

# Measuring Impact

## Conceptual Issues in Program and Policy Evaluation

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# Introduction

- Primary concern to economists, policymakers, organizations, etc. is to measure the *causal* effect of a program or policy on outcomes of importance
- Statistical and econometric literature analyzing causation has seen tremendous growth over the past several decades
- The more we learn, the more we realize how *complex* the world can be and how *difficult* measuring impacts can be
- Our objective is to provide
  - 1 A non-technical overview of issues and concepts that arise when seeking to measure *causal* impacts
  - 2 A brief introduction to some of the methods used by researchers
- By the end, you will hopefully agree with Mark Twain:  
“*Education: the path from cocky ignorance to miserable uncertainty.*”

# Outline

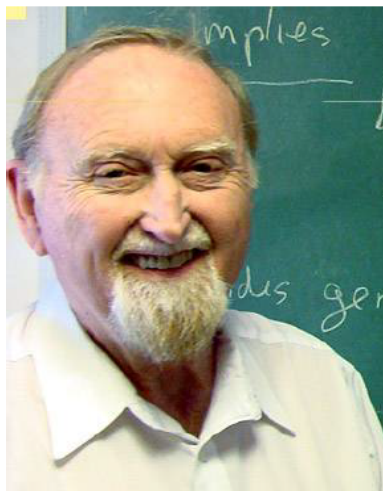
- 1 Definition of causation
- 2 Types of questions one may ask
- 3 Types of data
- 4 Data issues
- 5 Proper interpretation of statistical analyses
- 6 Roadmap to remaining sessions

## Philosophy of causality

- Rich literature in analytic philosophy on causality
- Two main approaches to defining causality:
  - ▶ **Regularity approaches:** Hume: “We may define a cause to be an object followed by another, and where all the objects, similar to the first, are followed by objects similar to the second.” (from *An Enquiry Concerning Human Understanding*, section VII)
  - ▶ **Counterfactual approaches:** Hume: “Or, in other words, where, if the first object had not been, the second never had existed.” (from *An Enquiry Concerning Human Understanding*, section VII)

## Regularity approach: a minimal conjunction between two objects

- Suppes: a probabilistic association between the two objects, which cannot be explained away by other factors
- Idea behind *Granger causality*
- Fundamental notion underlying Granger causality is whether one object helps *predict* the occurrence of another
- Prediction, association, and correlation are not what most intend when speaking of *causation*
- While predictive ability answers questions that may be of interest, it *should not* be used to make policy decisions



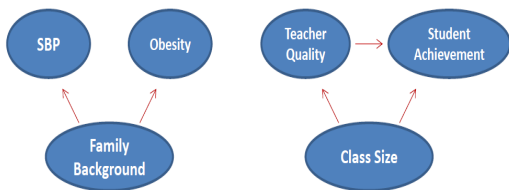
- Correlation (or predictive ability) and “causation” are not synonymous
  - ▶ Examples abound where correlation  $\nRightarrow$  causation
    - ★ Example: SBP and childhood obesity
  - ▶ Examples abound where a *lack of* correlation  $\nRightarrow$  a *lack of* causation
    - ★ Example: California's class size reduction policy



• Two reasons why associations may not be indicative of causation

1 Confounding factors  $\Rightarrow$  correlation is driven by *other* factors

- ★ SBP & childhood obesity: family background
- ★ California's class size reduction policy: teacher quality



2 Reverse causation  $\Rightarrow$  correlation is driven by causation in the other direction

- ★ Public housing and crime?
- ★ Marital wage premium?
- ★ Children and female labor supply?

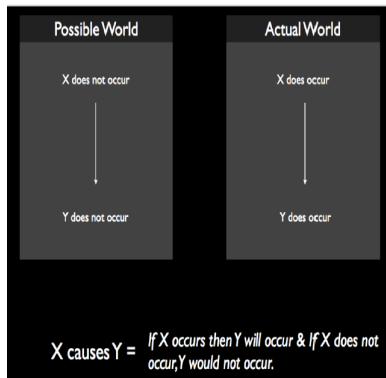


## Counterfactual approach: imagining a range of possible worlds

- In my view, this view is most consistent with what most intend when speaking of *causation*
- Most relevant for evaluating programs and policies
- Basic idea is to imagine alternative worlds where one (and only one) object is changed and to assess the differences  $\Rightarrow$  *Sliding Doors*
- Dominant view for measuring impacts in microeconomics today

Greiner & Rubin (2011):

“For analysts from a variety of fields, the intensely practical goal of causal inference is to discover what would happen if we changed the world in some way.”





- Typically referred to as the *Rubin Causal Model* (Neyman 1923, 1935; Fisher 1935; Roy 1951; Quandt 1972, 1988; Rubin 1974)
- Crucial underpinning is the notion of *potential outcomes*



- Potential outcomes refer to the outcome that *would be realized* under different states of nature
  - ▶ Example: A sick individual may receive either Treatment 0 or 1. The outcome is either Recovery or Death. Thus, there are two possible *states of nature* (Treatment 0 or 1) and there is an outcome that would be realized in each state of nature.
- Under the counterfactual approach, the *causal effect* of Treatment 1 *relative to* Treatment 0 would be the difference in outcomes across these two states of nature

- Formally,

- ▶ Let  $D = 0, 1$  indicate the treatment received by the individual
- ▶ Let  $Y(0)$  indicate the outcome (Recovery, Death) the individual *would* experience *if* s/he receives Treatment 0 ( $D = 0$ )
- ▶ Let  $Y(1)$  indicate the outcome (Recovery, Death) the individual *would* experience *if* s/he receives Treatment 1 ( $D = 1$ )
- ▶  $Y(0)$ ,  $Y(1)$  are *potential outcomes* as only one will actually be realized and observed in the world
- ▶ The causal effect of Treatment 1 relative to Treatment 0 on the individual is given by

$$\tau = Y(1) - Y(0)$$

which is the difference in outcomes in two alternative, but plausible, worlds

- The **counterfactual approach** is a very *simple* yet *powerful* framework in which to think about causation
- Immediately leads to three salient points
  - ① Causal impacts of a treatment/intervention/program/policy are only defined with respect to a well-defined alternative
    - ★ Typically the alternative is the 'absence of treatment'
    - ★ Not always obvious and must be made explicit
  - ② Causal impacts are individual-specific
    - ★ Each individual potentially has he or her own potential outcomes and hence treatment effect
    - ★ Referred to as *constant* vs. *heterogeneous* treatment effects
    - ★ Has important implications for thinking about how to interpret the results of data analyses
  - ③ Only one state of nature is actually realized at a point in time
    - ★ We can observe at most one potential outcome for any individual, remaining are missing
    - ★ The causal effect of a treatment is *not observable* for any individual
    - ★ Estimating causal effects must overcome this *missing data* problem
    - ★ To do so, requires assumptions and these assumptions must be credible

# Types of Questions One Might Ask

## Granger Causality

- Granger causality answers questions concerning the ability of one object to *predict* or *forecast* another
- The underlying reason why it is a good predictor is not of (primary) importance
- However, often we do not care about the *why* and predictive ability is sufficient
- For example:
  - ① State governments forecasting welfare caseloads or new applications for unemployment insurance or new applications for public housing
  - ② Food banks forecasting demand for food
  - ③ Non-profits forecasting charitable donations
  - ④ Police forecasting 911 calls at different times

# Types of Questions One Might Ask

## Causal Effects

- Counterfactual approach answers questions concerning the *expected effect* of a treatment (relative to a well-defined alternative)
- Understanding the mechanisms behind why a causal effect may arise is important, but requires additional analysis
- Examples:
  - 1 Expected effect of a job training program on employment and earnings
  - 2 Expected effect of a weekend food program on child nutrition and school achievement
  - 3 Expected effect of different financial literacy training schemes (class, one-on-one, online, none) on decisionmaking
  - 4 Expected effect of different incentive schemes on charitable donations (e.g., matching, raffle, gift)
- Examples 1, 2 have *binary* treatments  $\Rightarrow$  alternative is the 'absence of treatment'
- Examples 3, 4 have *non-binary* treatments  $\Rightarrow$  what is the alternative?

# Fundamental Issues in Measurement of Impacts

- Estimation of causal effects is difficult due to *missing counterfactual* problem
  - ▶ With a binary treatment, either  $Y(1)$  or  $Y(0)$  is observed for any given individual
  - ▶ The unobserved potential outcome is the missing counterfactual
  - ▶ Holland (1986) refers to this as the “fundamental problem of causal inference”
- While the missing counterfactual makes life difficult, it is not impossible
- The implication is that we must *estimate* the missing counterfactual
- Such estimates are only as valid as the *assumptions* that underlie them and the *data* used to derive the estimates
- Discussion of the assumptions and statistical methods will be the focus of the later sections
- For the rest of this section, I focus on understanding data

# Fundamental Issues in Measurement of Impacts

## Types of Data

- Two types of data are employed to estimate causal effects
  - ① Experimental (field or lab)
  - ② Non-experimental or observational
- Experimental data refers to data collected by researcher after *randomizing* treatments across subjects (as opposed to allowing subjects to *self-select* into the treatment or control groups)
- Observational data refers to typical survey data collected by researchers after subjects self-select into different treatments
- While experimental data may be preferable – often referred to as the ‘gold standard’ – experiments are often difficult
  - ① Expensive
  - ② Unethical
  - ③ Politically unpopular



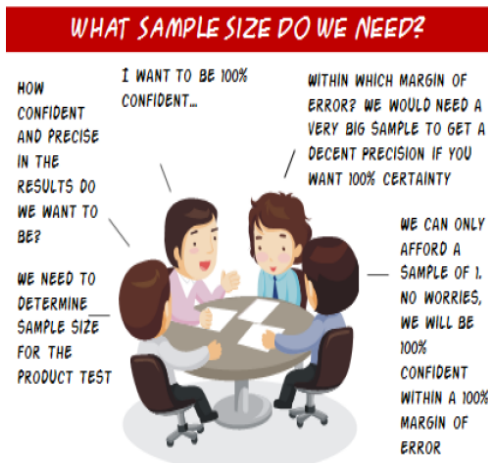
# Fundamental Issues in Measurement of Impacts

## Data Issues

- Regardless of the data type (experimental or observational), several issues can arise that impact data *quality* or affect the *interpretation* of statistical results
- These include
  - ① Sample size
  - ② Sample selection
  - ③ Sample attrition
  - ④ Measurement issues

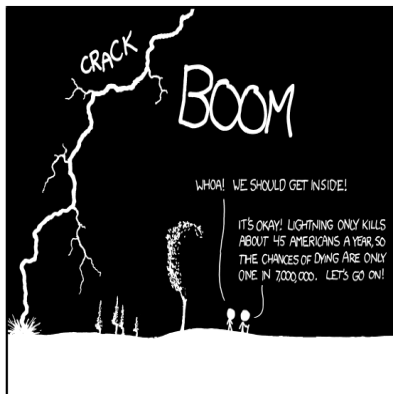
## Sample size

- Refers to the number of subjects used in the analysis
- Sample size affects the *precision* of estimates of causal effects
- Precision of estimates is not always discussed outside of academic circles



## Sample selection

- Refers to how the subjects used in the analysis are chosen
- Sample selection affects the *representativeness* of the sample
- Affects the interpretation of the results by affecting generalizability



THE ANNUAL DEATH RATE AMONG PEOPLE WHO KNOW THAT STATISTIC IS ONE IN SIX.

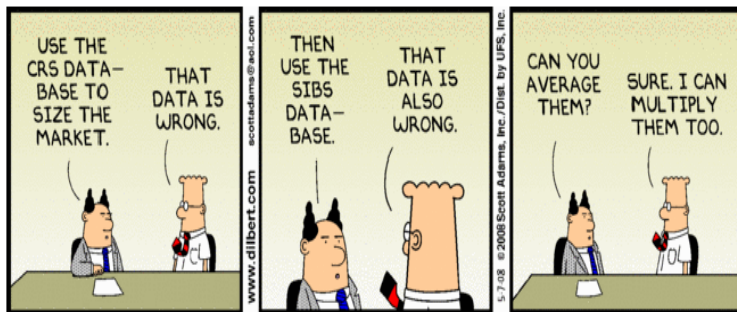
## Sample attrition

- When analysis entails following subjects over time, final sample may be *nonrepresentative* even if the initial sample is *representative*
- Need to think about whether attrition is *random* or not
- May occur for many reasons
  - 1 Subjects voluntarily decide to leave study, move away, etc.
  - 2 Subjects involuntarily decide to leave study (e.g., death, jail, etc.)



## Measurement issues

- Definitions of variables, particularly outcomes
  - ▶ Short-run vs. long-run
  - ▶ Comprehensive vs. specific
- Measurement error
  - ▶ Self-reported vs. verified



# Fundamental Issues in Measurement of Impacts

## Interpretation

- Internal vs. external validity
  - ▶ *Internal* validity refers to whether an estimate of the causal effects is valid for the sample used to obtain the estimate
  - ▶ *External* validity refers to whether an estimate of the causal effects is generalizable to individuals outside the sample
- Treatment effect parameters
  - ▶ When causal effects are heterogeneous, several parameters may be of interest
    - ① Average Treatment Effect (ATE)  $\Rightarrow$  expected treatment effect for an individual chosen at random from the population
    - ② Average Treatment Effect on the Treated (ATT)  $\Rightarrow$  expected treatment effect for an individual chosen at random from the *treated* population
    - ③ Average Treatment Effect on the Untreated (ATU)  $\Rightarrow$  expected treatment effect for an individual chosen at random from the *untreated* population
    - ④ Distributional Treatment Effects

Note: These answer different policy questions!

# Fundamental Issues in Measurement of Impacts

## Interpretation

- For any treatment effect parameter, there is an important difference between *ceteris paribus* effects and *policy* effects
  - ▶ Ceteris paribus (“all else constant”) effects answer questions like: “What is the causal effect of the treatment on an individual *holding all else fixed?*”
  - ▶ Policy effects answer questions like: “What is the causal effect of the treatment on an individual?”
  - ▶ Answers are not always the same, and both are important
    - ★ Example 1: California’s class size reduction policy
    - ★ Example 2: Infra-marginal nutrition assistance

# Conclusion

## Critical questions to ask of causal statements

- 1 What is the counterfactual? What is the alternative to the treatment?
- 2 What is the nature of the data? Randomization or observational?
- 3 What is the proper interpretation of the results? To whom do the results apply? What is the outcome?
- 4 Are the results *internally* valid? What assumptions are made to circumvent the missing counterfactual?
- 5 Are the results *externally* valid? Sample selection?



# Roadmap

- Assumptions used to circumvent the problem of the missing counterfactual
  - 1 Randomization  $\Rightarrow$  Tim, Danila
  - 2 Observational methods  $\Rightarrow$  me
- Forecasting and prediction  $\Rightarrow$  Tom
  - 1 Data mining
  - 2 Big data