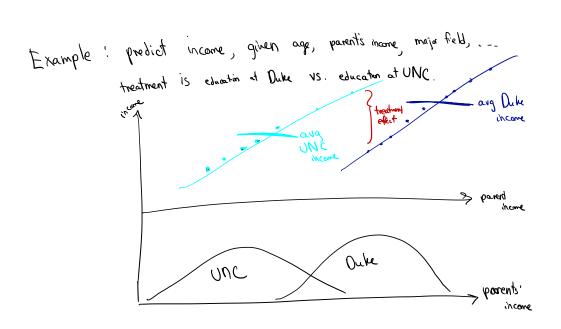
Causal Inference

Is ML useless for making decisions? Possibly "dad" male history of congential wart falure atrial fibrillation takes aspiris USE ML to predict shoke within I year $f(x) = f_{ctn}$ of (gener, race, age, history, drugs, etc.) FCX) = 3.4. Il [congental hourt fulux] + 4.2. Il [atib] + ----- + 1.1 1 [femle] + 2.4.1 [smaking] If dad stops smoking, does it reduce his risk of shoke? $f(x) = 3 * Il[war farin] - 1 = \begin{cases} predicts show if warfarin \\ predicts no show if not \end{cases}$ carelation > causation what happened?

Regular ML: model 1/X, T=1 - Y/X, T=0

"Causal inference" ML: model 1/X, T=1 - Y/X, T=0

Transment effect, conditional difference



What data do you get?

X T Y
parents UNCYDUKE income
sook Dube 80K

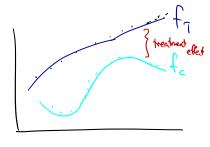
never have that

problem is exactly half supervised.

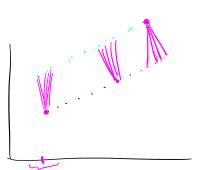
How to use ML to solve it.

· regress separately on treatment of control

for -fo



- . matching or reasest neighbor
- : (tree stuctures)



* beware * of MLers who don't know CI!

Course Overview

perception alg, winnow alg, convergence proofs

KDD process

How to evaluate an alg/model!

J kinds of ROC curves, AUC

coss validation

L supervised learning alg

General form of a supervised learning alg loss + C. Regul (inclined + C. Prior

Trees of Ensemble methods
- CART, C4.5
- random forest of variable importance

- boosting Generaline Models: Logistic regression, boosting, Gaussian Mixtur Models

Optimization methods: boosting (coord desc)

SVM (convex optimize of duality)

NN's (back prop)

High dimensional spaces : hereds & RKHS for own & ridge . margin themy for SVM

Generalization = data + knowledge

and ytical Methods: Least squares, ridge, kernel ridge requession karnel regression

Clustering: K-means, HAC, GMM

Multicarmed Boardits

Cousal Inference treas NN's

optim SVM SLT 4 margins

log reg