | D_{i=0}) + E(Y_{i,0} | D_{i=0}) - E(Y_{i,0} | D_{i=1})$$





#### Rubin Causal Model

• Instead of  $Y_{i1} - Y_{i0}$  we can measure  $E(Y_i|D_i=1) - E(Y_i|D_i=0)$ 

$$E(Y_i|D_i = 1) - E(Y_i|D_i = 0) = E(Y_{i1}|D_i = 1) - E(Y_{i0}|D_i = 1) + [E(Y_{i0}|D_i = 1) - E(Y_{i0}|D_i = 0)]$$

- This "naive" comparison includes :
  - Average Treatment of the Treated (ATT)
  - "Selection" Bias







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Rubin Causal Model

- There is a bias if :
- $E(Y_{i0}|D_i=1) \neq E(Y_{i0}|D_i=0)$
- The average outcome for the treated and untreated would be different without treatment



### Endogeneity issues

#### Reverse causality :

 The outcome is simultaneously influencing the explanatory variable (e.g. weapons and wars)

#### Omitted variable bias :

 Another variable correlated with the outcome and the explanatory variable is not observed/captured (e.g. swimming and sunscreen)

#### Measurement errors :

 Systematic miss-measurement related to some variable of interest (e.g COVID-19)

not perfectly observing the outcome - it is correlated to its ...



### Solutions

- 1. [today] The gold-standard: RCT, A/B testing
- 2. [week 2] Regression discontinuity design (RDD)
- 3. [week 3] Difference-in-Difference (DiD)
- 4. [week 4] Synthetic controls



### The gold-standard: RCT, A/B testing

- A Randomized Control Trial is a controlled experiment (in opposition to a natural experiment) where you randomly allocate the treatment between groups.
- ⇒ By randomly allocating the treatment to the different groups. you can solve the selection bias. if randomly allocated -- they are perfectly comparable, include conditions in simple allocations if the sample is

small for example - groups must combine man and woman





Overview

- How does RCT solve the fundamental causal inference problem?
- Recall that :

$$E(Y_i|D_i = 1) - E(Y_i|D_i = 0) = E(Y_{i1}|D_i = 1) - E(Y_{i0}|D_i = 1) + [E(Y_{i0}|D_i = 1) - E(Y_{i0}|D_i = 0)]$$

- Randomization of the treatment allocation implies :  $E(Y_{in}|D_i=1)=E(Y_{in}|D_i=0)$
- $\Rightarrow E(Y_i|D_i=1)-E(Y_i|D_i=0)=E(Y_{i1}|D_i=1)-E(Y_{i0}|D_i=1)$ 
  - The difference between the two groups is causal.



Overview

- $E(Y_{i0}|D_i=1)=E(Y_{i0}|D_i=0)$
- is called an Identifying assumption
- Most of the time in causal inference everything relies on the identifying assumption(s) and often you can't formally test for this!
- <u>∧</u>This is the key! This is where you have to look to challenge causality (and where the fun begins). <u>∧</u>

you could compare the differences of the groups before



#### Limitations

1. **Not always possible** (e.g. gender) or ethical (e.g. weapons) to manipulate the treatment.

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  - Example with seating position and learning
  - https://www.sciencedirect.com/science/article/pii/ S0959475217305716
  - https://journals.plos.org/plosone/article?id=10.1371% 2Fjournal.pone.0236131



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# 3. Simple random allocation works with large samples or if the groups are relatively homogenous:

- Large sample: by the law of large numbers, on average the groups will be similar.
- Homogeneity: In a lab experiment, you have inbred strains of rats
   (almost identical genetically).

  eq: sitting in the further back from the teacher -> there
- ⇒ Cluster/Stratified sampling method.

is no casuality to the grade -> should check with random allocation 🗗 🕨 🗓 🗎 💆 🖺

### RCT Limitations

4. **Blinding is not always possible!** If possible, the researchers and the subjects do not know who receives the treatment. At least, we should always do our best to prevent the subjects from knowing if they are in the treatment or control group.



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- 4. **Blinding is not always possible!** If possible, the researchers and the subjects do not know who receives the treatment. At least, we should always do our best to prevent the subjects from knowing if they are in the treatment or control group.
- 5. Other potential bias:
  - check: https://catalogofbias.org/
     (e.g volunteer bias, attrition bias, survivorship bias, etc.)
  - There is a gap between theory and reality (real example): Three rules to deal with imperfect experimental designs (https://medium.com/p/830c92f60590)



### RCT Limitations

- **Example**: Assessing the effect of mindfullness training on mental health in a firm with a field experiment.
- Which firms? How many persons? How would you set up the groups etc?



### What is a sample size calculation?

- In the industry or research, time/money is often an important constraint:
- 1. Collecting more data often implies more investment (time/money)
- 2. But, more data implies more information, and higher confidence in the results
  - $se = sd/\sqrt{n}$
- ⇒ Sample size calculations allow us to compute the smallest required sample size, such that we can test a specific statistical hypothesis with enough confidence (given some level of Type I and II errors).



Overview

### Two types of statistical errors

		True state of nature	
		Effect present	Effect absent
Conclusion of statistical analysis	Effect present (reject H <sub>0</sub> )	Correct	Type I error (α)
	No effect (accept H <sub>0</sub> )	Type II error (β)	Correct

Goal is to reject the null hypotheses

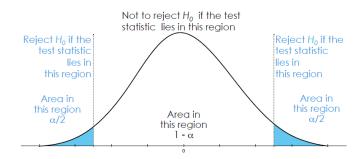


### Type I error : $\alpha$

- In statistics you "never" get an answer with a 100% certitude
- ullet lpha is the probability of wrongly rejecting the null hypothesis
- Defined by the researcher (most frequently 5%)
- $\alpha$  will define the rejection rule of  $H_0$ 
  - if p-value  $\leq \alpha \Rightarrow$  reject  $H_0$
  - if p-value>  $\alpha \Rightarrow$  not reject  $H_0$



### Example





### Weakness of the p-value

Overview

### Statement on p-values (ASA Statement (2016))

- Indicates how incompatible the data are with a specified statistical model
- Scientific conclusions should not be based only on the p-value
- Proper inference requires full reporting and transparency
- p-value states nothing about the magnitude

Need a rational understanding why the results I am getting are reasonable

- My view on this :
  - The statistical significance should be used as a necessary condition to interpret the magnitude, nothing more.
  - (The worst idea ever is to get rid of the stars in tables. Rather show the p-values without stars.)
  - Read: Why and how to use forest plots efficiently?
     https://medium.com/towards-data-science/
     unhappy-with-statistical-significance-p-value-here-is-a-simple

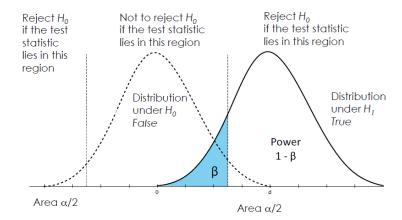
The p-value says nothing about the magnitude of the effect eg- shampoo promising new hairgrowth -> I care about the magnitude

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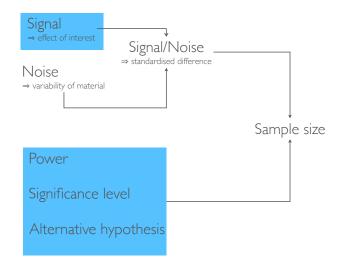
### Type II error : $\beta$

- $\beta$  is the probability of not rejecting  $H_0$  when  $H_1$  is true
- **Power**=  $1 \beta$ , probability of correctly rejecting  $H_0$

### Example



### Sample size is influenced by five variables



### Power and sample size

- Relationship between six variables
  - 1. The effect size of practical interest
  - 2. The standard deviation
  - 3. The significance level
  - 4. The desired power of the experiment
  - 5. The sample size
  - 6. The alternative hypothesis (i.e. one or two-sided test)



# 1. Effect size of practical interest $(\delta)$

Effect size /⇒ Power /

if I have more data then -> I can see smaller differences

- The decision on how large an effect would need to be considered of scientific interest / practical relevance
  - Would a 10% change in energy consumption upon treatment be of practical relevance and should the experiment be designed to detect it?
  - If 50% of the control group is expected to show some effect, what proportion in the treated group would be of interest to detect?

within a group -> better since less differences and avoiding errros



# 2. Standard deviation $(\sigma)$

- Needs to be estimated
  - Similar experiments, literature review, pilot study
- If not available
  - Standard Cohen's D (corresponds to the effect size divided by the standard error):
    - Small effect = 0.2
    - Medium Effect = 0.5
    - Large Effect = 0.8

within



# 3. The significance level $(\alpha)$

- $\alpha \nearrow \Rightarrow Power \nearrow$
- However, other things being equal, specifying a low chance of a false-positive result will increase the chance of a false-negative result
- By convention, fixed to 5%

### 4. Power of the experiment $\gamma$

- Power /⇒sample size/
- $\gamma = 1 \beta$  ( $\beta =$  Allowed probability of wrongly not rejecting the null hypothesis  $H_0$ ) The aim should be to have powerful experiments that have a high chance of detecting an effect if it exists (i.e. low  $\beta$  error)
- Usually set between 80% and 90%
- To be considered in the interpretation of "negative results": One can only conclude that differences in effects between two treatments were certainly absent if the study would have had enough POWER to detect them. FALSE! post-hoc test doesn't work!



# 5. Sample size (n)

- sample size /⇒ power/
- In many cases it is the sample size that is to be determined, and all the other variables are specified
- If the sample size is fixed ⇒ the power can be estimated ⇒ experiment may not be worth doing



# 6. The alternative hypothesis $(H_1)$

- The usual null hypothesis ⇒ no differences among treatment means
   ⇒ H<sub>1</sub> = there is an effect ⇒ two-sided significance test
- If the alternative is that means differ in a particular direction ⇒ one-sided test



### Sample size - Principle

- Specify the smallest true difference between the treatments that would be of practical relevance
- Choose the smallest sample size allowing to test your hypothesis efficiently (power)



### What do we need to compute the sample size

- Type of the outcome variable (continuous, categorical, proportion etc.) and number of comparisons
  - ⇒ Choice of statistical test
- · Direction of the test : one or two-sided
- Standard deviation (or variance)
- Effect size
- ⇒ Use Python or G-power (let's see both)

