

# Lecture 2 - Selection on Observables, DAGs, & Bad Controls

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Treatment Effects: The Basics

## A New Twist on the Disease Example<sup>1</sup>

	$D$	$Y$	$Y_0$	$Y_1$	$X$
Aiden	0	1	1	1	Young
Bella	0	1	1	1	Young
Caden	0	1	1	1	Young
Dakota	1	1	1	1	Young
Ethel	0	0	0	1	Old
Floyd	0	0	0	0	Old
Gladys	0	0	0	0	Old
Herbert	1	1	0	1	Old
Irma	1	0	0	0	Old
Julius	1	0	0	0	Old

Warmup Exercise: Calculate

1. ATE
2.  $\mathbb{E}(Y|D=1) - \mathbb{E}(Y|D=0)$
3. TOT
4. Selection Bias

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<sup>1</sup>Different people / potential outcomes from last time: no allergic!

```
library(tidyverse)

people <- c("Aiden", "Bella", "Carter", "Dakota", "Ethel", "Floyd",
            "Gladys", "Herbert", "Irma", "Julius")

x <- c("young", "young", "young", "young", "old", "old",
       "old", "old", "old", "old")

y0 <- c(1, 1, 1, 1, 0, 0, 0, 0, 0, 0)
y1 <- c(1, 1, 1, 1, 1, 0, 0, 1, 0, 0)
d <- c(0, 0, 0, 1, 0, 0, 0, 1, 1, 1)
y <- (1 - d) * y0 + d * y1

tbl <- tibble(name = people, d, y, y0, y1, x)
rm(y0, y1, d, y, x, people)
```

```
# ATE
ATE <- tbl |>
  summarize(mean(y1 - y0)) |>
  pull()
```

ATE

```
## [1] 0.2
```

```
#  $E(Y/D=1)$  and  $E(Y/D=0)$ 
means <- tbl |>
  group_by(d) |>
  summarize(y_mean = mean(y))
```

```
means
```

```
## # A tibble: 2 x 2
##       d y_mean
##   <dbl> <dbl>
## 1     0   0.5
## 2     1   0.5
```

```
# Naive difference of means
```

```
naive <- means |>
```

```
  pull(y_mean) |>
```

```
  diff()
```

```
naive
```

```
## [1] 0
```

```
# TOT
```

```
TOT <- tbl |>  
  filter(d == 1) |>  
  summarize(mean(y1 - y0)) |>  
  pull()
```

```
TOT
```

```
## [1] 0.25
```

```
# Selection Bias
```

```
SB <- tbl |>
```

```
  group_by(d) |>
```

```
  summarize(y0_mean = mean(y0)) |>
```

```
  pull(y0_mean) |>
```

```
  diff()
```

```
SB
```

```
## [1] -0.25
```



## Solution

```
# Everything we've calculated
```

```
c(ATE = ATE, naive = naive, TOT = TOT, SB = SB)
```

```
##    ATE naive    TOT    SB
```

```
##  0.20  0.00  0.25 -0.25
```

- ▶ This revised version of the disease example *still* features selection into treatment.
- ▶ As a sanity check, notice that our results satisfy the “Fundamental Decomposition”

$$\underbrace{\mathbb{E}(Y|D=1) - \mathbb{E}(Y|D=0)}_{\text{Observed Difference of Means}} = \underbrace{\mathbb{E}(Y_1 - Y_0|D=1)}_{\text{TOT}} + \underbrace{[\mathbb{E}(Y_0|D=1) - \mathbb{E}(Y_0|D=0)]}_{\text{Selection Bias}}$$

## Conditional Average Treatment Effects (CATEs)

	$D$	$Y$	$Y_0$	$Y_1$	$X$
Aiden	0	1	1	1	Young
Bella	0	1	1	1	Young
Caden	0	1	1	1	Young
Dakota	1	1	1	1	Young
Ethel	0	0	0	1	Old
Floyd	0	0	0	0	Old
Gladys	0	0	0	0	Old
Herbert	1	1	0	1	Old
Irma	1	0	0	0	Old
Julius	1	0	0	0	Old

### Intuition

How do treatment effects vary with observed characteristics  $X$ ?

### Definition

$$\text{CATE}(x) \equiv \mathbb{E}(Y_1 - Y_0 | X = x)$$

### Exercise

1. Compute  $\text{CATE}(\text{Young})$
2. Compute  $\text{CATE}(\text{Old})$
3. Relate these to the *overall* ATE.

Solution: No treatment effect for Young; positive effect for Old.

```
# Conditional ATEs  
tbl |>  
  group_by(x) |>  
  summarize(CATE = mean(y1 - y0))
```

```
## # A tibble: 2 x 2  
##   x      CATE  
##   <chr> <dbl>  
## 1 old   0.333  
## 2 young 0
```

But how can we relate the CATEs to the overall ATE of 0.2?

## Recall: Properties of Conditional Expectation $\mathbb{E}(W|X = x)$

### Definition

$$\mathbb{E}(W|X = x) \equiv \sum_{\text{all } w} w \cdot \mathbb{P}(W = w|X = x)$$

### Linearity

$$\mathbb{E}(cW|X = x) = c\mathbb{E}(W|X = x)$$

$$\mathbb{E}(W + Z|X = x) = \mathbb{E}(W|X = x) + \mathbb{E}(Z|X = x)$$

# The Law of Iterated Expectations<sup>2</sup>

## In Words

The overall average is the sum of the group averages weighted by relative group size.

## In Mathematics

$$\mathbb{E}(W) = \mathbb{E}_X[\mathbb{E}(W|X)] \equiv \sum_{\text{all } x} \mathbb{E}(W|X = x)\mathbb{P}(X = x)$$

## Example

$$\mathbb{E}(Y_1 - Y_0) = \mathbb{E}(Y_1 - Y_0|X = \text{Young})\mathbb{P}(\text{Young}) + \mathbb{E}(Y_1 - Y_0|X = \text{Old})\mathbb{P}(\text{Old})$$

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<sup>2</sup>See [this note](#) for a proof and more discussion.

# The Law of Iterated Expectations

```
group_stats <- tbl |>  
  group_by(x) |>  
  summarize(CATE_x = mean(y1 - y0), count = n()) |>  
  mutate(p_x = count / sum(count))
```

```
group_stats
```

```
## # A tibble: 2 x 4  
##   x      CATE_x count  p_x  
##   <chr>   <dbl> <int> <dbl>  
## 1 old     0.333     6  0.6  
## 2 young   0         4  0.4
```

# The Law of Iterated Expectations

```
#  $E[E(Y1 - Y0 \mid X)]$   
group_stats |>  
  summarize(sum(CATE_x * p_x)) |>  
  pull()
```

```
## [1] 0.2
```

```
#  $E(Y1 - Y0)$   
tbl |>  
  summarize(mean(y1 - y0)) |>  
  pull()
```

```
## [1] 0.2
```

## Wait, what is this lecture supposed to be about again?

	$D$	$Y$	$Y_0$	$Y_1$	$X$
Aiden	0	1	1	1	Young
Bella	0	1	1	1	Young
Caden	0	1	1	1	Young
Dakota	1	1	1	1	Young
Ethel	0	0	0	1	Old
Floyd	0	0	0	0	Old
Gladys	0	0	0	0	Old
Herbert	1	1	0	1	Old
Irma	1	0	0	0	Old
Julius	1	0	0	0	Old

### Disease Example

Selection into treatment: naive comparison of means doesn't give ATE.

### Iterated Expectations

If we learn the CATEs, we can average them to get the ATE.

### Idea

Maybe if we **adjust for age**, we can address the selection problem.

### Selection-on-observables

A pair of assumptions that shows us when this idea will work out.



## Propensity Score: Who is more likely to be treated?

	$D$	$Y$	$Y_0$	$Y_1$	$X$
Aiden	0	1	1	1	Young
Bella	0	1	1	1	Young
Caden	0	1	1	1	Young
Dakota	1	1	1	1	Young
Ethel	0	0	0	1	Old
Floyd	0	0	0	0	Old
Gladys	0	0	0	0	Old
Herbert	1	1	0	1	Old
Irma	1	0	0	0	Old
Julius	1	0	0	0	Old

### Propensity Score $p(x)$

- ▶  $p(x) \equiv \mathbb{P}(D = 1|X = x)$
- ▶ Share treated by age group.

### Exercise

Calculate  $p(\text{Young})$  and  $p(\text{Old})$

## Propensity Score: Who is more likely to be treated?

	$D$	$Y$	$Y_0$	$Y_1$	$X$
Aiden	0	1	1	1	Young
Bella	0	1	1	1	Young
Caden	0	1	1	1	Young
Dakota	1	1	1	1	Young
Ethel	0	0	0	1	Old
Floyd	0	0	0	0	Old
Gladys	0	0	0	0	Old
Herbert	1	1	0	1	Old
Irma	1	0	0	0	Old
Julius	1	0	0	0	Old

### Propensity Score $p(x)$

- ▶  $p(x) \equiv \mathbb{P}(D = 1|X = x)$
- ▶ Share treated by age group.

### Exercise

Calculate  $p(\text{Young})$  and  $p(\text{Old})$

### Solution

$$p(\text{Young}) = 1/4, \quad p(\text{Old}) = 1/2$$

Old people are more likely to take treatment and more likely to die with or without it!  
*Age confounds* the relationship between  $D$  and  $Y$ .

# Wishful Thinking

Wouldn't it be great if  $\text{CATE}(x) = \mathbb{E}(Y|D = 1, X = x) - \mathbb{E}(Y|D = 0, X = x)$ ?

	$D$	$Y$	$Y_0$	$Y_1$	$X$
Aiden	0	1	1	1	Young
Bella	0	1	1	1	Young
Caden	0	1	1	1	Young
Dakota	1	1	1	1	Young
Ethel	0	0	0	1	Old
Floyd	0	0	0	0	Old
Gladys	0	0	0	0	Old
Herbert	1	1	0	1	Old
Irma	1	0	0	0	Old
Julius	1	0	0	0	Old

## Stratify by Age

- ▶ Perhaps *within* age groups there is no selection problem.
- ▶ If so, learn the CATE for each group.

## Exercise

Check if this claim holds in our example.

## Stratifying by age works in this example

$$\text{CATE}(x) = \mathbb{E}(Y|D = 1, X = x) - \mathbb{E}(Y|D = 0, X = x)$$

```
tbl |>
  group_by(x) |>
  summarize(CATE = mean(y1-y0)) |>
  knitr::kable(digits = 2)
```

x	CATE
old	0.33
young	0.00

```
tbl |>
  group_by(x, d) |>
  summarize(y_mean = mean(y)) |>
  knitr::kable(digits = 2)
```

x	d	y_mean
old	0	0.00
old	1	0.33
young	0	1.00
young	1	1.00

### Final Step

$$\text{ATE} = \text{CATE}(\text{Young})\mathbb{P}(\text{Young}) + \text{CATE}(\text{Old})\mathbb{P}(\text{Old}) = 2/5 \times 0 + 3/5 \times 1/3 = 0.2$$

This worked because our example satisfies two key assumptions.

### Definition: Conditional Independence

- ▶  $W \perp\!\!\!\perp Z | R \iff \mathbb{P}(W, Z | R) = \mathbb{P}(W | R) \cdot \mathbb{P}(Z | R).$
- ▶ See chapter 2 of the [lecture notes](#) and [this video](#) for more details.

### Assumption 1 – Selection on Observables:<sup>3</sup> $D \perp\!\!\!\perp (Y_0, Y_1) | \mathbf{X}$

- ▶ Implies that people with the same observed characteristics have the same potential outcomes, on average, regardless of whether they were *actually* treated or not.
- ▶ See [my blog post](#) for more discussion of this assumption.

### Assumption 2 – Overlap: $0 < p(\mathbf{x}) < 1$ for all values of $\mathbf{x}$ .

- ▶ Recall that  $p(\mathbf{x}) \equiv \mathbb{P}(D = 1 | \mathbf{X} = \mathbf{x})$ .
- ▶ Among people with given characteristics  $\mathbf{x}$ , some but not all are treated.

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<sup>3</sup>This can be weakened to  $\mathbb{E}(Y_d | D, \mathbf{X}) = \mathbb{E}(Y_d | \mathbf{X})$  for  $d = 0, 1$ , i.e. *mean* independence.

# The approach we used above is called “Regression Adjustment”

## Intuition

- ▶ Form **strata** based on common value  $\mathbf{x}$  of covariates.
- ▶ Within each stratum, compute the average outcome among treated and untreated.
- ▶ Subtract these to estimate  $\text{CATE}(\mathbf{x})$ , the stratum-specific ATE.
- ▶ Average the stratum-specific ATEs, weighting by the fraction of people in each.

## Main Result<sup>4</sup>

Under the selection on observables and overlap assumptions:

$$\text{CATE}(\mathbf{x}) \equiv \mathbb{E}(Y_1 - Y_0 | \mathbf{X} = \mathbf{x}) = \mathbb{E}(Y | D = 1, \mathbf{X} = \mathbf{x}) - \mathbb{E}(Y | D = 0, \mathbf{X} = \mathbf{x}).$$

By iterated expectations,  $\text{ATE} = \mathbb{E}[\text{CATE}(\mathbf{X})]$  so we can learn the ATE.

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<sup>4</sup>See my video for the proof: <https://expl.ai/BJWTFKG>

# Alternative Approach: Propensity Score Weighting

## Intuition

- ▶ Disease example: older people are more likely to be treated and more likely die regardless of whether they are treated.
- ▶ *Too few* young people among the treated and *too few* old people among the untreated relative to what we'd have in a randomized experiment.
- ▶ To compensate: **upweight** treated young people untreated old people when computing average outcomes for the treated and untreated groups.

## Main Result<sup>5</sup>

Under the selection on observables and overlap assumptions:

$$\text{ATE} = \mathbb{E}[w_1(\mathbf{X}) \cdot Y] - \mathbb{E}[w_0(\mathbf{X}) \cdot Y], \quad w_1(\mathbf{X}) = \frac{D}{p(\mathbf{X})}, \quad w_0(\mathbf{X}) = \frac{1 - D}{1 - p(\mathbf{X})}$$

---

<sup>5</sup>See my video for the proof: <https://expl.ai/BASRRGX>.

## Propensity Score Weighting in Our Example

```
psw <- tbl |>  
  group_by(x) |>  
  mutate(pscore = mean(d)) |>  
  ungroup() |>  
  mutate(weight1 = d / pscore,  
         weight0 = (1 - d) / (1 - pscore))
```



## Propensity Score Weighting in Our Example

```
psw |> select(-y0, -y1)
```

```
## # A tibble: 10 x 7
```

##	name	d	y	x	pscore	weight1	weight0
##	<chr>	<dbl>	<dbl>	<chr>	<dbl>	<dbl>	<dbl>
##	1 Aiden	0	1	young	0.25	0	1.33
##	2 Bella	0	1	young	0.25	0	1.33
##	3 Carter	0	1	young	0.25	0	1.33
##	4 Dakota	1	1	young	0.25	4	0
##	5 Ethel	0	0	old	0.5	0	2
##	6 Floyd	0	0	old	0.5	0	2
##	7 Gladys	0	0	old	0.5	0	2
##	8 Herbert	1	1	old	0.5	2	0
##	9 Irma	1	0	old	0.5	2	0
##	10 Julius	1	0	old	0.5	2	0

## Propensity Score Weighting in Our Example

```
psw |> summarize(sum(weight1), sum(weight0))
```

```
## # A tibble: 1 x 2
##   `sum(weight1)` `sum(weight0)`
##           <dbl>           <dbl>
## 1             10             10
```

```
psw |>
  summarize(mean(weight1 * y) - mean(weight0 * y)) |>
  pull()
```

```
## [1] 0.2
```

ATE

```
## [1] 0.2
```

# How can we evaluate the assumptions?

## Overlap

- ▶ Since  $D$  and  $\mathbf{X}$  are observed, we can check this directly.
- ▶ The more characteristics we put into  $\mathbf{X}$ , the harder it becomes to satisfy overlap.

## Selection on Observables

- ▶ Without outside data or extra assumptions, there's no way to check this.
- ▶ Else equal, the more characteristics we put into  $\mathbf{X}$ , the more plausible this becomes.

## Bad Controls

- ▶ More is **not always better**. Some characteristics definitely **shouldn't** go into  $\mathbf{X}$ .
- ▶ This is what we'll discuss for the rest of the lecture!

## The Birthweight Paradox<sup>6</sup>

*The analyses in Yerushalmy's paper indicated that, among low birthweight infants of less than 2500g, maternal smoking was associated with lower infant mortality. The results have been replicated in a number of studies and populations, and these seemingly paradoxical associations are now often referred to as the 'birthweight paradox'*

- ▶  $D = 1$  mother smokes while pregnant
- ▶  $Y = 1$  infant dies
- ▶  $X = 1$  low birthweight

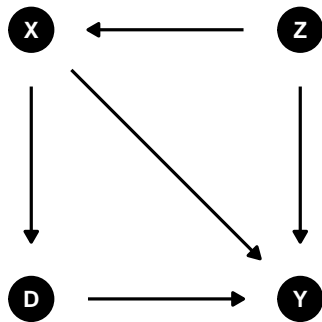
Should we adjust for birthweight when studying the causal effect of maternal smoking on infant mortality?

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<sup>6</sup>Quote from VanderWeele (2014).

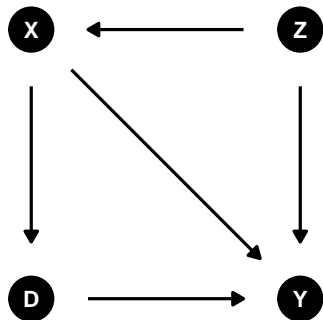
## Graph: set of **nodes** connected by **edges**.

- ▶ Two nodes are **adjacent** if connected by an edge.
- ▶ Edges can be **directed** (figure) or **undirected**.
- ▶ Directed edge points from **parent** to **child**.
- ▶ **Directed graph** has only directed edges.
- ▶ **Path**: sequence of connected vertices.
- ▶ **Directed Path**: a path that “obeys one-way signs”
- ▶ Directed path points from **ancestor** to **descendant**.
- ▶ **Cycle**: directed path that returns to starting node.
- ▶ **Acyclic Graph**: a graph without any cycles.



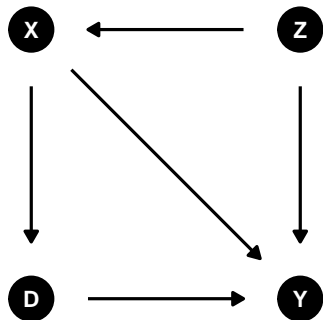
## Exercise

1. Is this graph directed?
2. Is this graph acyclic?
3. Are  $Z$  and  $D$  adjacent?
4. List all paths between  $D$  and  $Y$ .
5. List all *directed* paths from  $D$  to  $Y$ .



## Exercise

1. Is this graph directed?
2. Is this graph acyclic?
3. Are  $Z$  and  $D$  adjacent?
4. List all paths between  $D$  and  $Y$ .
5. List all *directed* paths from  $D$  to  $Y$ .



## Solution

1. Yes: all edges in the graph are directed.
2. Yes: there is no directed path that takes you back to the node where you started.
3.  $Z$  and  $D$  are not adjacent: there is no edge between them.
4. There are three:  $(D \rightarrow Y)$ ,  $(D \leftarrow X \rightarrow Y)$ , and  $(D \leftarrow X \leftarrow Z \rightarrow Y)$ .
5. There is only one:  $(D \rightarrow Y)$ .

# Graphical Causal Models with DAGs

## Graphical Causal Model

Directed edges encode assumptions about the “flow” of causation (edge) or lack thereof (no edge).

## Potential Cause

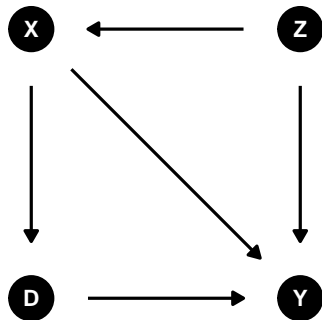
If  $D$  is an ancestor of  $Y$ , it is a **potential cause** of  $Y$ .

## Direct Cause

If  $D$  is a parent of  $Y$ , it is a **direct cause** of  $Y$ .

## Back Door Criterion

Can we learn  $(D \rightarrow Y)$  using selection on observables? If so, what covariates should we adjust for?





# “Draw Your Assumptions” – Birthweight Example

## Birthweight Paradox

- ▶  $Y$  mortality
- ▶  $X$  birthweight
- ▶  $D$  maternal smoking
- ▶  $U$  unobserved: e.g. malnutrition / birth defect

## Should we condition on $X$ ?

Can't adjust for  $U$ : unobserved. Should we adjust for birthweight when studying (smoking  $\rightarrow$  mortality) effect?

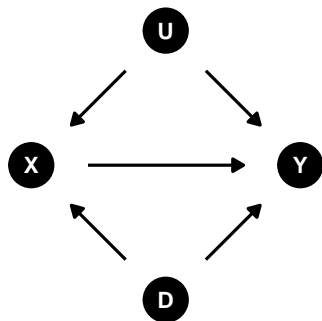


Figure 1: A possible model for the birthweight example.

# Causal and Non-causal Paths

## Causal Path

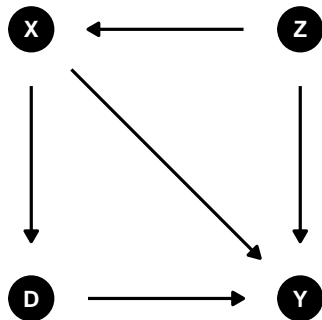
Directed path between treatment and outcome; always starts with an edge pointing *out* of treatment.

## Backdoor Path

**Noncausal path** path between treatment and outcome; always starts with an edge pointing *into* treatment.

## Exercise

1. List all causal paths from  $D$  to  $Y$ .
2. List all backdoor paths between  $D$  and  $Y$ .



# Causal and Non-causal Paths

## Causal Path

Directed path between treatment and outcome; always starts with an edge pointing *out* of treatment.

## Backdoor Path

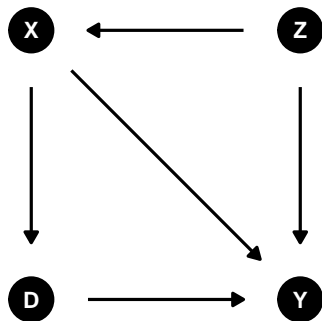
**Noncausal path** path between treatment and outcome; always starts with an edge pointing *into* treatment.

## Exercise

1. List all causal paths from  $D$  to  $Y$ .
2. List all backdoor paths between  $D$  and  $Y$ .

## Solution

1.  $(D \rightarrow Y)$
2.  $(D \leftarrow X \rightarrow Y)$ , and  $(D \leftarrow X \leftarrow Z \rightarrow Y)$ .



# Graph Surgery

Observational Distribution:  $\mathbb{P}(Y|D = d)$

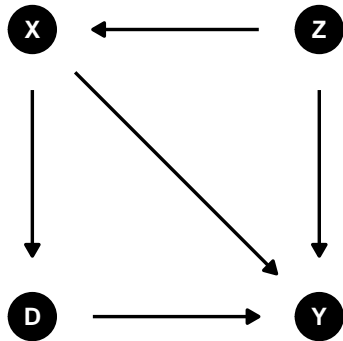
- ▶ *Actual* distribution of  $Y$  among people observed to have  $D = d$ .
- ▶ DAG shows the observational distribution and how it arises from our causal model.

Interventional Distribution:  $\mathbb{P}(Y|\text{do}(D = d))$

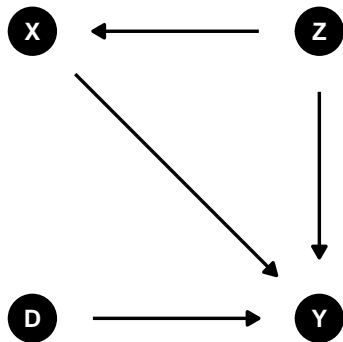
- ▶ Distribution of  $Y$  that we *would obtain* if we *intervened* and set  $D = d$  for everyone.
- ▶ Obtain from DAG by removing edges pointing into  $D$ .
- ▶ Causal effect of interest is the path from  $D$  to  $Y$  in this “modified” graph.
- ▶  $\text{ATE} = \mathbb{E}(Y_1 - Y_0) = \mathbb{E}(Y|\text{do}(D = 1)) - \mathbb{E}(Y|\text{do}(D = 0))$
- ▶ This is what an experiment does: removes all causes of treatment!

## Graph Surgery: Delete Edges Pointing Into $D$

Observational Distribution



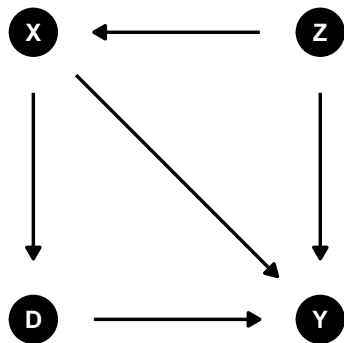
Interventional Distribution:  $\text{do}(D)$



Interventional DAG has *no backdoor paths*. To use the observational distribution for causal inference, we will attempt to “block” the backdoor paths by conditioning.

## Exercise: Draw the DAG for the $\text{do}(X)$ Interventional Distribution

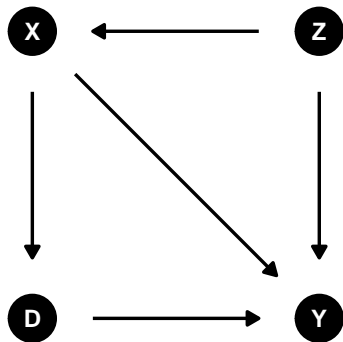
Observational Distribution



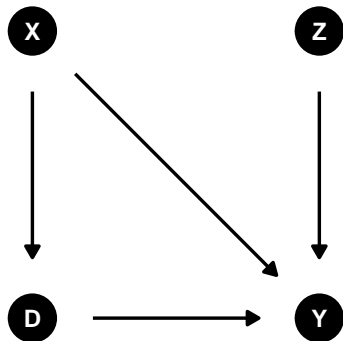
Interventional Distribution:  $\text{do}(X)$

## Exercise: Draw the DAG for the $\text{do}(X)$ Interventional Distribution

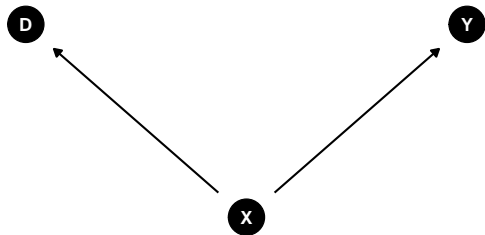
Observational Distribution



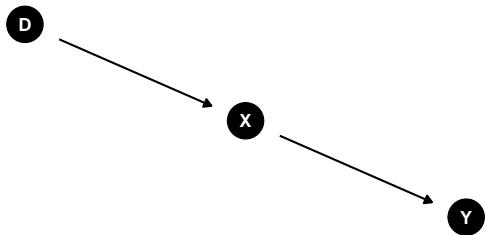
Interventional Distribution:  $\text{do}(X)$



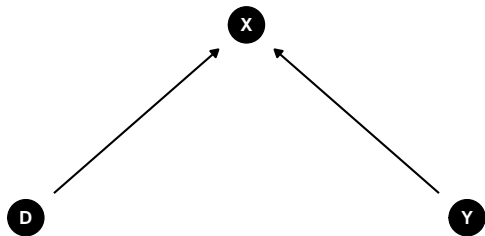
Fork



Pipe



Collider



Descendant

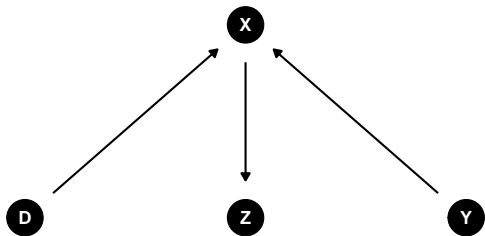


Figure 2: The Four Basic DAGs



## Fork = Common Cause / Confounder

### Confounder = Good Control

- ▶  $D$  and  $Y$  are dependent: **open** path between them.
- ▶ But  $D$  doesn't cause  $Y$ :  $X$  causes  $D$  and  $Y$ .
- ▶ Conditioning on  $X$  **blocks the path** from  $D$  to  $Y$ .

### Example

$D$  is shoe size,  $Y$  is reading ability,  $X$  is age.

### Fork Rule

If  $X$  is a common cause of  $D$  and  $Y$  and there is only one path between  $D$  and  $Y$ , then  $D \perp\!\!\!\perp Y | X$ .

“Condition on things that cause both  $D$  and  $Y$ .”

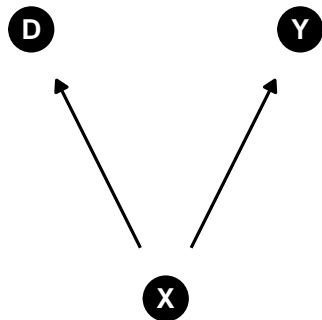


Figure 3:  $X$  is a confounder.  
Good control for  $D \rightarrow Y$ .

# Pipe = Mediator

## Mediator = Bad Control

- ▶  $D$  and  $Y$  are dependent: **open** path between them.
- ▶  $D$  causes  $Y$  through its causal effect on  $X$ .
- ▶ Conditioning on  $X$  **blocks the path** from  $D$  to  $Y$ .

## Example

$D$  is SAT coaching,  $X$  is SAT score,  $Y$  is college acceptance

## Pipe Rule

If there is only one directed path from  $D$  to  $Y$  and  $X$  intercepts that path, then  $D \perp\!\!\!\perp Y | X$ .

“Don’t condition on an intermediate outcome.”

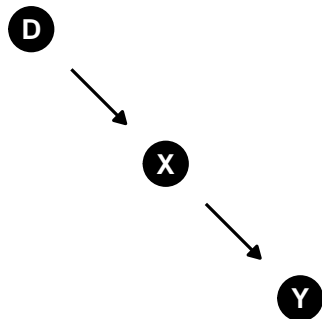


Figure 4:  $X$  is a mediator.  
Bad control for  $D \rightarrow Y$ .

## Collider = Common Effect

### Common Effect = Bad Control

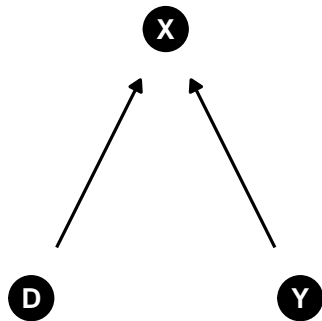
- ▶  $D$  and  $Y$  are independent: **blocked** path between them.
- ▶  $D$  and  $Y$  both cause  $X$ , but neither causes the other.
- ▶ Conditioning on  $X$  **unblocks** the path between  $D$  and  $Y$ .

### Example

$D, Y$  indep. coins;  $X$  = bell rings if at least one HEADS.

### Collider Rule

If there is only one path between  $D$  and  $Y$  and  $X$  is their common effect, then  $D \perp\!\!\!\perp Y$  but  $D \not\perp\!\!\!\perp Y | X$ .



# Why are brilliant researchers lousy teachers?

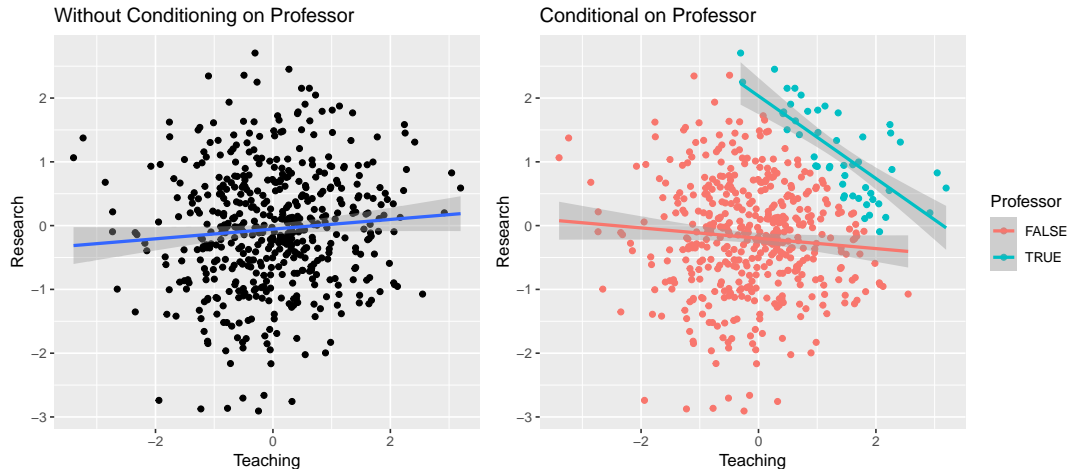


Figure 5: Teaching and Research are independent  $N(0, 1)$ . Professor is a collider: TRUE if the sum of Research and Teaching is in the top 10th percentile of all observations.

# The Descendant

## Descendant Rule

Conditioning on a descendant  $Z$  of  $X$  has the effect of *partially conditioning* on  $X$  itself.

## Collider Corollary

In the figure,  $D \perp\!\!\!\perp Y$  but  $D \not\perp\!\!\!\perp Y | W$ .

## Discussion

- ▶ What this means depends on the situation.
- ▶ In the figure  $X$  is a collider.
- ▶ Could also have  $X$  as the middle node in pipe/fork.
- ▶ Pipe/fork: adjust for  $W \Rightarrow$  **partially block**  $D, Y$  path.

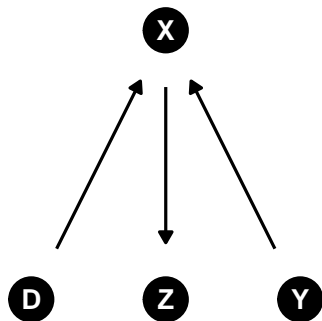


Figure 6:  $Z$  is a descendant of the collider  $X$ . Bad control for  $D \rightarrow Y$

Exercise: Find all examples of the four basic DAGs.

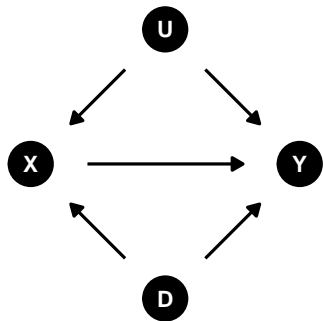


Figure 7: Birthweight DAG

Exercise: Find all examples of the four basic DAGS.

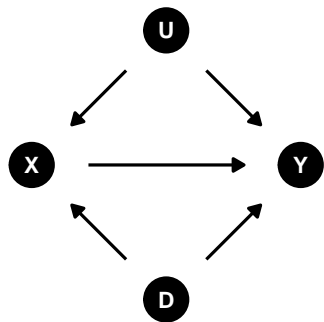


Figure 7: Birthweight DAG

### Solution

1. **Forks:**  $X \leftarrow U \rightarrow Y$  and  $X \leftarrow D \rightarrow Y$
2. **Pipe:**  $D \rightarrow X \rightarrow Y$
3. **Colliders:**  $D \rightarrow X \leftarrow U$  and  $D \rightarrow Y \leftarrow U$ .
4. **Descendant:**  $Y$  is a descendant of the collider  $D \rightarrow X \leftarrow U$ .

# Blocking and Opening Paths in the Four Basic DAGs

## Fork

$D \leftarrow X \rightarrow Y$  is an **open** path; conditioning on the **confounder**  $X$  **blocks** the path.

## Pipe

$D \rightarrow X \rightarrow Y$  is an **open** path; conditioning on the **mediator**  $X$  **blocks** the path.

## Collider

$D \rightarrow X \leftarrow Y$  is a **blocked** path; conditioning on the **collider**  $X$  **opens** the path.

## Descendant

Conditioning on the descendant of a **confounder** / **mediator** partially blocks the open path. Conditioning on the descendant of a **collider** partially opens the blocked path.

## Backdoor Criterion

Use what we know about the four basic DAGs to **block** all backdoor paths between  $D$  and  $Y$  in our “big” DAG. Obtain interventional distribution from observational data.



# The Backdoor Criterion

## Recall: Backdoor Path

Noncausal path between  $D$  and  $Y$ ; starts with edge pointing **into**  $D$ .

## Blocked Path

A set of nodes  $X$  **blocks** a path  $p$  if and only if  $p$  contains: (1) a **pipe** or **fork** whose middle node is in  $X$  or (2) a **collider** that is *not* in  $X$  and has no descendants in  $X$ .

## Backdoor Criterion

A set of nodes  $X$  satisfies the back-door criterion relative to  $(D, Y)$  if no node in  $X$  is a descendant of  $D$  and  $X$  blocks every back-door path between  $D$  and  $Y$ .

## A Less Formal Statement of the Back-door Criterion

1. List all the paths that connect treatment and outcome.
2. Check which of them *open*. A path is *open* unless it contains a collider.
3. Check which of them are *back-door paths*: contain an arrow pointing at  $D$ .
4. If there are no open back-door paths, you're done. If not, look for nodes you can condition on to **block** remaining open back-door paths without opening new ones.

Of course we can only condition on *observed* variables!

# Backdoor Theorem = Selection on observables!

## Backdoor Theorem

If  $X$  satisfies the back-door criterion relative to  $(D, Y)$ , then

$$\mathbb{P}(Y = y | \text{do}(D = d)) = \sum_x \mathbb{P}(Y = y | D = d, X = x) \cdot \mathbb{P}(X = x)$$

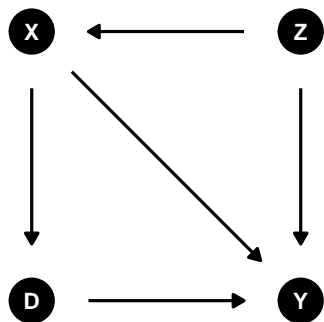
## Counterfactual Interpretation

If  $X$  satisfies the back-door criterion relative to  $(D, Y)$ , then  $Y_d \perp\!\!\!\perp D | X$  for all  $d$ .

## Translating to Potential Outcomes

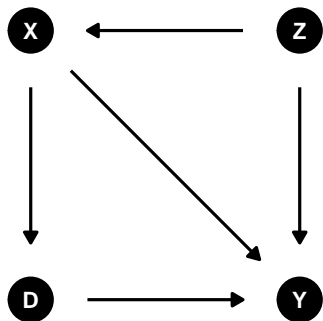
- ▶ The “counterfactuals”  $Y_D$  are our potential outcomes from earlier in this lecture.
- ▶ Back-door criterion implies selection on observables assumption for  $D$  given  $X$ .
- ▶ The formula above is nothing more than **regression adjustment**.

## Exercise: What to adjust for to learn the effect of each intervention?



1. The effect of  $D$  on  $Y$ .
2. The effect of  $X$  on  $Y$ .
3. The effect of  $Z$  on  $Y$ ?

## Exercise: What to adjust for to learn the effect of each intervention?



1. The effect of  $D$  on  $Y$ .
2. The effect of  $X$  on  $Y$ .
3. The effect of  $Z$  on  $Y$ ?

### Solution

1. There are two backdoor paths. In  $(D \leftarrow X \rightarrow Y)$ , the middle node in a fork is  $X$ . In  $(D \leftarrow X \leftarrow Z \rightarrow Y)$  the middle node in a pipe is  $X$ . Adjusting for  $X$  blocks both.
2. The only backdoor path is  $(X \leftarrow Z \rightarrow Y)$ , a fork with  $Z$  as its middle node. Adjusting for  $Z$  blocks this path.
3. There are no arrows pointing into  $Z$ , hence no backdoor paths. We don't have to adjust for anything.

## (Possible) Solution to Birthweight Paradox

*Among low birthweight infants. . . maternal smoking was associated with lower infant mortality.*

### Notation

$Y$  mortality,  $X$  birthweight,  $D$  maternal smoking, and  $U$  unobserved: e.g. malnutrition / birth defect

### Birthweight is a bad control!

- ▶ Can't adjust for  $U$  because it's unobserved.
- ▶ No arrows pointing into  $D$  so no backdoor paths.
- ▶  $X$  is a collider: conditioning on it creates spurious dependence between  $D$  and  $U$ .

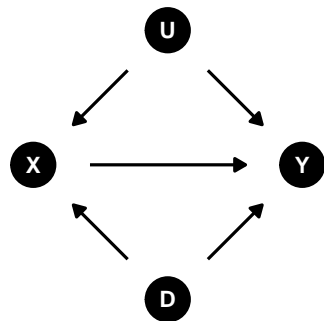


Figure 8: If we believe this model,  $X$  is a bad control.

Low birthweight infants whose mothers did *not* smoke must have an unfavorable value of  $U$ , making it appear as though smoking has health benefits.