

# Causation & Randomized Experiments

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Social Media and Web Analytics, Spring 2024

# Learning Goals

- Explain the challenges of causal inference with observational data
- Define the term randomized experiment
- Explain the fundamental problem of causal inference
- Describe the Potential Outcomes framework for casual inference
- Define the Sample Average Treatment Effect
- Analyze data from a randomized experiment to estimate the sample average treatment effect of an intervention using statistical inference and linear regression

# 1/ Causation

# Causal Questions

**Does X cause Y?** Examples of causal questions include:

- Does smoking cause cancer?
- Does exercise make people happier?
- Does my social media advertising increase sales?
- Does hiring an influencer to promote a product lead to an increased consumer awareness about the product?

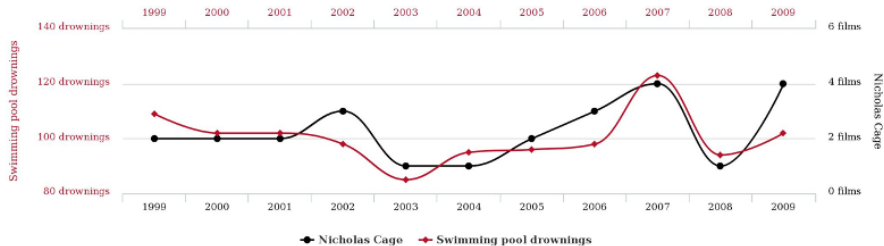
Not all causal questions use the word “*cause*”. Other words that imply causality include:

- Improve
- Increase / decrease
- Lead to
- Make

Tell-tale sign that a question is causal: analysis is used to make an argument for changing a procedure, policy, or practice.

# Association vs Causation

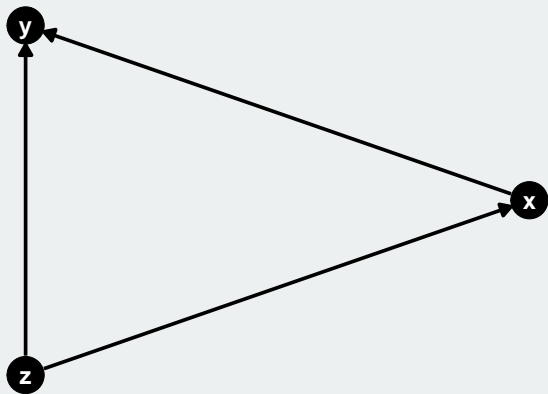
**Number of people who drowned by falling into a pool**  
correlates with  
**Films Nicolas Cage appeared in**



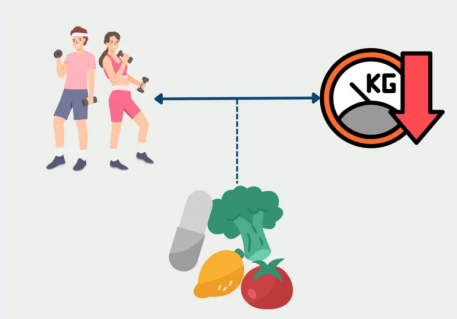
tylervigon.com

# The Difficulty of Casual Effects in Observational Data

**Challenge 1:** Omitted Variables (Z): variable that affects both X & Y that is not included in the analysis



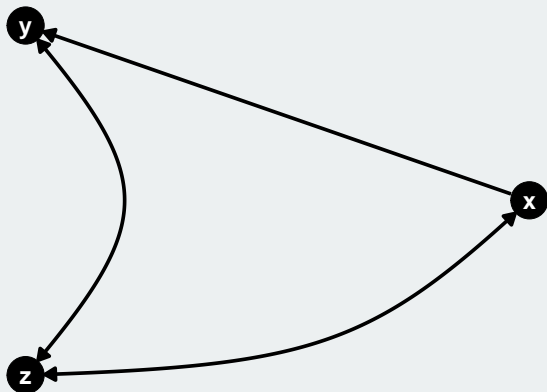
# Omitted Variable Bias



Does exercise cause weightloss?

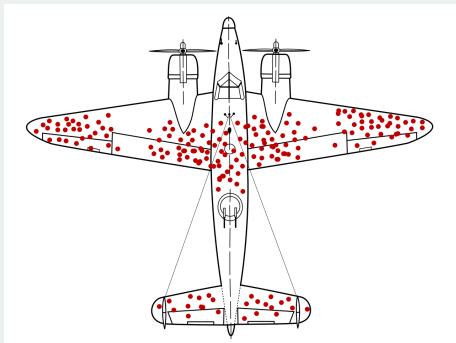
# The Difficulty of Casual Effects in Observational Data

**Challenge 2:** Selection Effects: improper (non random) selection of individuals, such that the sample of cases and controls are not drawn from the same reference population





# Selection Effects



Should we use to plan where to put additional armor on fighter jets based on the damage of planes that return to base?

# Solutions to OVB and Selection Effects

Omitted Variable Bias and Selection Effects mean **our estimates** of the effect of X on Y **are biased**

Possible Solutions:

1. Modelling and/or assumptions
2. Randomization of the intervention

## **2/** Randomization

# What is Randomization?

When we use the word **random** in this context, we mean:

- Every unit has some chance (i.e., a non-zero probability) of being selected to receive the intervention or be in the control group.
- The selection into these groups is based upon a random process

# The “Magic” of Randomization

Because our unit of analyses are **randomized to treatment and control groups, on average** there is **no difference** between these two groups on any **characteristics** other than their treatment.

Prior to treatment, on average the groups (Treatment and Control) are equivalent to one another on every observed and unobserved variable

- There is no omitted variable bias
- There are no selection effects

Can we check for randomization?

### **3/** Application: Encouraging Donors to Share About Charity

# Put Your Mouth Where Your Money Is: A Field Experiment Encouraging Donors to Share About Charity

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**Abstract.** Sharing about charity online or in personal conversations can help raise awareness and bolster fundraising efforts for good causes. However, when deciding whether to tell others about their charitable giving, donors may focus more on possible risks to their reputation (e.g., of seeming braggy, inauthentic) than on potential word-of-mouth benefits for the charity. In a large, preregistered field experiment, we tested a post-donation intervention designed to encourage word-of-mouth by reorienting donors to the idea that sharing about charity means doing more good; 77,485 donors received either a control or treatment message asking them to share a link to the cause via social media, text, or email. Compared with the organization's standard solicitation ("Please share your donation ..."), our intervention emphasized consequences of sharing *for the cause* ("Your donation can start a chain reaction ..."). This brief message increased click-through by 5.1% and likelihood of recruiting at least one later donation via word-of-mouth by 12.4%. Exploratory follow-up analyses suggest that these effects are most pronounced among larger-gift donors; the more donors gave, the more responsive they were to the intervention. Whereas many field experiments aim to increase giving directly, we test an intervention designed to boost word-of-mouth for worthy causes. We discuss approaches for encouraging sharing in the domain of charity and beyond.

**History:** Olivier Toubia served as the senior editor for this article.

**Supplemental Material:** The e-companion and data are available at <https://doi.org/10.1287/mksc.2023.1450>.

**Keywords:** field experiments • charitable giving • word-of-mouth • referral marketing • impression management

# Intervention Context

- **Research Question:** Can we effectively get donors to share about charitable donations?
- **Why is this relevant?**
  - Raises awareness and bolsters fundraising efforts for good causes
- This isn't easy: Donors face a trade off
  - -ve: (Personal) Reputation risks via appearing braggy or inauthentic, vs.
  - +ve: (External) Word of Mouth benefits to the charity
- Today we'll explore this question in the context of charitable giving for educational projects, and an intervention that encourages sharing about the charity after donation
  - $Y_i$  = clicking on a sharing pop-up OR recruiting future donors (0/1)
  - $T_i$  = an intervention encouraging sharing about cause post-donation (0/1)



# Importing the Data

```
charity <-  
  read_csv("data/exp2data.csv") %>%  
  mutate(condition = if_else(condition == 1,  
                             "treatment",  
                             "control"  
                             )  
  )
```

# Inspecting the Data

```
head(charity, n = 5)
```

```
# A tibble: 5 x 13
```

```
  user_id donated condition clickthrough recruited raised donatedsince    n
  <dbl>   <dbl> <chr>           <dbl>      <dbl> <dbl>         <dbl> <dbl>
1     14     50 control             0         0     0           1     1
2    208    423 control             1         0     0           0     9
3    717     50 control             0         0     0           1     1
4    784     32 treatment            0         0     0           1     3
5    879     50 treatment            0         0     0           0     2
```

```
# i 5 more variables: propdevice <dbl>, numdevice <dbl>, device <chr>,
#   firstvisit <dbl>, houroffirst <dbl>
```

# What is our data?

**Units:** objects being studied.

- Usually the rows of the data set.
- Examples: Survey respondents, consumers, firms, app users, influencers.
- Today's data: Charity Donors from [DonorsChoose.org](https://www.donorschoose.org)

**Variables:** measurements that can vary across units.

- Usually the columns of a data set.
- Examples: quantity bought, dollars spent, participation in an experiment.
- Today's data: Amount donated, clicked through pop up, referred a friend, treatment status,

## 4/ Estimating the Treatment Effect

# Causal Questions

Does cause based solicitation *increase* sharing?

Does cause based solicitation recruit *more* future donors?

→ Comparison between factual and counterfactual

**Fundamental problem of causal inference:** Analyst must infer counterfactual outcomes

# A Tale of Two Donors

```
# A tibble: 2 x 13
  user_id donated condition clickthrough recruited raised donatedsince n
  <dbl>   <dbl> <chr>           <dbl>     <dbl> <dbl>     <dbl> <dbl>
1  13498    797. control           0         0     0         1     6
2  13634    160. treatment          1         0     0         1     1
# i 5 more variables: propdevice <dbl>, numdevice <dbl>, device <chr>,
#   firstvisit <dbl>, houroffirst <dbl>
```

Did donor 13498 not share about their donation **because** they received a standard solicitation?

# Notation

- **Unit** (indexed by  $i$ ): individuals who have donated
- **Treatment variable** (causal variable of interest)  $T_i$ 
  - Received solicitation that emphasizes consequences of sharing for a cause
- **Treatment group** (treated units): Donors who receive a “standard” solicitation
- **Control group** (untreated units): Donors who receive the “share for a cause” solicitation
- **Outcome variable(s)** (response variable)  $Y_i$ 
  - click-through: Donor clicks on a pop-up encouraging sharing
  - recruitment: Did donor’s sharing lead to subsequent donation

# Notation

	$T_i$	$Y_i$ (click-through)
Donor saw standard solicitation	0	0
Donor saw solicitation for a cause	1	1



# Causal Effects and Counterfactuals

- What does “ $T_i$  causes  $Y_i$  mean?  $\rightsquigarrow$  **counterfactuals**,”*what if*”
  - Would donor  $i$  who saw the standard solicitation have clicked through if they saw the one that emphasized the cause
- Two **potential outcomes**:
  - $Y_i(1)$ : would donor click through if they saw cause based solicitation?
  - $Y_i(0)$ : would donor click through if they saw standard solicitation??
- **Causal effect**:  $Y_i(1) - Y_i(0)$
- **Fundamental problem of causal inference**: only one of the two potential outcomes is observable per observation.

# Potential Outcomes

	$T_i$	$Y_i$ (click-through)	$Y_i(0)$	$Y_i(1)$
Donor saw standard solicitation	0	0	0	???
Donor saw solicitation for a cause	1	1	???	1

- **Association is not causation**
- How can we infer the missing counterfactuals?

# How to Figure Out Counterfactuals

- **Need to find similar observations!**
- Sounds easy ... but
  - Harder than it sounds, and
  - Requires assumptions
- **Randomized experiments** are one possible solution

# Summation Notation

- Define the **sample size** (number of observations) as  $n$
- Therefore, we have  $n$  measurements of some variable,  $(Y_1, Y_2, \dots, Y_n)$
- We'll want to refer to the sum of these variables:

$$Y_1 + Y_2 + Y_3 + Y_4 + \dots + Y_{n-1} + Y_n$$

- This is cumbersome to write down, so we'll use the *sigma* notation

$$\sum_{i=1}^n Y_i = Y_1 + Y_2 + Y_3 + Y_4 + \dots + Y_{n-1} + Y_n$$

\*  $\sum_{i=1}^n Y_i$  says 1. Initialize the running sum to the case when  $i = 1$ . 2. Increment  $i$  by 1 and add the new expression to the running sum. 3. Repeat step 2 until  $i = n$ .

# Averages

- The **sample average** or **sample mean** is simply the sum of all values divided by the number of values

$$\bar{Y} = \frac{1}{n} \sum_{i=1}^n Y_i$$

- Suppose we surveyed six people, and 3 of them donated 20 dollars:

$$\bar{Y} = \frac{1}{6}(20 + 20 + 20 + 0 + 0 + 0) = 10$$

# Quantity of Interest

We want to estimate the average causal effect over all units:

$$\text{Sample Average Treatment Effect (SATE)} = \frac{1}{n} \sum_{i=1}^n [Y_i(1) - Y_i(0)]$$

What we can estimate instead:

$$\text{Difference in Means} = \bar{Y}_{\text{Treated}} - \bar{Y}_{\text{Control}}$$

where:

- $\bar{Y}_{\text{Treated}}$  is the observed average outcome in the treatment group
- $\bar{Y}_{\text{Control}}$  is the observed average outcome in the control group
- How do we ensure that the difference in means is a good estimate of the SATE?

# Randomized Control Trials

## Randomization!

Recall **Randomization** of the treatment makes the treatment and control groups “identical” on average.

- The two groups are similar in terms of all characteristics (both observed and unobserved).
  - Control group is similar to treatment group
  - $\rightsquigarrow$  outcome in control group  $\approx$  what would have happened to treatment group if they had been in control group

# Potential Problems with RCTs

- **Placebo effects:**
  - Respondents will be affected by any intervention, even if they shouldn't have any effect.
- **Hawthorne effects:**
  - Respondents act differently just knowing that they are under study.



# Did the Randomization *actually* Randomize?

If it did, **we shouldn't see large differences** between treatment and control group on **pre-treatment variables**.

- Called “balance checking”
- Pre-treatment variables are those that are unaffected by treatment.
- We can check in the actual data for some pre-treatment variable  $X$ 
  - $\bar{X}_{Treated}$ : average value of variable for treated group.
  - $\bar{X}_{Control}$ : average value of variable for control group.
- Under randomization,  $\bar{X}_{Treated} - \bar{X}_{Control} \approx 0$

# Multiple Treatments

- Instead of 1 treatment, we might have **multiple treatment arms**:
  - Control condition
  - Treatment A
  - Treatment B
  - Treatment C, etc
- In this case, we will look at multiple comparisons:
  - $\bar{Y}_{Treated,A} - \bar{Y}_{Control}$
  - $\bar{Y}_{Treated,B} - \bar{Y}_{Control}$
  - $\bar{Y}_{Treated,A} - \bar{Y}_{Treated,B}$

## **5/** Application: Encouraging Donors to Share About Charity

# Study Design: Setting

**When:** Four-week period from August 13, 2020, to September 9, 2020


**Where:** DonorsChoose.org

## Building Creative Thinkers Through STEM

Help me give my students engaging STEM building materials in order to unleash their creativity.

All donations currently doubled!  
You can complete this project for \$285.

BE THE FIRST TO DONATE \$569 STILL NEEDED expires Aug 25 [Give to this classroom](#)



Follow project for updates SHARE PROJECT

### My Project

My students are very creative and love using materials that they can manipulate and build during our Math & STEM center time. The materials I have requested are LEGO building sets as well as "Blocks Rock," a building game. These STEM-focused sets will be incorporated during the day.

### Building creative thinkers start with feeding their curiosity through play.

These LEGO and Rocks Block sets foster that creative spark needed for children at this developmental age. As a teacher, I strive to foster that creativity in ways that are captivating. These materials have a proven track record of hours of engagement.

Los Angeles, CA Grades PreK-2 Nearly all students from low-income households

Applied Sciences Mathematics Educational Kits & Games

*Ms. Montana will only receive her materials if this project is fully funded by August 25.*



**Ms. Montana**

Grades PreK-2  
Hoover Street Elementary School  
Los Angeles, CA

Nearly all students from low-income households

**EQUALITY FOCUS**  
At this school, more than 50% of students are Black, Latino, and/or Native American, and more than 60% come from low-income households. Learn how you, as a donor, can help this school support a more equitable education.

This project will reach 20 students.

Los Angeles, CA Grades PreK-2 Nearly all students from low-income households  
Applied Sciences Mathematics Educational Kits & Games

*Ms. Montana will only receive her materials if this project is fully funded by August 25.*

# Study Design: Treatments

## **Control Condition:**

*“Share this classroom with family and friends”*

## **Treatment Condition:**

*“Your donation can start a chain reaction, but only if you tell others about the cause. Share this classroom with family and friends”*

# Study Design: Sharing Contributions

## Facebook (post):

Say something about this...



DONORSCHOOSE.ORG

### Modern Learning, a project from Mrs. Jattan

Help me give my students methods for fun and interactive learning

Tag Friends Check in Feeling/Activity

News Feed

Friends

Your Story

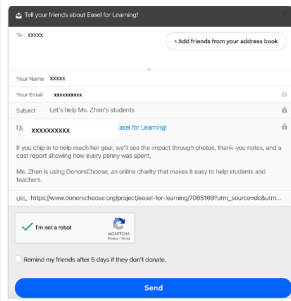
Friends

Share to Facebook

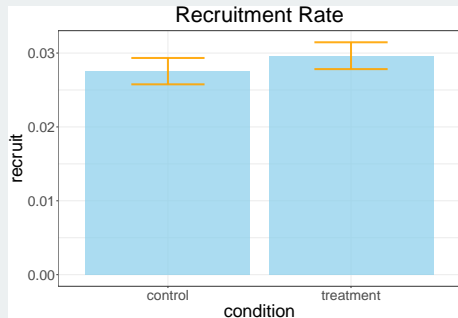
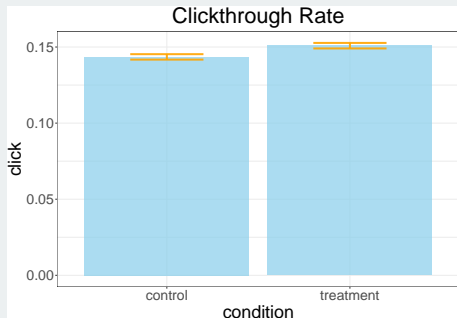
## Twitter:



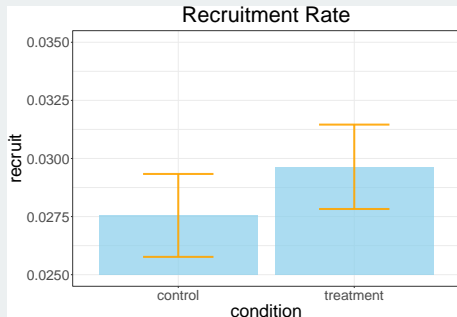
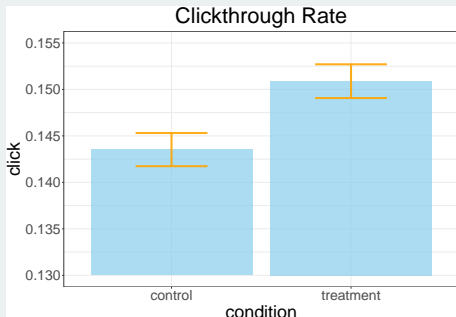
## Gmail:



# Visualizing the Outcomes



# Visualizing the Data ... and Cutting the axis





# Computing Proportions by Treatment

```
charity %>%  
  group_by(condition) %>%  
  summarize(click = mean(clickthrough),  
            recruit = mean(recruited))
```

```
# A tibble: 2 x 3  
  condition click recruit  
  <chr>      <dbl>  <dbl>  
1 control    0.144  0.0275  
2 treatment  0.151  0.0296
```

# Estimating SATEs: Clickthroughs

What's the **correct** statistical test?

```
# A tibble: 1 x 6
  statistic chisq_df p_value alternative lower_ci upper_ci
  <dbl>     <dbl> <dbl> <chr>          <dbl>     <dbl>
1      8.30         1 0.00395 two.sided     -0.0124  -0.00235
```

# Estimating SATEs: Recruitment

What's the **correct** statistical test?

```
# A tibble: 1 x 6
  statistic chisq_df p_value alternative lower_ci upper_ci
  <dbl>     <dbl> <dbl> <chr>         <dbl>     <dbl>
1      5.04         1 0.0248 two.sided    -0.00418 -0.000280
```

# Regression as Mean Estimation

- Let  $W_i$  be defined as follows:

$$W_i = \begin{cases} 1 & \text{if } i \text{ in the Treatment Group} \\ 0 & \text{if } i \text{ in the Control Group} \end{cases}$$

Then we can write:

$$Y_i = Y_i(0) + W_i(Y_i(1) - Y_i(0))$$

# Regression as Mean Estimation

Recall the the definition of  $\bar{Y}_{Control}$ :

$$\begin{aligned}\bar{Y}_{Control} &= \frac{1}{n_0} \sum_{i=0}^{n_0} Y_i(0) \\ &= \hat{\beta}_0\end{aligned}$$

This is a consistent estimator of the expected value:

$$\beta_0 = E[Y_i(0)]$$

# Regression as Mean Estimation

Then, recall our definition of difference in means:

$$\begin{aligned}\text{Difference in Means} &= \bar{Y}_{\text{Treated}} - \bar{Y}_{\text{Control}} \\ &= \frac{1}{n_1} \sum_{i=1}^{n_1} Y_i(1) - \frac{1}{n_0} \sum_{i=1}^{n_0} Y_i(0) \\ &= \hat{\beta}_1\end{aligned}$$

which is a consistent estimator of the difference in means at the population level

$$\beta_1 = E[Y_i(1) - Y_i(0)]$$

# Regression as Mean Estimation

Consider the regression equation:

$$Y_i = \beta_0 + W_i\beta_1 + \varepsilon_i$$

Then take expectations condition on treatment assignment:

$$E(Y_i) = \beta_0 + W_i\beta_1$$

This implies that we can estimate the ATE of a binary treatment via a linear regression of observed outcomes  $Y_i$  on a vector consisting of intercept and treatment assignment,  $(1, W_i)$ .

# Regression-based SATE: clickthrough

$$clickthrough_i = \beta_0 + \beta_1 Condition_i + \varepsilon_i$$

```
# A tibble: 2 x 5
```

term	estimate	std.error	statistic	p.value
<chr>	<dbl>	<dbl>	<dbl>	<dbl>
1 (Intercept)	0.144	0.00180	79.6	0
2 conditiontreatment	0.00736	0.00255	2.89	0.00383

**In class:** Interpret these coefficients.



# Regression-based SATE

$$recruit_i = \beta_0 + \beta_1 Condition_i + \varepsilon_i$$

# A tibble: 2 x 5

term	estimate	std.error	statistic	p.value
<chr>	<dbl>	<dbl>	<dbl>	<dbl>
1 (Intercept)	0.0179	0.000695	25.8	8.26e-146
2 conditiontreatment	0.00223	0.000982	2.27	2.32e- 2

**In class:** Interpret these coefficients.

# A Balance Test?

The data provided by the authors **does not contain any information on pre-experiment variables.**

Thus, we **cannot test for balance** between control and treatment groups

**Question:** What pre-experiment variables would you want to use to test for balance?

## **6/** Wrap Up

# Summary

- Causal inference with observational data is difficult due to omitted variable bias and selection effects
- Randomized Control Trials solve these issues and allow us to estimate a Sample Average Treatment Effect (SATE) by randomly allocating units of observation to either an intervention or a control condition
- SATE can be estimated from classical tools for statistical inference: t-tests, proportions tests and linear regression

# License & Citation

Suggested Citation:

```
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  title={"Social Media and Web Analytics: Casuation and  
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  author={Lachlan Deer},  
  year={2024},  
  url = "https://tisem-digital-marketing.github.io/2024-smwa"  
}
```

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