QTM 101 Midterm 1 Cheat Sheet

Section 1, 10am-11:15am, Wed, Oct 4th, 2023

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Types of Questions

- Descriptive: Something we can **see** in the data.
- Predictive: What the future might look like
- Causal: If *X* changes, will *Y* change?

Strength vs. Magnitude

- Covariance: retain units
- Correlation (r): standardized covariance $\Rightarrow r \in [-1, 1]$
 - Sign: direction
 - Absolute Value: strength
- Regression coefficient (β): magnitude $\rightarrow y = \beta x + \alpha$.

All of them should have the same sign: all positive if y increases when x increases; all negative if y decreases when x increases.

- Covariance isn't actually telling us anything because they retain units they cannot be used in comparison!
- Determine which is the most **predictive**? (*strength*, *so we should use correlation coefficient*)
- Determine which is the most effective **chance**? (*magnitude*, so we should consider the regression coefficient)

Counterfactual Dependence

- We need to prove both: (1) when *X* happens, *Y* happens; and (2) when *X* does not happen, *Y* does not happen.
- Some notations:
 - T=0: control, untreated
 - T = 1: treatment, treated
 - Y_1 : outcome if treated
 - Y₀: outcome if untreated
- Fundamental problem of casual inference: We cannot observe ATT (Average Treatment Effect of Treated) anyhow!

$$ATT = \mathbf{E}[Y_1 \mid T = 1] - \mathbf{E}[Y_0 \mid T = 1],$$

where $\mathbf{E}[Y_0 \mid T=1]$ is not observable because we cannot have the same group be both treated and untreated.

• Resolution: Estimate the ATT:

$$\widehat{ATT} = \mathbf{E}[Y_1 \mid T = 1] - \mathbf{E}[Y_0 \mid T = 0],$$

where both $\mathbf{E}[Y_1 \mid T=1]$ and $\mathbf{E}[Y_0 \mid T=0]$ are observable.

• An important equation

where possible Estimand's are (remember that Estimand's are unobservable true values in our experiment)

- ATE =
$$\mathbf{E}[Y_1] - \mathbf{E}[Y_0]$$

- ATT =
$$\mathbf{E}[Y_1 \mid T = 1] - \mathbf{E}[Y_0 \mid T = 1]$$

- ATU =
$$\mathbf{E}[Y_1 \mid T = 1] - \mathbf{E}[Y_0 \mid T = 0]$$

The only observable effect (Estimate) is

$$\widehat{ATE} = \widehat{ATT} = \widehat{ATU} = \mathbf{E}[Y_1 \mid T = 1] - \mathbf{E}[Y_0 \mid T = 0]$$

• Following up, we use ATT to represent our general Estimand and \widehat{ATT} as our Estimate.

Identifying Inferential Errors

- Selecting on the DV: Only one outcome in data
- <u>Confounder/Common Cause</u>: **omitted variable** (We are not comparing apples to apples)

Bias and Noise

• <u>Bias</u>: Systematic error; Not apples-to-apples; Inaccuracy

Bias =
$$\mathbf{E}[Y_0 \mid T = 1] - \mathbf{E}[Y_0 \mid T = 0]$$

- To measure Bias, we give the two groups Placebo (however, bias is still unobservable).
- Eliminating bias: randomization.
- Law of Large Numbers (LLN): the sample average can be arbitrarily close to the true population average by making the sample large enough.
- Noise: Random error; E[Noise = 0]; Imprecision
 - Everything is noisy.
 - Measured by standard error

$$SE = \sqrt{\frac{p(1-p)}{N}}, \quad p = \text{porportion of outcome}$$

- If we repeat our experiment for enough times, our Noise should be 0.
- We are not super stressful with Noise since the solution is to increase sample size.

Confidence Interval and p-values

- Point Estimate (= \widehat{ATT}) $\xrightarrow{\text{MATH}}$ 95% CI
 - If we run the experiment identically 100 times, 95 of them should contain the true value of the estimand
 - When we have $99\%~{\rm CI},$ then we should find larger intervals.
- Interpreting a CI: Sign and Magnitude (every important if the interval contains 0).
 - $\widehat{\text{ATT}} = 10$; 95% CI = [6, 14]: If we run the experiment identically 100 times and calculation the confidence interval in each repetition, out of 95 times, we are confident that [6, 14] captures the ATT. Furthermore, ATT is likely **positive** and has a **large magnitude**.
 - $\widehat{\text{ATT}} = 3$; 95% CI = [-2,8]: If we run the experiment identically 100 times, and we calculate the confidence interval in each repetition, out of 95 times, we are confident that the interval [-2,8] captures the ATT. However, ATT **sign is unclear** and has a **small magnitude**.
- Central Limit Theorem: If we repeat a study/analysis/experiment a zillion times, the value of many of the statistics we get will follow a normal distribution.
- Null Hypothesis: ATT = 0. (\Rightarrow Any nonzero \widehat{ATT} is due to noise)
 - Fail to reject the null: $\widehat{\mathrm{ATT}}$ could be due to noise
 - Reject the null: \widehat{ATT} is probably not due to noise
- p-values:
 - High p-value \rightarrow **High** chance of observing if ATT = $0 \rightarrow$ **fail to reject** the null \rightarrow ATT could **reasonably** be 0.
 - Low p-value \rightarrow Low chance of observing if ATT = $0 \rightarrow$ reject the null \rightarrow ATT is unlikely be 0.
- Threshold of p-values: 0.05
- Connecting *p*-values and CI's
 - $\widehat{ATT} = 5$; 95% CI = [-1,11]; p-value = 0.13: **fail to reject** the null, ATT could **reasonably** be 0 (the result could be due to noise).
 - $\widehat{ATT} = 5$; 95% CI = [2,8]; p-value = 0.03: **reject** the null, ATT is **unlikely** be 0 (the result is not due to noise).

Experiments

- Random Assignment
 - Observational studies: non-random assignment; based on observed treatments in the world

- <u>Randomization</u>: a computer selecting random number to allocate treatment
- Stratified Randomization: split subjects by one or few factors then randomize within those strata
- Types of experiment:
 - Lab: classical model of experiment
 - <u>Field</u>: experimenter manipulate a treatment in the real world. *Randomized Control Trial (RCT)*
 - Lab in the Field
 - Quasi or Natural Experiments
- Fundamental Principle of Controlled Experiment: Actual outcomes among the control group should give the same counterfactual outcomes of the treated groups
- Internal Validity: how close $\mathbf{E}[Y_0 \mid T=1]$ is to $\mathbf{E}[Y_0 \mid T=0]$.
 - <u>Chance imbalance</u>: check the balance in observables.
 - * throw out broken experiment
 - * proceed as normal
 - compare the experimental effects within groups sharing the same level of unbalanced observable
 - Lack of statistical power: larger sample size → less noise → more statistical power (=ability to detect a true effect if one exists)
 - Non-compliance: subjects fail to take the treatment
 - * Intent-to-treat effect (ITT)
 - Placebo effects: individuals know they are part of the experiment and will be recorded.
 - * Double blinded experiments
 - * Three groups: treatment, control, placebo; compare measure (T-C) and (P-C), then true effect is (T-C)-(P-C). Or simply compare T to C.
 - Attrition: some subjects drop out of the analysis after randomization, and we cannot observe their outcomes.
 - * confident that attrition is random: still estimate the average effect.
 - * attrition is non-random but unrelated to treatment: estimate the average effect for those stayed in sample
 - * attrition is non-random and related to treatment
 - <u>Interference</u>: control and treatment are in contact
 - * Contamination
 - * Spillovers

QTM 110 Midterm 1 Review

November 7, 2023

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- Causal: If X changes, will Y change?

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An important equation

$$\boxed{\text{Estimate}} = \boxed{\text{Estimand}} + \text{Bias} + \text{Noise},$$

where possible Estimand's are (remember that Estimand's are unobservable true values in our experiment)

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- ATT =
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