# R Assignment 1

#### PH252D Fall 2013 Introduction to Causal Inference

Assigned: October 14, 2013 Due: October 21, 2013

Write-up: Please answer all questions and include relevant R code. You are encouraged to discuss the assignment in groups, but should not copy code or interpretations verbatim. You need to bring your own completed assignment to class.

## 1 Background

Suppose we are interested in the causal effect of ready-to-use therapeutic food (RUTF) on recovery from undernutrition in a resource-limited country. RUTF is peanut butter-type paste, fortified with milk proteins and essential nutrients, and does not require water for use (WHO, 2007). We propose a study to contrast the effect of RUTF with the standard supplement on weight gain over two months among school-aged children.

Suppose we only have two pre-intervention covariates. Specifically, W1 is an indicator, equaling 1 if the child has access to potable water. Likewise, W2 is an indicator, equaling 1 if the child suffered from an infectious disease within the two weeks prior to the study initiation. The intervention A is also an indicator, equaling 1 if the child received RUTF and 0 if the child received the standard supplement. Finally, the outcome Y represents the child's weight gain in pounds at the study termination.

The above study can be translated into the following structural causal model (SCM)  $\mathcal{M}^F$ :

Endogenous nodes: X = (W1, W2, A, Y)Background (exogenous) variables:  $U = (U_{W1}, U_{W2}, U_A, U_Y) \sim P_U$ Structural equations F:

$$W1 = f_{W1}(U_{W1})$$

$$W2 = f_{W2}(W1, U_{W2})$$

$$A = f_A(W1, W2, U_A)$$

$$Y = f_Y(W1, W2, A, U_Y)$$

- 1. Draw the accompanying DAG.
- 2. Are there any exclusion restrictions?
- 3. Are there any independence assumptions?
- 4. Define the counterfactual outcomes of interest with formal notation and in words. How are counterfactuals derived?
- 5. Suppose we are interested in the average treatment effect. Specify the target causal parameter. Use formal notation as well as explain in words.
- 6. Suppose the observed data consist of n independent, identically distributed (i.i.d) draws of the random variable O = (W1, W2, A, Y). Specify the link between the SCM and the observed data? What restrictions, if any, does the SCM place on the allowed distributions for the observed data? What notation do we use to denote the true (but unknown) distribution of the observed data and the statistical model?

- 7. Using the backdoor criteria, assess identifiability. If the target causal parameter is not identified, under what assumptions would it be? What notation is used to denote the original SCM augmented with additional assumptions needed for identifiability?
- 8. Specify the target parameter of the observed data distribution (the statistical estimand).
- 9. What is the relevant positivity assumption? Is it reasonable here?

## 2 A specific data generating process

The above SCM is compatible with many possible data generating processes. Recall  $\mathcal{M}^F$  is a causal model for the set of possible distributions  $P_{U,X}$  for (U,X). Now consider a specific data generating process (unknown to the investigators). Suppose that the each of the exogenous factors is drawn independently from following distributions:

$$U_{W1} \sim Uniform(0, 1)$$

$$U_{W2} \sim Uniform(0, 1)$$

$$U_{A} \sim Uniform(0, 1)$$

$$U_{Y} \sim Normal(\mu = 0, \sigma^{2} = 0.3^{2})$$

Given the exogenous U, the endogenous variables are deterministically generated as

$$\begin{aligned} W1 &= \mathbb{I}[U_{W1} < 0.2] \\ W2 &= \mathbb{I}[U_{W2} < expit(0.5^*W1)] \\ A &= \mathbb{I}[U_A < expit(W1^*W2)] \\ Y &= 4^*A + 0.7^*W1 - 2^*A^*W2 + U_Y \end{aligned}$$

Recall the *expit* function is the inverse of the logistic function.

1. Evaluate the target causal parameter  $\Psi^F(P_{U,X})$  in closed form for this data generating process.

Hints: In this particular data generating system (one of many compatible with the SCM), the expectation of the counterfactual outcome is a linear function of the treatment level a, the pre-intervention covariates (W1, W2) and random error  $U_Y$ :

$$E_{U,X}(Y_a) = E_{U,X} \left[ 4^* a + 0.7^* W 1 - 2^* a^* W 2 + U_Y \right]$$

The marginal distribution of W1 (access to potable water) is Bernoulli with probability 0.20:

$$P_{U,X}(W1=1) = E_{U,X}(W1) = 0.20$$

The conditional expectation of W2 (presence or absence of an infectious disease), given W1, is given by

$$P_{UX}(W2 = 1||W1) = E_{UX}(W2|W1) = expit(0.5*W1)$$

By the tower rule, the marginal expectation of W2 is given by

$$E_{U,X}(W2) = \sum_{w1} E_{U,X}(W2|W1 = w1)P_{U,X}(W1 = w1)$$
  
=  $E_{U,X}(W2|W1 = 1)P_{U,X}(W1 = 1) + E_{U,X}(W2|W1 = 0)P_{U,X}(W1 = 0)$ 

2. Interpret  $\Psi^F(P_{U,X})$ .

- 2.1 Translating this data generating process for  $P_{U,X}$  into simulations, generating counterfactual outcomes and evaluating the target causal parameter.
  - 1. First set the seed to 252.
  - 2. Set n=5000 as the number of i.i.d. draws from the data generating process.
  - 3. Simulate the background factors U. Note the syntax for rnorm.
  - 4. Evaluate the structural equations F to deterministically generate the endogenous nodes X. Recall the *expit* function is given by the plogis function in R.
  - 5. Intervene to set the supplement to RUTF (A = 1) and generate counterfactual outcomes  $Y_1$  for n units. Then intervene to set the supplement to the standard (A = 0) and generate counterfactual outcomes  $Y_0$  for n units.
  - 6. Create a data frame X to hold the values of the endogenous factors (W1, W2, A, Y) and the counterfactual outcomes  $Y_1$  and  $Y_0$ . The rows are the n children and the columns are their characteristics. Use the head and summary to examine the resulting data.
  - 7. Evaluate the causal parameter  $\Psi^F(P_{U,X})$ .

## 3 Defining the target causal parameter with a working MSM

Now suppose we are interested in knowing if age in years V modifies the effect of RUTF A on weight gain Y. As before, W1 is an indicator of access to potable water and W2 is an indicator of having an infectious disease within two weeks of the study initiation.

Consider the following SCM  $\mathcal{M}^F$ :

Endogenous nodes: X = (V, W1, W2, A, Y)

Exogenous nodes:  $U = (U_V, U_{W1}, U_{W2}, U_A, U_Y) \sim P_U$ 

Structural equations F:

$$V = f_V(U_V)$$

$$W1 = f_{W1}(U_{W1})$$

$$W2 = f_{W2}(V, W1, U_{W2})$$

$$A = f_A(V, W1, W2, U_A)$$

$$Y = f_Y(V, W1, W2, A, U_Y)$$

We have made an exclusion restriction that age V does not effect access to potable water W1.

Let us summarize how the counterfactual outcome changes as a function of the intervention and age with the following *working* marginal structural model:

$$\beta(P_{U,X}|m) = \operatorname{argmin}_{\beta'} E_{U,X} \left[ \sum_{a \in \mathcal{A}} (Y_a - m(a, V|\beta'))^2 \right]$$
$$m(a, V|\beta) = \beta_0 + \beta_1 a + \beta_2 V + \beta_3 a^* V$$

Then the target parameter  $\beta$  is the defined as a projection of the true causal curve onto a working model. Specifically,  $\beta$  is the set of coefficient that minimize the sum of squared residuals between the counterfactuals  $Y_a$  and the model  $m(a, V | \beta)$  for all possible exposure levels  $a \in \mathcal{A}$ .

Based on our knowledge of the data generating system, as represented in  $\mathcal{M}^F$ , a linear working MSM with an interaction term may or may not be a good summary of how the effect of RUTF on the counterfactual average weight gain is modified by age.

#### 3.1 A specific data generating process:

Consider a new data generating process (one of many compatible with the above SCM). Suppose that the each of the exogenous factors is drawn independently from following distributions:

$$U_V \sim Uniform(0,3)$$

$$U_{W1} \sim Uniform(0,1)$$

$$U_{W2} \sim Uniform(0,1)$$

$$U_A \sim Uniform(0,1)$$

$$U_V \sim Normal(\mu = 0, \sigma^2 = 0.1^2)$$

Given the exogenous U, the endogenous variables are deterministically generated as

$$\begin{split} V &= 2 + U_V \\ W1 &= \mathbb{I}[U_{W1} < 0.2] \\ W2 &= \mathbb{I}[U_{W2} < expit(0.5^*W1)] \\ A &= \mathbb{I}[U_A < expit(W1^*W2 + V/5)] \\ Y &= 2^*A + 0.3^*W1 + 2^*A^*W2 + 0.5^*A^*V + U_Y \end{split}$$

- 1. For n=5000 children, generate the exogenous factors U and the pre-intervention covariates (V,W1,W2). Then set A=1 to generate the counterfactual weight gain under RUTF  $Y_1$ . Likewise, set A=0 to generate the counterfactual weight gain under the standard supplement  $Y_0$ .
- 2. Create a data frame X.msm consisting of age V, the set treatment levels a and the corresponding outcomes  $Y_a$ .

$$X_{MSM} = (V, a, Y_a) = \begin{pmatrix} V(1) & 1 & Y_1(1) \\ V(2) & 1 & Y_1(2) \\ \vdots & \vdots & \vdots \\ V(n) & 1 & Y_1(n) \\ V(1) & 0 & Y_0(1) \\ V(2) & 0 & Y_0(2) \\ \vdots & \vdots & \vdots \\ V(n) & 0 & Y_0(n) \end{pmatrix}$$

where V(i) and  $Y_a(i)$  denote the age and counterfactual outcome for the  $i^{th}$  subject. See R lab 1 for a similar example.

- 3. Evaluate the target causal parameter. We have defined the target parameter using the least square projection (i.e. with the L2 loss function). Use the glm function to fit the coefficients of the working MSM. Specifically, regress the counterfactual outcomes  $Y_a$  on a and V according to the working MSM. Be sure to specify the argument: data=X.msm.
- 4. Interpret the results.

#### References

World Health Organization (WHO), World Food Programme (WFP), United Nations System Standing Committee on Nutrition (SCN), and United Nations Children's Fund (UNICEF). Community-based management of severe acute malnutrition. WHO/WFP/SCN/UNICEF, Geneva/Rome/Geneva/New York, 2007.