

# Estimating Treatment Effects - Randomization

February 18, 2025

- What criteria should we use to assess existing evidence?
  - ▶ Strength of the methodology
    - Does the evidence provide a causal interpretation?
    - Is the evidence rooted in the appropriate historical context?
  - ▶ Quality of the data
  - ▶ External validity

## Estimating Treatment Effects

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Where  $Y_i^1$  is the *potential* outcome for person  $i$  with treatment and  $Y_i^0$  is the *potential* outcome for person  $i$  without treatment.

## Estimating Treatment Effects

- Suppose we're interested in the effect of a new surgical intervention ( $D_i = 1$ ) for cancer on longevity compared to standard chemotherapy ( $D_i = 0$ ).

**Outcomes for ten patients receiving surgery ( $Y^1$ ) or chemotherapy ( $Y^0$ )**

Patient	$Y^1$	$Y^0$
1	7	1
2	5	6
3	5	1
4	7	8
5	4	2
6	10	1
7	1	10
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- Calculate the *ATE* ( $ATE = Avg_n[Y_i^1 - Y_i^0]$ ).

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- Problem: We can never obtain the ATE this way because we don't observe the ***counterfactual***.

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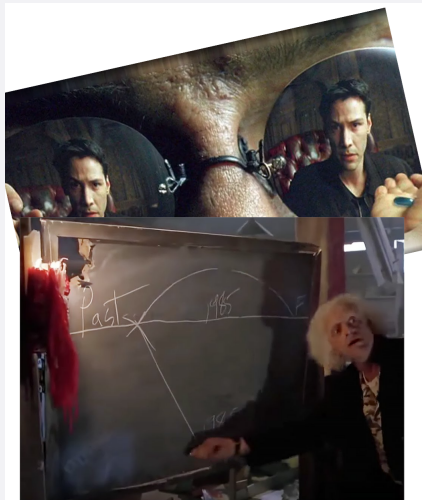




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- Estimated Effect of treatment on  $Y$ :

$$ATE_{est} = Avg_n[Y_i^1 | D_i = 1] - Avg_n[Y_i^0 | D_i = 0]$$

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where  $\pi$  is the share of the sample receiving treatment.

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$$ATE_{est} = ATE + \underbrace{\{Avg_n[Y_i^0 | D_i = 1] - Avg_n[Y_i^0 | D_i = 0]\}}_{\text{Selection Bias}}$$
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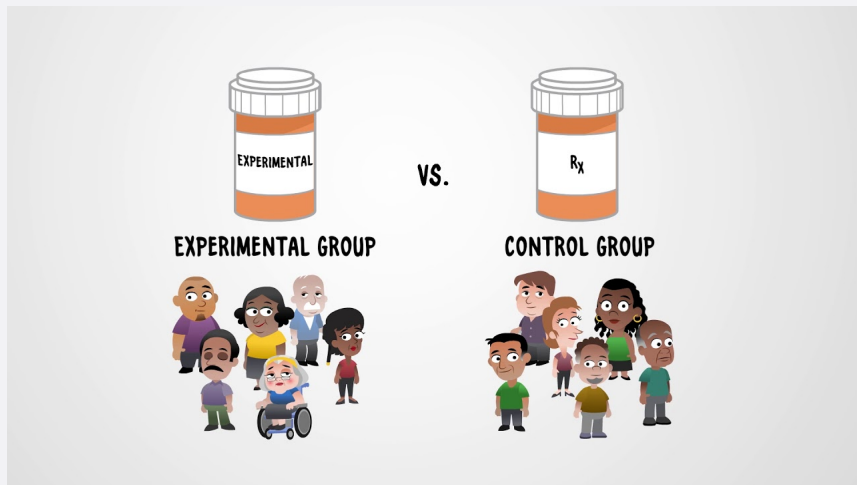
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  - ▶ If these correlates are unobserved, then our estimates will be biased (e.g., risk aversion).

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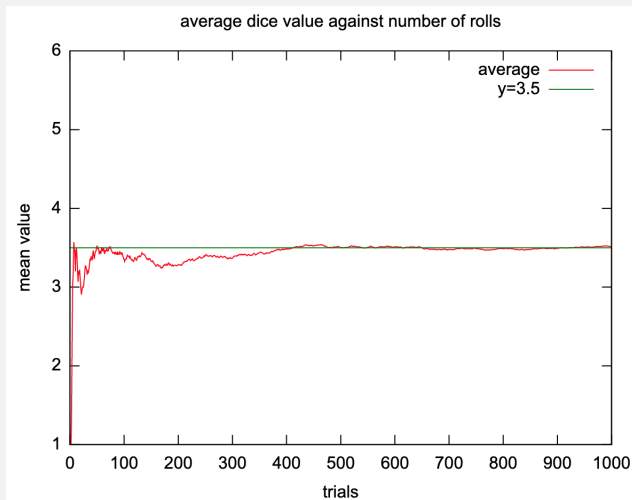
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- **IMPORTANT:** This only works when the sample is “sufficiently large”.

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- Law of Large Numbers:



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- Note that “sufficiently large” depends on the population mean and standard deviation of the outcome of interest.

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- How can we attempt to identify causal effects of policy when randomization is infeasible?