#### **Class 10 Randomized Controlled Trials**

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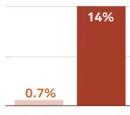
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# Section 1

**Gold Standard of Causal Inference** 

## Revisit of ATE, ATT, and ATU in BMW Case: Targeted Ads

# If BMW ads are not randomized to consumers but targeted at interested consumers

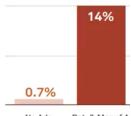


No Ads Ret. & Manuf A

- Observed outcomes in data
  - $E[Y^1|D=1]=14\%$
  - $E[Y^0|D=0] = 0.7\%$
- Counterfactual outcomes in parallel universe
  - $E[Y^0|D=1]=5\%$
  - $E[Y^1|D=0]=2.7\%$
- Average outcome for treated Average outcome for untreated
  - $\bullet = E[Y^1|D=1] E[Y^0|D=0] = 13.3\%$
  - $\bullet = (E[Y^1|D=1] E[Y^0|D=1]) + (E[Y^0|D=1] E[Y^0|D=0])$
  - = ATT + Selection Bias
- ATT =  $E[Y^1|D=1] E[Y^0|D=1] = 14\% 5\% = 9\%$
- ATU =  $E[Y^1|D=0] E[Y^0|D=0] = 2.7\% 0.7\% = 2\%$
- Selection Bias =  $E[Y^0|D=1] E[Y^0|D=0] = 5\%$  0.7% = 4.3%
- ATE = 0.5 \* ATT + 0.5 \* ATU = 5.5%

## Revisit of ATE, ATT, and ATU in BMW Case: Randomized Ads

#### If BMW ads are randomized to consumers



No Ads Ret. & Manuf A

- Observed outcomes in data
  - $E[Y^1|D=1]=14\%$
  - $E[Y^0|D=0]=0.7\%$
- Counterfactual outcomes in parallel universe
  - $E[Y^0|D=1] = 0.7\%$
  - $E[Y^1|D=0] = 14\%$
- Average outcome for treated Average outcome for untreated
  - $\bullet = E[Y^1|D=1] E[Y^0|D=0] = 13.3\%$
  - $\bullet \ = \ (\underline{E[Y^1|D=1]} \underline{E[Y^0|D=1]}) + (E[Y^0|D=1] E[Y^0|D=0])$
  - $\bullet = \mathsf{ATT} + \mathsf{Selection} \; \mathsf{Bias}$
- ATT =  $E[Y^1|D=1] E[Y^0|D=1] = 14\%$  0.7% = 13.3%
- ATU =  $E[Y^1|D=0] E[Y^0|D=0] = 14\% 0.7\% = 13.3\%$
- Selection Bias =  $E[Y^0|D=1] E[Y^0|D=0] = 0.7\%$  0.7% = 0%
- ATE = 0.5 \* ATT + 0.5 \* ATU = 13.3%

## Revisit of Basic Identity of Causal Inference

- After assigning individuals into the treatment group and control group, we also observe the outcome for each individual in both groups.
- We can decompose the **observed** outcome of a treatment into two effects
- i Basic Identity of Causal Inference

Average outcome for treated - Average outcome for untreated

- = [Average outcome for treated Average counterfactual outcome for treated] + [Average counterfactual outcome for treated Average outcome for untreated]
- = ATT + Selection Bias

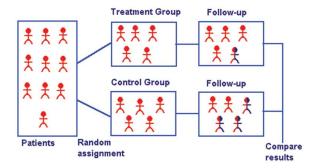
## Random Assignment of Individuals

- Basic Identity of Causal Inference shows why randomized controlled trials are the gold standard for causal inference: If the treated group is a random sample of the population,
  - the first term is an estimate of the causal impact of the treatment on the population
  - the second term has an expected value of zero.
- Then by computing the average difference between the treatment group and control group, we obtain the average treatment effect!

#### **Randomized Controlled Trials**

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A **randomized controlled trial** (RCT) is an experimental form of impact evaluation in which the population receiving the program or policy intervention is chosen *at random* from the eligible population, and a control group is also chosen *at random* from the same eligible population.



# Types of RCTs in Marketing: Based on Location

	Lab Experiment	Field Experiment
Location	In a controlled, laboratory environment	In the field
Internal validity	High	Low
External validity	Low (Hawthorne effect)	High

## Types of RCTs in Marketing: Univariate Testing

# We only vary the level of a single treatment variable (e.g., loyalty program)

- A/B testing (treatment group + control group)
  - Loyalty program
  - No loyalty program
- A/B/N testing (multiple treatment groups + control group)
  - Opint-based loyalty program; points can be redeemd for price vouchers
  - Point-based loyalty program; points can be redeemd for gifts
  - Opint-based loyalty program; points can be redeemd for free top ups
  - No loyalty program

## Types of RCTs in Marketing: Multivariate Testing

We are interested in multiple treatment variables and their interaction effects.

- 2-by-2 factorial design
  - treatment group 1: LP Yes + Promo Yes
  - ullet treatment group 2: LP Yes + Promo No
  - ullet treatment group 3: LP No + Promo Yes
  - ullet control group: LP No + Promo No

# Section 2

# Steps to Run a RCT

### **Motivating Example**

- Tom is considering whether or not to introduce a loyalty program for his bubble tea business. This decision is essentially a cost-benefit analysis
  - Cost: it takes money and time to develop the loyalty program
  - Benefit: it may increase spending and retention rate, and hence future CLV
- Cost can be estimated through budgeting, but how to estimate the benefit from introducing LP?
- How you design the experiment is more an art than a science.

#### Step 1: Decide on the Unit of Randomization

In the first step, we decide the level of granularity random assignment should occur at.

• individual/household/store/city level

#### Step 1: Proposal I

Proposal 1: It decides at random to test 'No' in West London and 'Yes' in East London.

• Do you expect the "at random" to be true randomization?

### Step 1: Proposal II

**Proposal 2**: It randomizes each individual customer to either the 'No' condition or 'Yes' pricing condition.

- Is this true randomization?
- What problems can we still have?

#### Step 1: Pros and Cons of Granularity

#### Disadvantages of granularity:

- Costs and logistics
- Spillovers and crossovers

#### Advantages of granularity:

- Reduces the chance that the unobserved factors matter ex ante
- Reduces the chance that there might be a systematic error/unbalance of covariates

#### **Additional Questions:**

• How can we randomize individualized price discounts to customers?

#### **Step 2: Ensure No Spillover and Crossover Effects**

- Crossover Effects: A crossover occurs when an individual who was supposed to be assigned to one treatment is accidentally exposed to another treatment.
  - Solution: Make sure that the same unit receives the same treatment throughout the experiment
- Spillover effects: The behavior of the treatment group can affect control group as well
  - Solution: Randomize at the level of plausibly isolated social networks such as a community, rather than individual level.

## **Step 2: Ensure No Spillover and Crossover Effects**

Proposal: How should Tom mitigate spillover and crossover effects

#### **Step 3: Decide on Randomization Allocation Scheme**

- Complete Randomization: individuals (or the relevant unit of randomization) are simply allocated at random into a treatment.
  - Most commonly used; easy to implement; no data required ex ante
- Stratified Randomization: individuals are first divided into subsamples based on certain characteristics, and then randomization is conducted in each subsample
  - This stratified technique is useful if a covariate is strongly correlated with an outcome.
  - Limitations: reliable data that would allow such stratification may not be present

**Proposal:** We can use complete randomization as customer purchase history data may not be available.

#### Step 4: Collect Data

- Any field experiment should be aware of the potential need for a large sample size
  - The larger sample size, the higher statistical power for the experiment
  - run a power calculation [link for tutorial] if there is a budget
- Collect both data on the outcome variables of interest and consumer characteristics data

**Proposal:** We need to collect customers' retention rate data and link the retention data with their treatment assignment.

#### **Step 5: Interpreting Results from a Field Experiment**

#### Step 5.1: Randomization check

 We need to check if the treatment group and control group are indifferent and well-balanced in terms of their pre-treatment characteristics.

#### Step 5.2: Analyze the data and estimate the ATE

- t-test to examine the difference in the average outcome between the treatment group and control group. In R, we can use t.test()
- Regression analysis (next week)

### **After-Class Readings**

- (optional) Varian, Hal R. 'Causal Inference in Economics and Marketing'. Proceedings of the National Academy of Sciences 113, no. 27 (5 July 2016): 7310–15.
- (optional) Angrist, Joshua & Pischke, Jörn-Steffen. (2009). Mostly Harmless Econometrics: An Empiricist's Companion.