Chapter 6: Panel Data

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Mathematical Econometrics I Brown University Fall 2023

Motivation

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- But often we're worried that there are unobservable characteristics we haven't properly accounted for (i.e. confounding variables)
- Next we'll think about how we can deal with certain types of unobserved confounding variables when we have panel data

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- Let's see how this works in an example of difference-in-differences, which is the most common panel data method used in applied microeconomic research

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 - On the one hand, it could reduce competition and increase prices
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- Hastings attempted to answer this question empirically using data on gas prices by neighborhood in CA
 - Data contains info on neighborhoods both with/without Thrifty stations

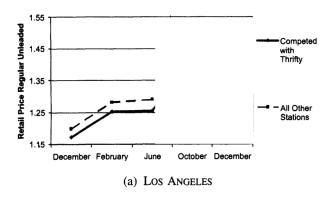
- Suppose first that we only had data on gas prices from after the merger occurred.
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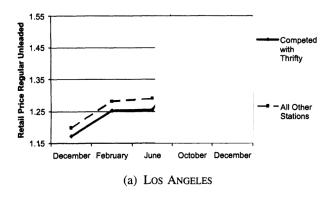
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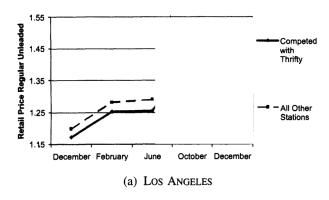
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- In particular, places that already had a Thrifty beforehand likely had more competition than places without a Thrifty. We thus might expect them to have lower prices.
- With panel data, we can test this empirically by looking at prices before the merger!



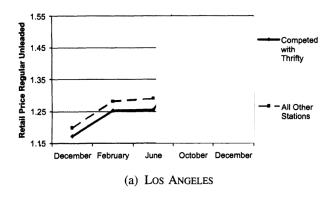
• Before the merger, stations in markets competing with Thrifty had gas prices about 3 cents lower in every period



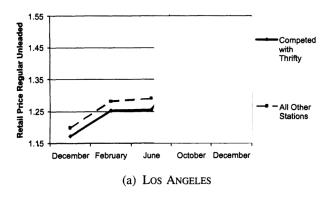
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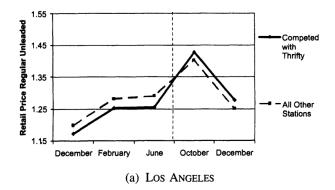
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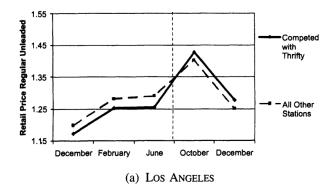
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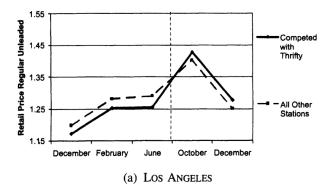
- Before the merger, stations in markets competing with Thrifty had gas prices about 3 cents lower in every period
- Is it reasonable to assume unconfoundedness after the merger? No!
- A better assumption might be that the gap would haved remained 3c if not for the merger! This is the idea of difference-in-differences



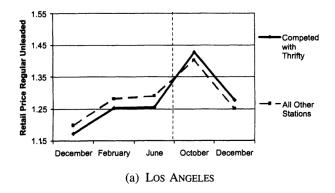
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- After the merger, stations in areas with a Thrifty had higher prices by about 2c
- If we assume that they would have had *lower* prices by 3c (as before the merger), then this implies a treatment effect of 2 (-3) = 5
- This is the post-treatment difference (2) between treatment & control minus the pre-treatment difference (-3), i.e. a difference-in-differences

Formalizing the Assumptions of DiD

- Assume there are 2 periods, t = 1, 2. Treated units $(D_i = 1)$ are treated in period 2; control units never-treated.
- Let Y_{it} be the observed outcome for unit i in period t. Assume $Y_{it} = D_i Y_{it}(1) + (1 - D_i) Y_{it}(0)$

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- No anticipation assumption: $Y_{i1}(0) = Y_{i1}(1)$
 - Your treatment in period 2 doesn't affect your outcome in period 1
- Parallel trends assumption:

$$\underbrace{E[Y_{i2}(0) - Y_{i1}(0)|D_i = 1]}_{\text{Change in } Y(0) \text{ for treated}} = \underbrace{E[Y_{i2}(0) - Y_{i1}(0)|D_i = 0]}_{\text{Change in } Y(0) \text{ for control}}$$

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Equivalently,

$$\underbrace{E[Y_{i2}(0)|D_i=1] - E[Y_{i2}(0)|D_i=0]}_{\text{Selection bias in period 2}} = \underbrace{E[Y_{i1}(0)|D_i=1] - E[Y_{i1}(0)|D_i=0]}_{\text{Selection bias in period 1}}$$

• Under these assumptions, we have

$$E[Y_{i2} - Y_{i1}|D_i = 1] - E[Y_{i2} - Y_{i1}|D_i = 0] =$$

Observed change for treated Observed change for control

$$=E[Y_{i2}(1)-Y_{i1}(1)|D_i=1]-E[Y_{i2}(0)-Y_{i1}(0)|D_i=0]$$
 (Observed data rule)

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- Thus, the difference-in-difference of sample means identifies $\tau_{ATT} = E[Y_{i2}(1) Y_{i2}(0)|D_i = 1].$
- This is called the average treatment effect on the treated (ATT).
 It is the average effect in period 2 for treated units.

Estimating the ATT

 We've shown that under the DiD assumptions (parallel trends and no anticipation), the ATT is identified as

$$au_{ATT} = \underbrace{E[Y_{i2} - Y_{i1}|D_i = 1]}_{ ext{Change in pop mean for treated}} - \underbrace{E[Y_{i2} - Y_{i1}|D_i = 0]}_{ ext{Change in pop mean for control}}$$

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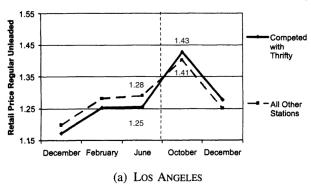
- How can we estimate this? Plug in sample means!
- Our estimate is:

$$\hat{ au}_{ATT} = \underbrace{ar{Y}_{12} - ar{Y}_{11}}_{ ext{Change in sample mean for treated}} - \underbrace{ar{Y}_{02} - ar{Y}_{01}}_{ ext{Change in sample mean for control}},$$

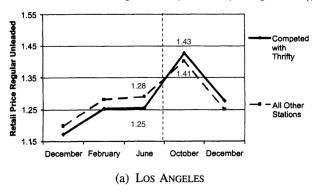
where \bar{Y}_{dt} is the sample mean for units with $D_i = d$ in period t.

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• Consider Hasting's example, comparing June (period 1) to October

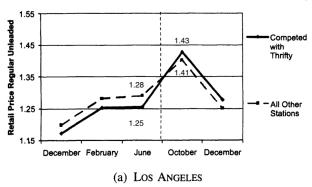


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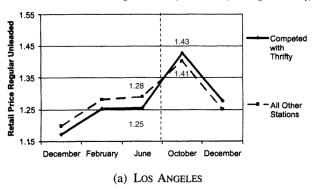
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$$\begin{split} E[Y_{it}|D_i &= 0, Post_t = 0] = \beta_0 \\ E[Y_{it}|D_i &= 0, Post_t = 1] = \beta_0 + \beta_1 \\ E[Y_{it}|D_i &= 1, Post_t = 0] = \beta_0 + \beta_2 \\ E[Y_{it}|D_i &= 1, Post_t = 1] = \beta_0 + \beta_1 + \beta_2 + \beta_3 \end{split}$$

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$$E[Y_{it}|D_i = 1, Post_t = 1] = \beta_0 + \beta_1 + \beta_2 + \beta_3$$

Thus,

$$eta_3 = (E[Y_{it}|D_i = 1, Post_t = 1] - E[Y_{it}|D_i = 1, Post_t = 0]) - (E[Y_{it}|D_i = 0, Post_t = 1] - E[Y_{it}|D_i = 0, Post_t = 0]) = au_{ATT}$$

Consider the regression

$$Y_{it}=eta_0+eta_1 imes Post_t+eta_2D_i+eta_3D_i imes Post_t+arepsilon_{it},$$
 where $Post_t=1$ [$t=2$].

- Claim: the population regression coefficient β_3 is equal to τ_{ATT} under the DiD assumptions.
- Why? The regression above models the CEF as:

$$E[Y_{it}|D_i = 0, Post_t = 0] = \beta_0$$

$$E[Y_{it}|D_i = 0, Post_t = 1] = \beta_0 + \beta_1$$

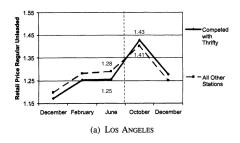
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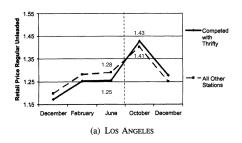
ullet Analogously, $\hat{eta}_3 = (ar{Y}_{12} - ar{Y}_{11}) - (ar{Y}_{02} - ar{Y}_{01}) = \hat{ au}_{ATT}$



Suppose we take the Hastings data from June/October and estimate

$$Y_{it} = \beta_0 + \beta_1 \times Post_t + \beta_2 D_i + \beta_3 D_i \times Post_t + \varepsilon_{it},$$

via OLS, where $Post_t$ is 1 for October and 0 for June.



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• We get the regression coefficients:

Constant (β_0)	1.28
Post (\hat{eta}_1)	0.13
Treated (\hat{eta}_2)	-0.03
Treated $ imes$ Post (\hat{eta}_3)	0.05

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• You can also replace $D_i \gamma$ with a unit fixed effect λ_i and you get the exact same $\hat{\beta}_s$.

- The Affordable Care Act (ACA, aka Obamacare) expanded Medicaid coverage to people with income up to 138% of the federal poverty line
- Medicaid expansion went into effect in 2014. However, some Republican-leaning states opted out of expanded coverage.
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- Medicaid expansion went into effect in 2014. However, some Republican-leaning states opted out of expanded coverage.
- By 2015, 24 states had expanded Medicaid (more have done so since)
- Carey, Miller, and Wherry (2020) study the impacts of Medicaid expansion using a DiD design comparing early-adopting states to non-adopters.

A slightly simplified version of their regression specification is

$$Y_{its} = \phi_t + \lambda_s + \sum_{r \neq -1} D_i \times 1[t = 2014 + r] \times \beta_r + \varepsilon_{it}$$

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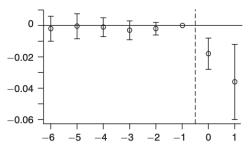
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Panel B. Uninsured

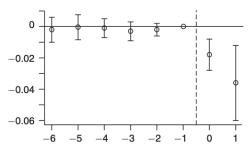


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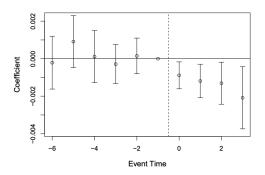
Panel B. Uninsured



Results show similar "pre-trends" but negative effects after treatment

In a related paper, some of the same authors used a similar research design to estimate the impacts on mortality $\,$

Figure 2: Effect of the ACA Medicaid Expansions on Annual Mortality



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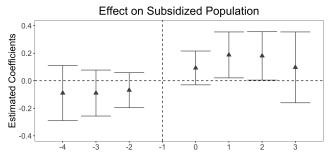
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- Testing for pre-treatment differences ("pre-trends") can help increase our confidence in the research design. But they're not perfect. Why?
 - Just because trends were parallel beforehand doesn't mean that they would continue to be afterwards
 - Often our estimates of pre-trends are noisy so we're not sure whether they're actually zero or not.

• In addition to looking at the point estimates of pre-trends, it's important to consider what the CIs rule out

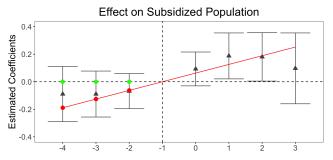
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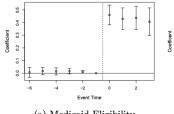
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• Are you convinced there's an effect here? Maybe not!

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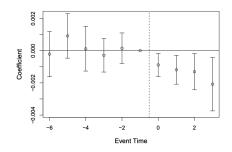


(a) Medicaid Eligibility

• What about here?

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$$Y_i = \boldsymbol{X}_i' \boldsymbol{\beta} + e_i$$

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 - ② More subtlely, if treatment is assigned at the state level, all people in a given state will have the same value of D_{it} (which is included in X_{it})

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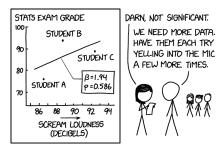
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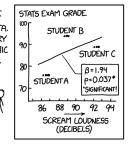
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- In panel analyses, you should at minimum cluster at the individual level to allow for autocorrelation.
- If treatment is assigned at a more aggregate level, it is best to cluster at the level where treatment is assigned.
- Keep in mind: the number of "effective observations" (used for CLT) is the number of clusters
 - \bullet Clustered SEs will not be reliable when the number of clusters is very small (e.g. <20)

XKCD







Implementing Clustered SEs

- Implementing clustered SEs in Stata is very easy
- Just replace reg y x, robust with reg y x, cluster(clustervar)

. reg vehicle_fatality_rate beertax i.state i.year, r

Linear regression	Number of obs
	F(54, 281)
	Prob > F
	R-squared

F(54, 281) = 128.89
Prob > F = 0.0000
R-squared = 0.9089
Root MSE = 1.9e-05

336

vehicle_fa~e	Coefficient	Robust std. err.	t	P> t	[95% conf.	interval]
beertax	000064	.0000255	-2.51	0.013	0001141	0000139
state						
AZ	0000547	.0000357	-1.53	0.127	0001249	.0000156
AR	0000639	.0000293	-2.18	0.030	0001214	-6.26e-06
CA	0001485	.0000412	-3.60	0.000	0002296	0000674

. reg vehicle_fatality_rate beertax i.state i.year, cluster(state)

Linear regression

Number of obs = 336 F(6, 47) = . Prob > F = . R-squared = 0.9089 Root MSE = 1.9e-05

(Std. err. adjusted for 48 clusters in state)

				-		
vehicle_fa~e	Coefficient	Robust std. err.	t	P> t	[95% conf.	interval]
beertax	000064	.0000386	-1.66	0.104	0001416	.0000136
state						
AZ	0000547	.0000506	-1.08	0.286	0001566	.0000472
AR	0000639	.0000399	-1.60	0.116	000144	.0000163
CA	0001485	.0000589	-2.52	0.015	0002671	00003

HOW MUCH SHOULD WE TRUST DIFFERENCES-IN-DIFFERENCES ESTIMATES?*

Marianne Bertrand Esther Duflo Sendhil Mullainathan

Most papers that employ Differences-in-Differences estimation (DD) use many years of data and focus on serially correlated outcomes but ignore that the resulting standard errors are inconsistent. To illustrate the severity of this issue, we randomly generate placebo laws in state-level data on female wages from the Current Population Survey. For each law, we use OLS to compute the DD estimate of its "effect" as well as the standard error of this estimate. These conventional DD standard errors severely understate the standard deviation of the estimators: we find an "effect" significant at the 5 percent level for up to 45 percent of the placebo interventions. We use Monte Carlo simulations to investi-

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- To study this, CK study an episode in 1992 where NJ raised its minimum wage from \$4.25 to \$5.05
- \bullet They use a DiD comparing change in employment in fast food restaurants in NJ to that in neighboring PA , where the MW was flat at \$4.25

		PA	NJ	Difference, NJ-PA
Va	riable	(i)	(ii)	(iii)
1.	FTE employment before,	23.33	20.44	-2.89
	all available observations	(1.35)	(0.51)	(1.44)
2.	FTE employment after,	21.17	21.03	-0.14
	all available observations	(0.94)	(0.52)	(1.07)
3.	Change in mean FTE	-2.16	0.59	2.76
	employment	(1.25)	(0.54)	(1.36)

Notes: Adapted from Card and Krueger (1994), Table 3. The table reports average full-time equivalent (FTE) employment at restaurants in Pennsylvania and New Jersey before and after a minimum wage increase in New Jersey. The sample consists of all stores with data on employment. Employment at six closed stores is set to zero. Employment at four temporarily closed stores is treated as missing. Standard errors are reported in parentheses

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• Point estimates suggest an *increase* in employment of 2.76 FTEs, but not statisticially signflicant.

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 - Should the firm raise the wage to \$8/hour? Not if it means they have to pay all 100 workers an extra \$1!
 - However, if the MW is raised to \$8/hour, then the firm has to pay the first 100 workers \$8 anyway, and would gladly hire the 101st worker at \$8/hour since this brings \$10 of profit.

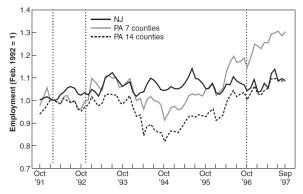


Figure 5.2.2 Employment in New Jersey and Pennsylvania fast food restaurants, October 1991 to September 1997 (from Card and Krueger 2000). Vertical lines indicate dates of the original Card and Krueger (1994) survey and the October 1996 federal minimum wage increase.

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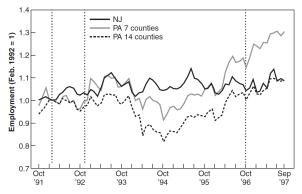


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- The two states do not move exactly in parallel even before the policy change in April 1992.

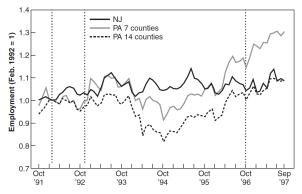


Figure 5.2.2 Employment in New Jersey and Pennsylvania fast food restaurants, October 1991 to September 1997 (from Card and Krueger 2000). Vertical lines indicate dates of the original Card and Krueger (1994) survey and the October 1996 federal minimum wage increase.

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- The two states do not move exactly in parallel even before the policy change in April 1992. We also only have 2 states!

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- In the two-period model, this corresponds to the diff-in-diff in sample means between treatment and control
- Unfortunately, it turns out that this estimator is *not* an average of DiDs between treated and untreated units in the staggered case.
 - See Borusyak and Jaravel (2016), de Chaisemartin and D'Haultfoeuille (2020), Goodman-Bacon (2021)

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- There are many implementations of this and related approaches, including Callaway and Sant'Anna (2020), Sun and Abraham (2020), Borusyak, Jaravel & Spiess (2021)

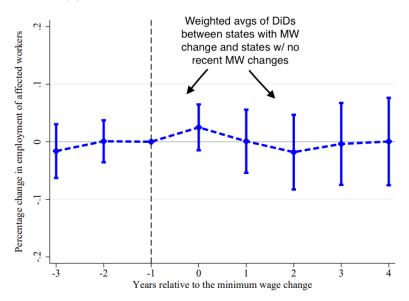
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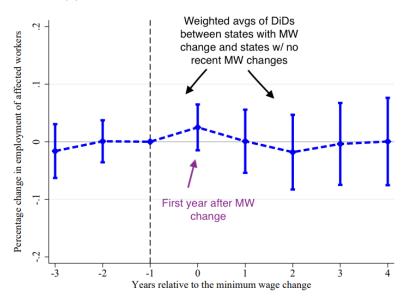
- Cengiz et al (2019) do a modern version of C&K using 138 MW changes between 1976 and 2016
- For each state that changes its MW, they take a "control group" of states that didn't change their MW in the 4 years before/after
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- They then take a weighted average of these DiDs to get an overall average effect

(a) Evolution of the missing and excess jobs



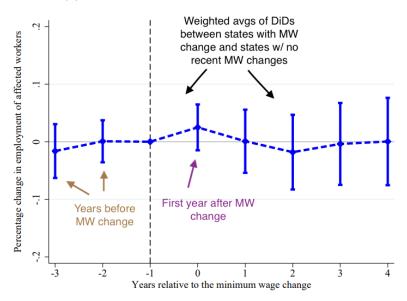
(b) Evolution of the employment of the affected workers

(a) Evolution of the missing and excess jobs



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Important Considerations/Caveats

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- Historical analyses of MW are typically relatively short-run
 - Over long-run, MW increases may induce shifts in technology that replace workers
- There is still some debate among economists over whether MWs reduce employment!

Other Panel Data Methods

- We've focused on DiD, which is the most commonly-used panel data method in applied micro-economics
- But there are many others:
 - Controls for lagged dependent variables
 - Synthetic control
 - Matrix completion
- We won't have time to cover these, but if you're interested, I suggest taking more econometrics classes:)