Identification: Difference-in-Difference estimator

Presented by Ziyodullo Parpiev at Regional Summer School for Young Economists June 19, 2017

Today's Class

- Non-experimental Methods: Difference-indifferences
 - Understanding how it works
 - How to test the assumptions
 - Some problems and pitfalls

Experiments are good, but what if we don't have an experiment?

- Would like to find a group that is exactly like the treatment group but didn't get the treatment
- Hard to do because
 - Lots of unobservables
 - Data is limited
 - Selection into treatment

Water pump on Broadwick street, Soho, London



Background Information

- Water supplied to households by competing private companies
- Sometimes different companies supplied households in same street
- In south London two main companies:
 - Lambeth Company (water supply from Thames Ditton, 22 miles upstream)
 - Southwark and Vauxhall Company (water supply from Thames)

In 1853/54 cholera outbreak

Death Rates per 10000 people by water company

- Lambeth 10
 Southwark and Vauxhall 150
- Might be water but perhaps other factors
- Snow compared death rates in 1849 epidemic
 - Lambeth 150
 - Southwark and Vauxhall 125
- In 1852 Lambeth Company had changed supply from Hungerford Bridge

The effect of clean water on cholera death rates

	1849	1853/ 54	Difference
Lambeth	150	10	-140
Vauxhall and Southwark	125	150	25
Difference	-25	140	-165

Counterfactual 2: 'Control' group time difference. Assume this would have been true for 'treatment' group

Counterfactual 1: Pre-Experiment difference between treatment and control—assume this difference is *fixed* over time

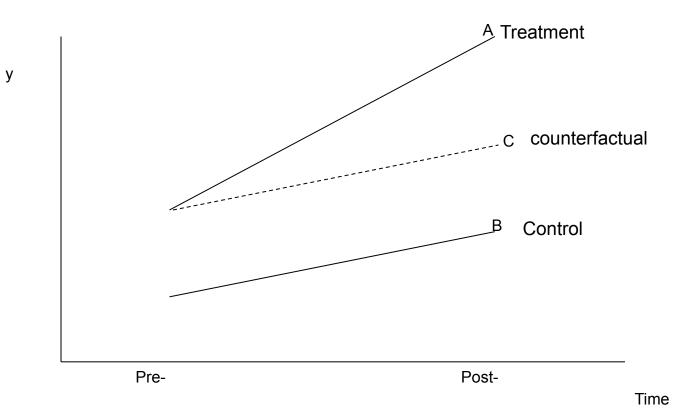
This is basic idea of Differences-in-Differences

- Have already seen idea of using differences to estimate causal effects
 - Treatment/control groups in experimental data
- We need a counterfactual because we don't observe the outcome of the treatment group when they weren't treated (i.e. (Y₀ | T=1))
- Often would like to find 'treatment' and 'control' group who can be assumed to be similar in every way except receipt of treatment

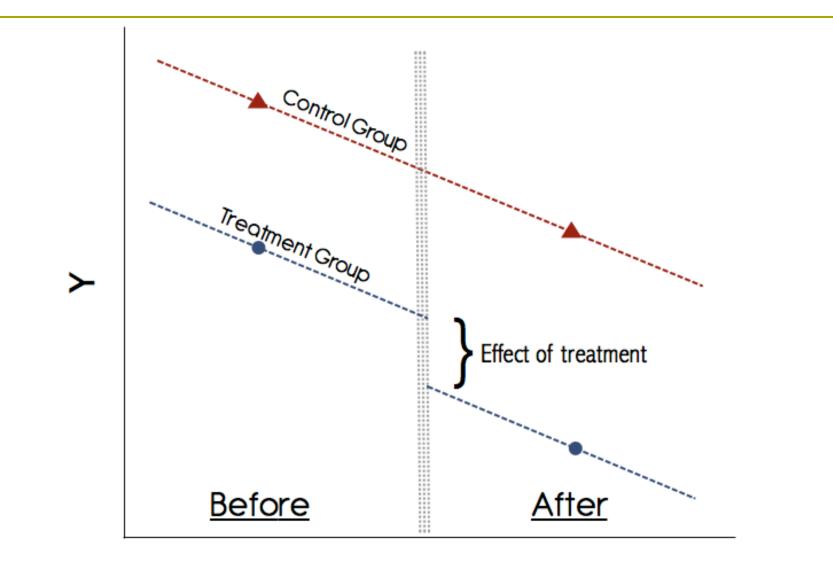
A Weaker Assumption is..

- Assume that, in absence of treatment, difference between 'treatment' and 'control' group is constant over time
- With this assumption can use observations on treatment and control group pre- and posttreatment to estimate causal effect
- Idea
 - Difference pre-treatment is `normal' difference
 - Difference pre-treatment is `normal' difference + causal effect
 - Difference-in-difference is causal effect

A Graphical Representation



- A B = Standard differences estimator
- C B = Counterfactual `normal' difference
- A C = Difference-in-Difference Estimate



Assumption of the D-in-D estimate

- D-in-D estimate assumes trends in outcome variables the same for treatment and control groups
 - Fixed difference over time
 - This is not testable because we never observe the counterfactual
- Is this reasonable?
 - With two periods can't do anything
 - With more periods can see if control and treatment groups 'trend together'

Recap: Assumptions for Diff-in-Diff

Additive structure of effects.

- We are imposing a linear model where the group or time specific effects only enter additively.
- No spillover effects
 - The treatment group received the treatment and the control group did not
- Parallel time trends:
 - there are fixed differences over time.
 - If there are differences that vary over time then our second difference will still include a time effect.

Issue 1: Other Regressors

Can put in other regressors just as usual

- think about way in which they enter the estimating equation
- E.g. if level of W affects level of y then should include ΔW in differences version

Conditional comparisons might be useful if you think some groups may be more comparable or have different trends than others Issue 2: Differential Trends in Treatment and Control Groups

- Key assumption underlying validity of Din-D estimate is that differences between treatment and control group would have remained constant in absence of treatment
 - Can never test this
 - With only two periods can get no idea of plausibility
 - But can with more than two periods

Differences-in-Differences: Summary

A very useful and widespread approach

Validity does depend on assumption that trends would have been the same in absence of treatment

Often need more than 2 periods to test:

- Pre-treatment trends for treatment and control to see if "fixed differences" assumption is plausible or not
- See if there's an Ashenfelter Dip