

# Causal Frameworks

## Applied Econometrics Resources

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## Potential Outcomes

We want to find the effect of a binary treatment  $D$  on an outcome  $Y$ .

Imagine two hypothetical worlds that are identical, except for treatment  $D$ :

- World 0: individual  $i$  does not get the treatment.  $D_i = 0$
- World 1: individual  $i$  gets the treatment  $D_i = 1$ .

Lets imagine their outcome values in each hypothetical world are as follows:

- World 0 no treatment:  $Y_i(0)$ .
- World 1 with treatment  $Y_i(1)$ .

$Y_i(0)$  and  $Y_i(1)$  are called the **potential outcomes** of the hypothetical worlds.

## Causal Effect

The two hypothetical worlds are identical except for treatment D.

Thus, any difference in their outcome values  $Y_i(0)$  and  $Y_i(1)$  must be **caused** by the difference in treatment.

$$\tau_i = Y_i(1) - Y_i(0)$$

**Issue:** there isn't actually two hypothetical worlds.

- In the real world, individual  $i$  either has the treatment  $D_i = 1$ , or does not have the treatment  $D_i = 0$ .
- Thus, we always are missing one of  $Y_i(1)$  or  $Y_i(0)$ . The one we observe is the real  $Y_i$  value. The missing one is called a **counterfactual**.

**Fundamental Problem of Causal Inference:** the causal effect requires us to know both potential outcomes, but we never see both.

## Causal Estimands

$\tau_i$  is the individual causal effect for individual  $i$ . We are often interested in group causal effects:

- ① **Average Treatment Effect (ATE):**

$$\mathbb{E}[\tau_i] = \mathbb{E}[Y_i(1) - Y_i(0)]$$

- ② **Average Treatment Effect on the Treated (ATT):** average for only those who receive treatment.

$$\mathbb{E}[\tau_i | D_i = 1] = \mathbb{E}[Y_i(1) - Y_i(0) | D_i = 1]$$

- ③ **Conditional/Local Average Treatment Effect (CATE/LATE):** average based on some condition of  $X$ .

$$\mathbb{E}[\tau_i | X_i = 1] = \mathbb{E}[Y_i(1) - Y_i(0) | X_i = 1]$$

## Correlation not Causation

Correlation  $\rho$  is when we don't consider potential outcomes, but simply compare those who are treated to those who are not treated. Mathematically:

$$\begin{aligned}\rho_{D,Y} &= \mathbb{E}[Y_i|D_i = 1] - \mathbb{E}[Y_i|D_i = 0] \\ &= \mathbb{E}[Y_i(1)|D_i = 1] - \mathbb{E}[Y_i(0)|D_i = 0] \\ &= \mathbb{E}[Y_i(1)|D_i = 1] - \mathbb{E}[Y_i(0)|D_i = 0] + \mathbb{E}[Y_i(1)|D_i = 1] - \mathbb{E}[Y_i(1)|D_i = 1] \\ &= \underbrace{\mathbb{E}[Y_i(1)|D_i = 1] - \mathbb{E}[Y_i(1)|D_i = 1]}_{\text{ATT}} + \underbrace{\mathbb{E}[Y_i(0)|D_i = 1] - \mathbb{E}[Y_i(0)|D_i = 0]}_{\text{Selection Bias}}\end{aligned}$$

We can see that correlation equals ATT + Selection Bias.

- Read: Correlation does not equal causation (ATT) unless selection bias equals 0.

## Selection Bias

Recall correlation = ATT + Selection bias. What is selection bias?

$$\text{Selection Bias} = \mathbb{E}[Y_i(0)|D_i = 1] - \mathbb{E}[Y_i(0)|D_i = 0]$$

What does this mean? The two parts:

- ① Hypothetical  $Y_i(0)$  for those who did receive the treatment  $D_i = 0$ .
- ② Hypothetical  $Y_i(0)$  for those who did not receive the treatment  $D_i = 0$ .

Recall  $Y_i(0)$  is hypothetical  $Y_i$  without treatment. What this means is:

- Selection bias is the difference **before** (without) **treatment** between the treatment group  $D_i = 1$  and treated group  $D_i = 0$ .

# Confounders

What causes selection bias?

- Read: what causes pre-existing differences between treatment  $D_i = 1$  and control  $D_i = 0$ ?

**Confounders:** a variable X that meets two conditions:

- ① X causes D.

Read: individuals with different values of X have different likelihoods of being assigned to  $D_i = 1$  or  $D_i = 0$

- ② X is correlated with Y.

Read: X is associated with the values of Y.

Thus, since X is associated with Y, and different values of X have different likelihoods of being assigned to D, then D will have different Y values if X is a confounder.

## Exogeneity (1)

Recall OLS is only unbiased if strict exogeneity is met  $\text{Cov}(X, \varepsilon) = 0$ .

Why would  $X$  and  $\varepsilon$  be correlated? Imagine this “true” regression with independent variables  $X$  and  $Z$  that are correlated:

$$Y_i = \beta_0 + \beta_1 X_i + \beta_2 Z_i + \varepsilon_i$$

Now imagine we forget to include  $Z$  in our regression:

$$Y_i = \gamma_0 + \gamma_1 X_i + u_i$$

Now the error term  $u_i$  contains  $Z_i$  (since error term is everything that explains  $Y$  that is not in our regression).

But  $X$  and  $Z$  are correlated. Since  $Z$  is a part of  $u_i$ , then  $X$  and  $u_i$  are correlated, violating exogeneity. The estimate of  $\gamma_1$  would be biased.

## Controlling

Here is our regression of treatment D on outcome Y:

$$Y_i = \alpha + \tau D_i + \varepsilon_i$$

Confounders X is correlated with D by definition.

Thus, if we do not include confounder X in our regression, it will be contained in  $\varepsilon_i$ , violating exogeneity, and thus creating a biased estimate.

- This matches with the idea of selection bias: not accounting for X means correlation does not equal causation.

Easy solution: add all confounders into regression to meet exogeneity and achieve unbiased estimates:

$$Y_i = \alpha + \tau D_i + \beta X_i + \varepsilon_i$$

## Unobservable Confounders

Sounds simple, just control for all confounders  $X$ ? Then we can get unbiased causal estimates?

Unfortunately, we often run into issues:

- ① Confounder  $X$  might be impossible/difficult to measure (ex. happiness).
- ② We might not have data on  $X$ .
- ③ We might not know all confounders  $X$ . There is no magic test to tell us what is a confounder.

Even missing just one  $X$  will bias our results.

Thus, the field of **causal inference** exists to find creative ways to get causal estimates.

## Random Experiments

The “best” way to isolate causal effects is with random assignment of treatment  $D_i$ .

- Our issue is that confounders  $X$  cause who gets treatment  $D$ .
- If we randomly assign people to treatment  $D$ , then it is randomness causing  $D$ , and no longer  $X$ .

Thus, random assignment solves confounder problems and ensures exogeneity, allowing us to run a simple regression to find causal effects:

$$Y_i = \alpha + \tau D_i + \varepsilon_i$$

Issues:

- ① You can't always run randomised experiments. You need to control  $D$ , and that can be costly/impractical.
- ② Even if you randomly assign  $D_i$ , how do you force everyone to follow their assignment?

## Observational Studies

We saw random experiments can be difficult to run. Thus, the field of causal inference has designed different techniques to estimate causal effects.

- ① **Difference-in-Differences (DiD)**: exploiting variation in treatment adoption over time and between individuals.

DiD is the most popular method right now, and has seen rapid advancement in techniques in the past few years.

- ② **Instrumental Variables (IV)**: exploiting instruments to estimate causal effects.

Becoming less popular due to concerns over assumptions

- ③ **Regression Discontinuity Design (RDD)**: exploiting cut-offs in treatment assignment to estimate causal effects.

Probably the most “convincing” method, but only applicable to certain scenarios.

All methods require **assumptions**. We should always ask if these assumptions are met.