

Accounting and causal effects: challenges and potential remedies

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outline

- accounting ingredients — causal effect of strategic disclosure
- focus on treatment effects
- challenges — identification
 - potential remedies
 - ignorable treatment identification strategies
 - instrumental variable identification strategies
 - partial identification strategies
- varieties of treatment effects and data analytic approaches
- examples of effective/ineffective identification strategies

accounting causal effects

- endogenous nature of causal effects makes assessing welfare impact of accounting choice challenging
- strategic disclosure:
 - discrete — recognize/disclose or not
 - continuous — information precision

accounting causal effects

- ingredients:
 - uncertainty
 - asymmetric information
 - multiple sources of information
 - equilibrium behavior
 - audited reports may result in welfare improvement

treatment effects

- special case of causal effects
- for concreteness and simplicity, we'll focus on binary treatment effects; for example, disclose or don't disclose
 - $TE = Y_1 - Y_0$
 - Y_1 is (potential) outcome with treatment
 - Y_0 is (potential) outcome without treatment
 - $D = 1$ treatment is chosen or assigned
 - $D = 0$ no treatment is chosen or assigned
 - observed outcome: $Y = DY_1 + (1 - D) Y_0$
 - observable data: $Y_1|D = 1$ and $Y_0|D = 0$
 - counterfactuals: $Y_1|D = 0$ and $Y_0|D = 1$

common treatment effects

conditional average treatment effects

- average treatment effect for individuals who selected treatment conditional on observables/regressors

$$ATT(X) = E[Y_1 - Y_0 \mid X = x, D = 1]$$

- average treatment effect for individuals who selected no treatment conditional on observables/regressors

$$ATUT(X) = E[Y_1 - Y_0 \mid X = x, D = 0]$$

common treatment effects

conditional average treatment effects

- average treatment effect for individuals chosen or assigned treatment at random conditional on observables/regressors

$$\begin{aligned}ATE(X) &= E[Y_1 - Y_0 \mid X = x] \\ &= Pr(D = 1 \mid X) ATT(X) + Pr(D = 0 \mid X) ATUT(X)\end{aligned}$$

common treatment effects

conditional average treatment effects

- for propensity score matching, covariates $X = x$ are replaced by $P(x) = p$ in the conditional expectation expression

$$\begin{aligned}ATE(P(x)) &= E[Y_1 - Y_0 \mid P(x) = p] \\ &= Pr(D = 1 \mid P(x) = p) ATT(P(x)) \\ &\quad + Pr(D = 0 \mid P(x) = p) ATUT(P(x))\end{aligned}$$

common treatment effects

unconditional average treatment effects

- with full common support (so-called identification at infinity), unconditional average effects are derived from conditional average effects via iterated expectations
 - otherwise, we're only able to identify local average effects
 - description of common support indicates range of evidence
- for example, the average treatment effect for individuals who are selected for treatment at random

$$\begin{aligned}ATE &= E_X [E [Y_1 - Y_0 | X]] \\ &= E [Y_1 - Y_0]\end{aligned}$$

challenges

- Identification! Identification! Identification!
 - framing the causal effect problem
 - rich variety of potential effects of interest makes this step of paramount importance
 - causal effect parameter identification
 - typically maps observable outcome Y to effect via probability theory

challenges

- counterfactual nature
- common support (treated and untreated)
- unobservability (partial observability) of beliefs, preferences, and potential outcomes

challenges

- observable and unobservable heterogeneity
 - how likely is homogeneity?
- instrumental variable strategies can accommodate outcome heterogeneity but require uniform treatment adoption
- greater explanatory power may **increase** selection bias

challenges

- more ambitious agendas
 - suspend stable unit treatment value assumption (*SUTVA*) — allow interaction effects among individuals
 - Cowles' commission fully structural analysis (including specification of preferences and incentives) of general equilibrium effects in environments with which we have no prior experience

potential remedies

- thought experiments
 - framing problem and focal parameter(s)
 - identification of quantities of interest

potential remedies

- thought experiments
 - probability assignment
 - Jaynes' maximum entropy is one probability assignment approach
 - Ross' recovery theorem assigns probabilities and preferences from state prices
 - Leamer's specification searches with various priors and likelihoods allows the reader to judge the data summaries for themselves
 - Manski's partial identification & law of decreasing credibility

potential remedies

- varieties of treatment effects and questions posed
 - discrete/continuous treatment
 - conditional (on observables/regressors) and unconditional (iterated expectations) treatment effects
 - population-level effect
 - marginal
 - average
 - quantile
 - *MTE* connects to other treatment effects via weighting functions

potential remedies

- identification strategies
 - ignorable treatment (selection on observables or unconfoundedness)
 - treatment is mean conditionally independent
 - strong ignorability involves stochastic conditional independence

potential remedies

- identification strategies
 - instrumental variables (exclusion restrictions)
 - instruments are independent of outcomes
 - instruments are related to treatment adoption
 - instruments allow manipulation of treatment
 - without affecting outcomes to infer counterfactuals
 - treatment adoption is uniform in the instruments

potential remedies

- identification strategies
 - bounding/partial identification when point-identification is not feasible or credible

potential remedies

- common support
 - evaluate overlap in covariate distribution
 - examine histograms of the estimated propensity score by treatment status
 - propensity score matching to determine sample

potential remedies

limited common support

- example — nonparametric identification with limited common support
- *DGP*

Y_1	Y_0	TE	Y	D	X
11	4	7	4	0	0
2	6	-4	6	0	-1
1	5	-4	5	0	-1
11	4	7	4	0	0
11	4	7	11	1	0
11	4	7	11	1	0
9	3	6	9	1	1
10	2	8	10	1	1

Examples

limited common support

- various treatment effects

$$\begin{aligned}ATT(X = 0) &= ATT(X = 1) \\ &= ATT = 7\end{aligned}$$

$$\begin{aligned}ATUT(X = -1) &= -4, \quad ATUT(X = 0) = 7 \\ &= ATUT = 1.5\end{aligned}$$

$$\begin{aligned}ATE(X = -1) &= -4, \quad ATE(X = 0) = ATE(X = 1) = 7 \\ &= ATE = 4.25\end{aligned}$$

- only conditional treatment effects (at $X = 0$) are nonparametrically identified by the data:

$$ATT(X = 0) = ATUT(X = 0) = ATE(X = 0) = 7$$

potential remedies

- some varieties of data analytic strategies
 - nonparametric regression
 - general matching
 - propensity score matching
 - fixed effects
 - difference-in-differences (*DID*)
 - linear *2SLS-IV*
 - interpretation depends on instruments & covariates
 - control or replacement functions
 - local *IV* (semi-nonparametric)

potential remedies

- some varieties of data analytic strategies
 - regression discontinuity design
 - doubly-robust combination methods
 - regression with propensity score weighting (*WLS*)
 - subclassification and regression
 - matching and regression
 - correlated random coefficients for continuous treatment
 - simulation, say, of general equilibrium effects
 - *MCMC* Bayesian data augmentation
 - and more ...

potential remedies

- assessing refutability
 - no direct tests due to counterfactual nature — credibility is a thought experiment
 - evaluate refutable partial identification bounds against the data
 - highly context specific — for example, check for change in means or distribution of covariates around the threshold for regression discontinuity designs

potential remedies

- data
 - better data is perhaps the most effective, albeit nontrivial, remedy
 - outcomes, regressors/covariates, instruments, etc. are typically inadequate for addressing the questions we wish to probe (welfare effects)
 - the efforts of empiricists toward this goal are typically undervalued — a disservice to the discipline

examples

2SLS-IV identifies LATE — treatment effect depends on instrument choice

- *DGP* — *nonignorable, heterogeneous treatment effect*

Y_1	Y_0	TE	Y	D	Z
15	10	5	15	1	1
15	10	5	15	1	0
10	10	0	10	1	1
10	10	0	10	0	0
5	10	-5	10	0	1
5	10	-5	10	0	0

- $LATE = E[Y_1 - Y_0 \mid D_1 - D_0 = 1] = IVE = \frac{E[Y|Z=1] - E[Y|Z=0]}{E[D|Z=1] - E[D|Z=0]}$
- regressors: $\{1, D\}$; instruments: $\{1, Z\}$
- *LATE* is the instrument-dependent treatment effect for an unidentified subpopulation of compliers
- compliers are rows 3 and 4

examples

2SLS-IV identifies LATE — treatment effect depends on instrument choice

- various treatment effects

$$\begin{array}{ll} ATT = 3\frac{1}{3} & ATUT = -3\frac{1}{3} \\ ATE = 0 & OLS = 3\frac{1}{3} \\ LATE = 0 & IVE = 0 \end{array}$$

- the local average treatment effect is identified via *2SLS-IV* as the binary instrument, Z , satisfies the exclusion restriction, $\Pr(Y_i | Z = 1) = \Pr(Y_i | Z = 0)$ for $i = 0, 1$, and is related to selection, D , $\Pr(D | Z) \neq \Pr(D)$
- treatment effect identified depends on instrument and applies to an unidentified subpopulation of compliers, $D_1 - D_0 = 1$

examples

LATE = ATT

- *DGP* — nonignorable, heterogeneous treatment effect

Y_1	Y_0	TE	Y	D	Z
15	10	5	15	1	1
15	10	5	10	0	0
20	20	0	20	0	1
20	20	0	20	0	0
10	10	0	10	1	1
10	10	0	10	0	0

- $LATE = E[Y_1 - Y_0 \mid D_1 - D_0 = 1] = IVE = \frac{E[Y|Z=1] - E[Y|Z=0]}{E[D|Z=1] - E[D|Z=0]}$
- regressors: $\{1, D\}$; instruments: $\{1, Z\}$
- compliers are rows 1, 2, 5, and 6

examples

LATE = ATT

- various treatment effects

$$ATT = 2.5 \quad ATUT = 1.25$$

$$ATE = 1\frac{2}{3} \quad OLS = -2.5$$

$$LATE = 2.5 \quad IVE = 2.5$$

- the local average treatment effect is identified via *2SLS-IV* as the binary instrument, Z , satisfies the exclusion restriction,
 $\Pr(Y_i | Z = 1) = \Pr(Y_i | Z = 0)$ for $i = 0, 1$
- *LATE* equals *ATT* as $\Pr(D = 1 | Z = 0) = 0$

examples

LATE = ATUT

- *DGP* — nonignorable, heterogeneous treatment effect

Y_1	Y_0	TE	Y	D	Z
15	10	5	15	1	1
15	10	5	10	0	0
20	10	10	20	1	1
20	10	10	20	1	0
10	10	0	10	1	1
10	10	0	10	0	0

- $LATE = E[Y_1 - Y_0 \mid D_1 - D_0 = 1] = IVE = \frac{E[Y|Z=1] - E[Y|Z=0]}{E[D|Z=1] - E[D|Z=0]}$
- regressors: $\{1, D\}$; instruments: $\{1, Z\}$
- compliers are rows 1, 2, 5, and 6

examples

LATE = ATUT

- various treatment effects

$$ATT = 6.25 \quad ATUT = 2.5$$

$$ATE = 5 \quad OLS = 6.25$$

$$LATE = 2.5 \quad IVE = 2.5$$

- the local average treatment effect is identified via *2SLS-IV* as the binary instrument, Z , satisfies the exclusion restriction,
 $\Pr(Y_i | Z = 1) = \Pr(Y_i | Z = 0)$ for $i = 0, 1$
- *LATE* equals *ATUT* as $\Pr(D = 1 | Z = 1) = 1$

examples

LATE — defiers, 2SLS-IV fails

- *DGP* — *nonignorable, heterogeneous treatment effect*

Y_1	Y_0	TE	Y	D	Z
10	5	5	10	1	1
10	5	5	5	0	0
10	5	10	10	1	1
10	5	10	10	1	0
10	5	0	10	1	1
10	5	0	5	0	0
10	-5	0	-5	0	1
10	-5	0	10	1	0

- regressors: $\{1, D\}$; instruments: $\{1, Z\}$
- compliers are rows 1, 2, 5, and 6
- last two rows are defiers

examples

LATE — defiers, 2SLS-IV fails

- various treatment effects

$$\begin{array}{ll} ATT = 7 & ATUT = 8\frac{1}{3} \\ ATE = 7.5 & OLS = 8\frac{1}{3} \\ LATE = 5 & IVE = -5 \end{array}$$

- the local average treatment effect is not identified via *2SLS-IV* as there are defiers in the population
- *2SLS-IV* is grossly misleading — sign of the estimand *IVE* is opposite of *LATE*
- failure of treatment adoption uniformity can mean *OLS* is closer to identifying *LATE* than *2SLS-IV*

examples

2SLS-IV with covariates — treatment effect depends on covariates as well as instrument choice

- let X be a fixed design matrix of three indicator variables (a varying intercept model)
- regressors (conditional effects): $\{X_1, X_2, X_3, X_1D, X_2D, X_3D\}$ or regressors (unconditional effect): $\{X_1, X_2, X_3, D\}$; instruments: $\{X_1, X_2, X_3, X_1Z, X_2Z, X_3Z\}$

examples

2SLS-IV with covariates — treatment effect depends on covariates as well as instrument choice

- 2SLS – IV effect is a weighted average of the 2SLS – IV effects identified at each $X_k = 1$

$$\begin{aligned}\gamma &= \frac{E[Y \cdot (E[D | X, Z] - E[D | X])]}{E[D \cdot (E[D | X, Z] - E[D | X])]} \\ &= \frac{E_X[\omega(X_k = 1) \gamma(X_k = 1)]}{E_X[\omega(X_k = 1)]}\end{aligned}$$

- with weights

$$\omega(X_k = 1) = E[E[D | X, Z] \cdot (E[D | X, Z] - E[D | X]) | X_k = 1]$$

- and 2SLS – IV effects at each $X_k = 1$,

$$\gamma(X_k = 1) = \frac{E[Y \cdot (E[D | X, Z] - E[D | X]) | X_k = 1]}{E[D \cdot (E[D | X, Z] - E[D | X]) | X_k = 1]}$$

examples

2SLS-IV with covariates — 2SLS-IV effect equal to LATE

- *DGP* — nonignorable, heterogeneous treatment effect with unobservable outcome V_i

Y_1	Y_0	TE	Y	D	X_1	X_2	X_3	V_1	V_0	Z
6	4	2	6	1	1	0	0	1	3	1
6	4	2	4	0	1	0	0	1	3	0
4	-2	6	4	1	1	0	0	-1	-3	1
4	-2	6	4	1	1	0	0	-1	-3	0
8	4	4	8	1	0	1	0	2	2	1
8	4	4	4	0	0	1	0	2	2	0
4	0	4	0	0	0	1	0	-2	-2	1
4	0	4	0	0	0	1	0	-2	-2	0
10	4	6	10	1	0	0	1	3	1	1
10	4	6	4	0	0	0	1	3	1	0
4	2	2	2	0	0	0	1	-3	-1	1
4	2	2	2	0	0	0	1	-3	-1	0

examples

2SLS-IV with covariates — 2SLS-IV effect equal to LATE

- compliers are rows 1, 2, 5, 6, 9, and 10
- various treatment effects

	<i>treatment effects</i>			
	<i>conditional</i>			<i>unconditional</i>
	$X_1 = 1$	$X_2 = 1$	$X_3 = 1$	
<i>OLS</i>	0.6667	6.6667	7.3333	4.1143
<i>LATE</i>	2	4	6	4
<i>2SLS – IV</i>	2	4	6	4
$\omega(X_k = 1)$	0.0625	0.0625	0.0625	
<i>ATT</i>	4.6667	4	6	4.8
<i>ATUT</i>	2	4	3.3333	3.4286
<i>ATE</i>	4	4	4	4

- the local average treatment effects are identified via *2SLS-IV* as

$$E[V_j Z | X_k = 1] = E[V_j | X_k = 1] = 0$$

examples

2SLS-IV with covariates — 2SLS-IV effect unequal to LATE

- *DGP* — *nonignorable, heterogeneous treatment effect*

Y_1	Y_0	TE	Y	D	X_1	X_2	X_3	V_1	V_0	Z
6	4	2	6	1	1	0	0	1	3	1
6	4	2	4	0	1	0	0	1	3	0
8	0	8	8	1	1	0	0	3	-1	0
8	0	8	8	1	1	0	0	3	-1	0
8	4	4	8	1	0	1	0	2	2	1
8	4	4	4	0	0	1	0	2	2	0
6	-1	7	-1	0	0	1	0	0	-3	1
6	-1	7	-1	0	0	1	0	0	-3	1
4	4	0	4	1	0	0	1	-3	1	1
4	4	0	4	0	0	0	1	-3	1	0
4	1	3	1	0	0	0	1	-3	-2	0
4	1	3	1	0	0	0	1	-3	-2	0

conclusions

- analysis of causal effects places a greater demand on explication of the thought experiments which underlie the data analysis
- in other words, framing the problem is key to understanding, critiquing, improving the data summaries