

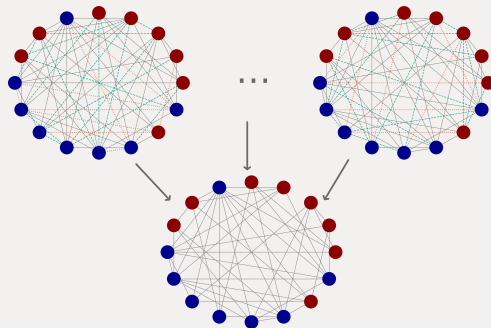
ESTIMATING CAUSAL EFFECTS USING PROXY INTERFERENCE NETWORKS

BAR WEINSTEIN

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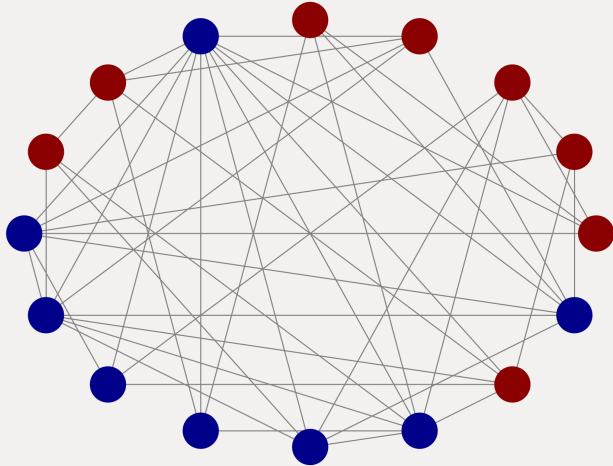
STATISTICS & OR
TEL AVIV UNIVERSITY

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- **Causal Inference.** Estimate the effect of treatment on an outcome.
- **Interference.** Treatment of one unit affect the outcomes of others.
- Treatments spreads through a network.
 - ▶ Nodes: units; Edges: magntiude of pairwise interfernce.

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- Examples:
 - ▶ *Social networks.* Transmission of information, behavior, encouragements, etc.
 - ▶ *Epidemiology.* Mitigating spread of infectious diseases or addictive drugs.
 - ▶ A/B testing in marketplaces.



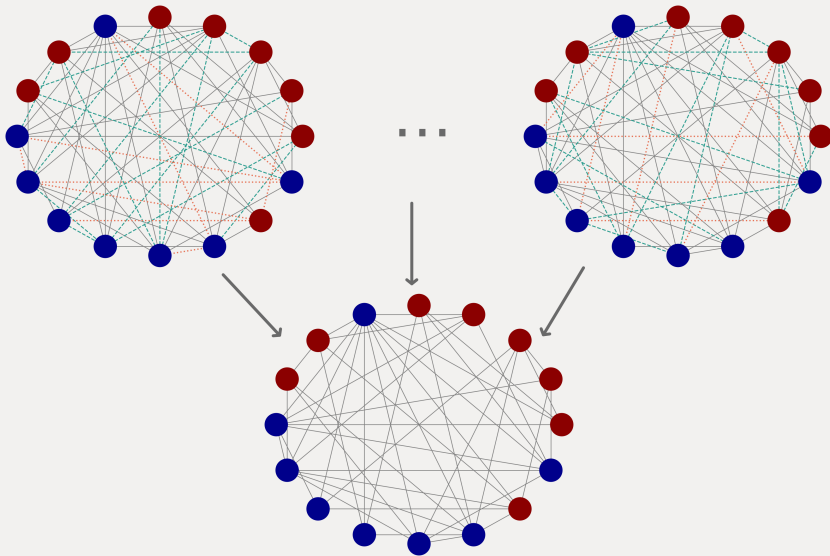
THE CHALLENGE

- Accurately measuring social networks is challenging.
- We observe only proxy measurements of the true network.
 - ▶ Measurements error.
 - ▶ Multiple sources of data.
 - ▶ Multilayer networks.
- True network remains latent.

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How can we estimate causal effects using proxy networks?



ILLUSTRATIVE EXAMPLE – PALUCK ET AL. (2016)

- Field experiment in 56 middle-schools.
- Study how anti-conflict education spread through social networks.
- Measured social networks using self-reported friendships.
 - ▶ Bi-layer networks: frequently interacted and best friends.
 - ▶ Measured at pre- and post-intervention period.

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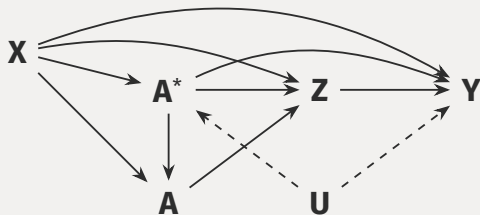
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 - ▶ Bi-layer networks: frequently interacted and best friends.
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- Which of the networks, if any, is the true network?
- **Objective:** Estimate the intervention effects using the proxy networks.

FORMAL SETUP

- Finite population $i \in \{1, \dots, N\}$.
- Treatments: $\mathbf{Z} \in \{0, 1\}^N$.
- Outcomes: $\mathbf{Y} \in \mathbb{R}^N$.
- Covariates/features: \mathbf{X} .
- True interference network: $\mathbf{A}^* \in \{0, 1\}^{N \times N}$.
- Proxy networks: $\mathbf{A} = (\mathbf{A}^1, \dots, \mathbf{A}^B)$.

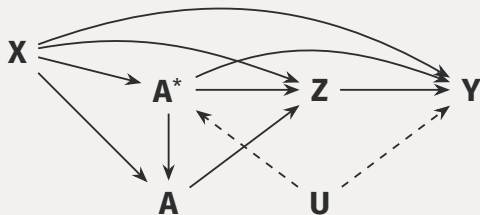
STRUCTURAL CAUSAL MODEL

- Population-level directed acyclic graph (DAG):



STRUCTURAL CAUSAL MODEL

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- Requires probabilistic models:

1. *True network.* $p(\mathbf{A}^* | \mathbf{X}, \theta)$.
2. *Proxy networks.* $p(\mathbf{A} | \mathbf{A}^*, \mathbf{X}, \gamma)$.
3. *Outcomes.* $p(\mathbf{Y} | \mathbf{Z}, \mathbf{A}^*, \mathbf{X}, \eta)$.

CAUSAL ESTIMANDS

Causal effects are the impact of hypothetical interventions on **Z**.
Can be viewed as population-level treatment assignment policies.

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1. **Static.** $\mathbb{E}[Y_i | do(\mathbf{Z} = \mathbf{z}), \mathbf{X}, \mathbf{A}^*]$.
 - ▶ Treating all ($\mathbf{z} = 1$) versus none ($\mathbf{z} = 0$).
2. **Dynamic.** $\mathbb{E}[Y_i | do(\mathbf{Z} = h(\mathbf{X}, \mathbf{A}^*)), \mathbf{X}, \mathbf{A}^*]$.
 - ▶ Treating units with specific features, e.g., above certain age.
3. **Stochastic.** $\mathbb{E}_{\pi_{\alpha}(\mathbf{Z})} \mathbb{E}[Y_i | do(\mathbf{Z}), \mathbf{X}, \mathbf{A}^*]$.
 - ▶ Expected impact of randomly treating α_1 vs α_0 percent of units.

- Observed data $\mathbf{O} = (\mathbf{Y}, \mathbf{Z}, \mathbf{X}, \mathbf{A})$. Latent variables $(\mathbf{A}^*, \eta, \gamma, \theta)$.

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- Posterior distribution:

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- Propose two sampling schemes:
 1. *Modularization*. “break” the posterior into smaller, more manageable parts.
 2. *Gibbs*. Iterate between continuous and discrete. Sample discrete with *Local Informed Proposals*.

Two figures: MAPE of estimated treatment effects and MAE of exposure mapping.

Results of Paluck et al. (2016) analysis.



Figure 1: Figure caption.

	Heading 1	Heading 2
Row 1	v_{11}	v_{12}
Row 2	v_{21}	v_{22}
Row 3	v_{31}	v_{32}

Table 1: Table caption.

THANKS FOR USING **Focus**!

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APPENDIX

More math details.