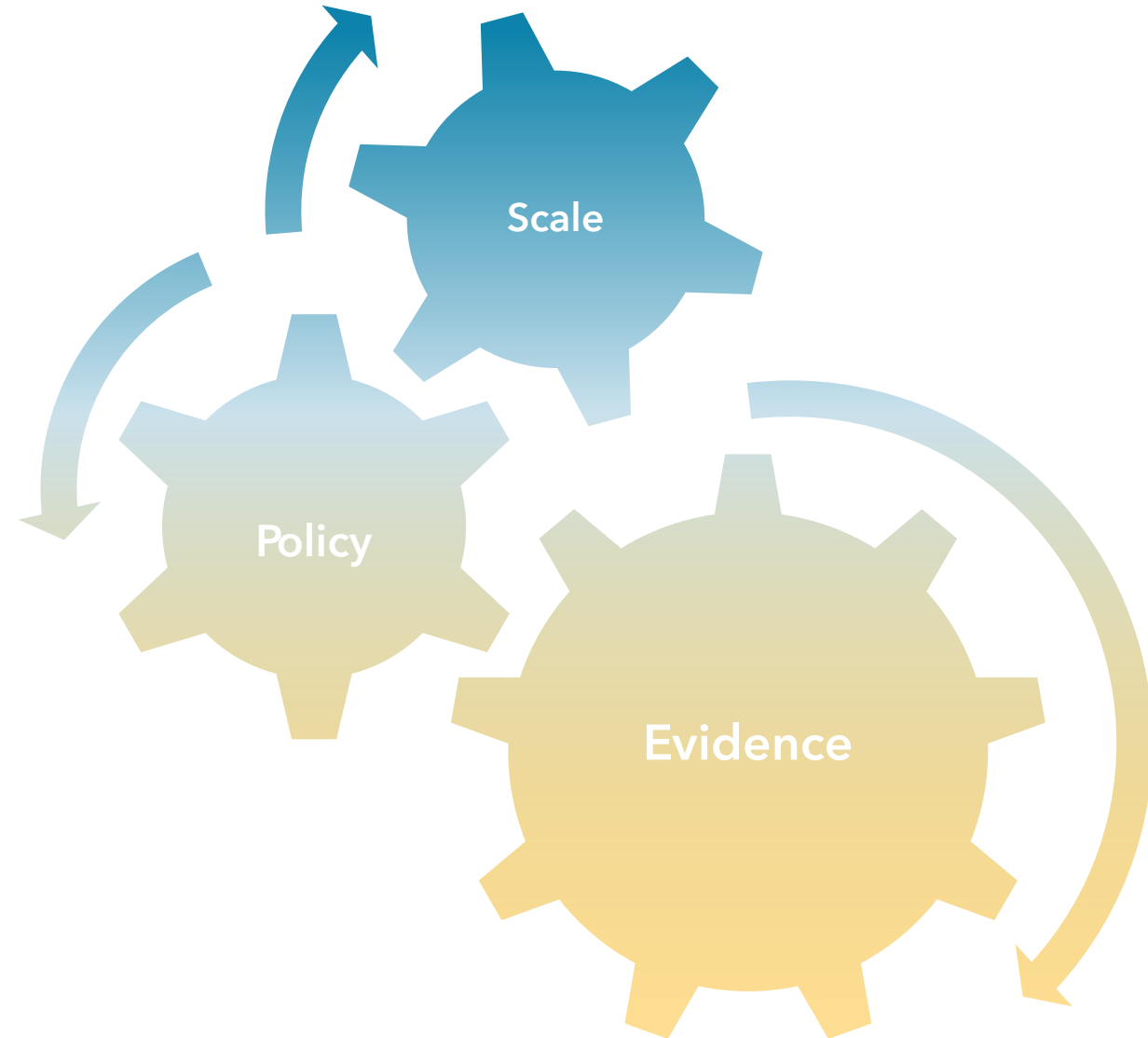
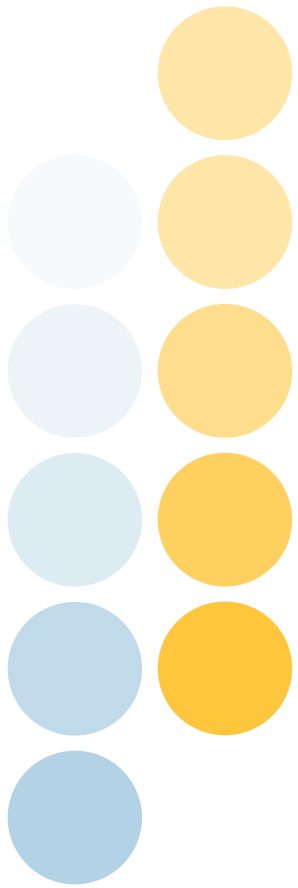


Impact Evaluation Collaborative

Moving Economic
Inclusion to Scale

IE WORKSHOP





Non-experimental impact evaluation methods

What we know so far

We want to isolate the causal effect ("impact") of our interventions on outcomes of interest

- Key problem is the search for a **counterfactual**: what would have happened to our participants in absence of the project?
- Challenges are:
 1. **Comparison over time**: Other things are happening at the same time, e.g., price and weather shocks
 2. **Comparison across households**: We don't know why certain people participate
- Objective is finding a suitable control group that acts as a **counterfactual**

What we know so far

- Randomizing the assignment to "treatment" is the "gold standard" methodology (simple, accurate, cheap)
 - Rely on few assumptions
 - Less data required
 - Easy to explain
- **What if we really cannot use randomization?**
 - e.g., large infrastructure projects that can't be randomized (roads, refugee camps, ...)
 - There are other methods (difference-in-differences, matching, discontinuity)
 - Other methods rely on key assumptions
- Mixing of methods is possible!
 - RCTs and non-experimental methods are complementary, not substitutes!

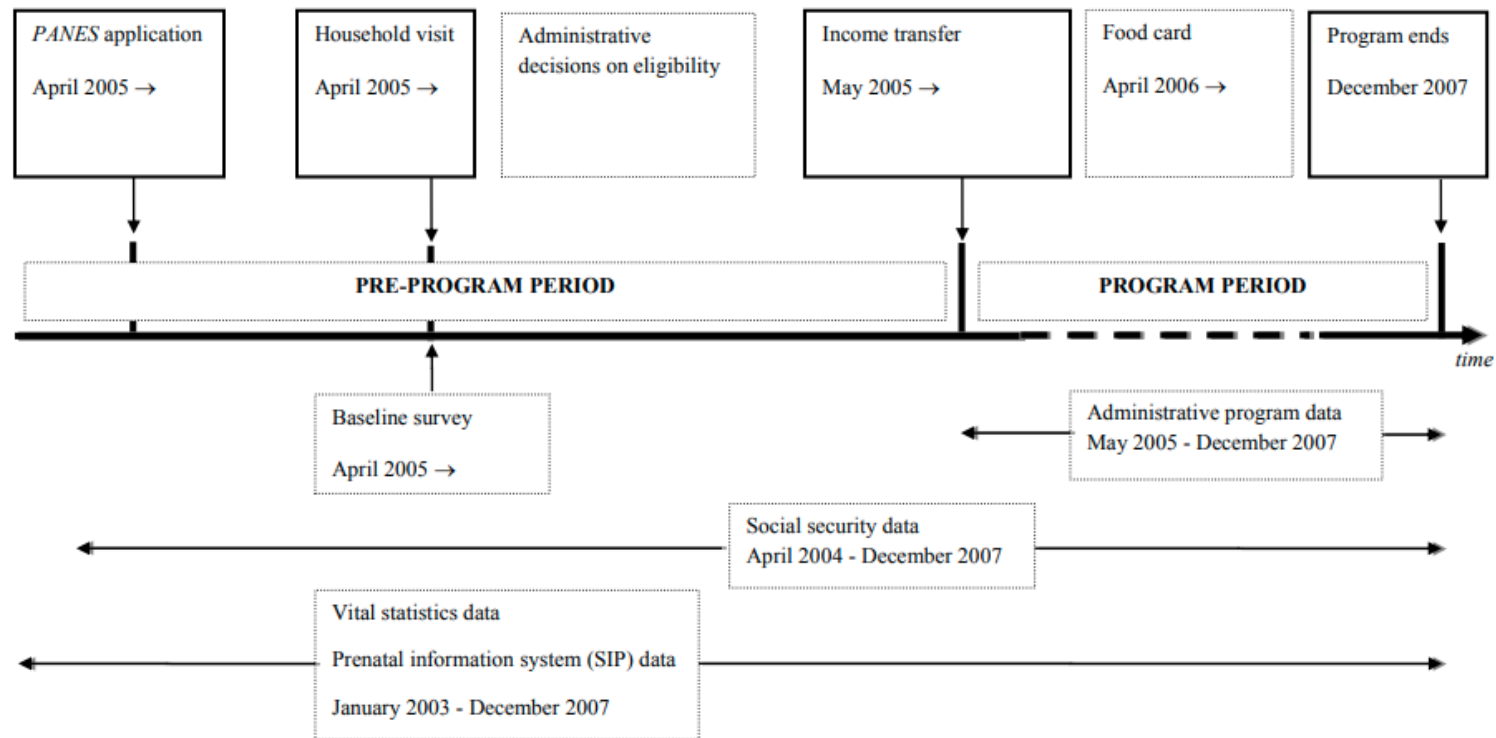
- 
- 
- I. DIFFERENCE-IN-DIFFERENCES**
 - II. REGRESSION DISCONTINUITY DESIGN**
 - III. COMBINING METHODS**

Case study 1: Uruguay PANES

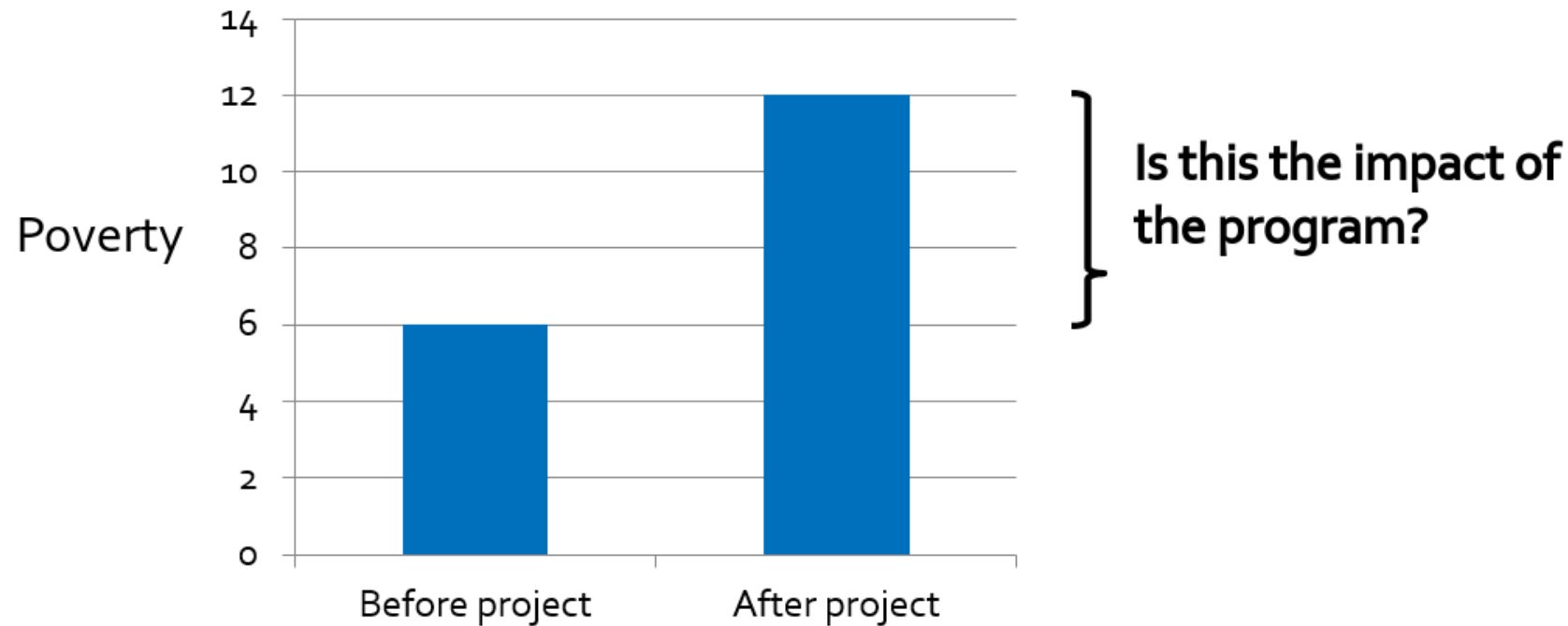
- Uruguay's 2005-2007 Plan de Atención Nacional a la Emergencia Social (PANES)
 - Temporary social protection program targeting poorest 20% of households below poverty line
 - Motivated by 2001-2002 crisis in neighboring countries
- PANES combined monthly cash transfer, food card for families, emergency employment, and trainings
- [Amarante et al. \(2011\)](#) use a mix of non-experimental methods to show the program reduced low birthweight by 15%

Case study 1: Uruguay PANES

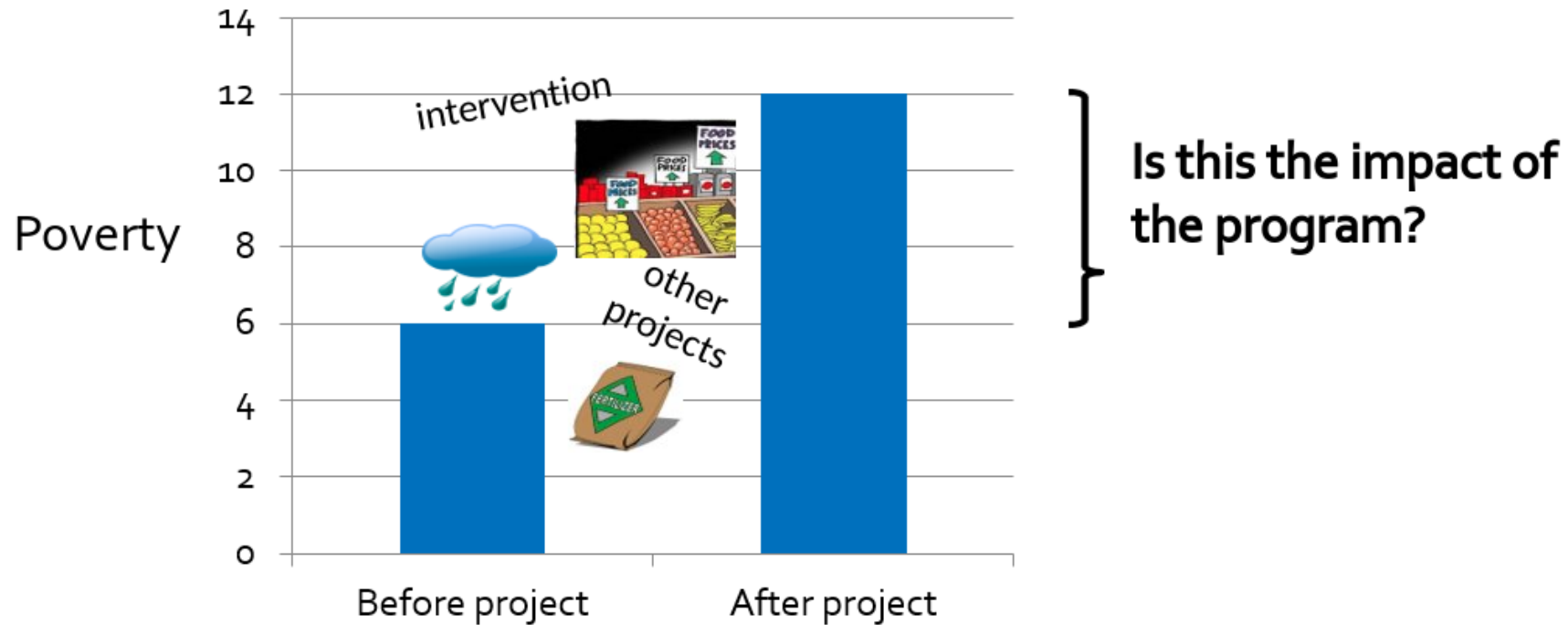
Figure 1: Timing of PANES program activities and data collection



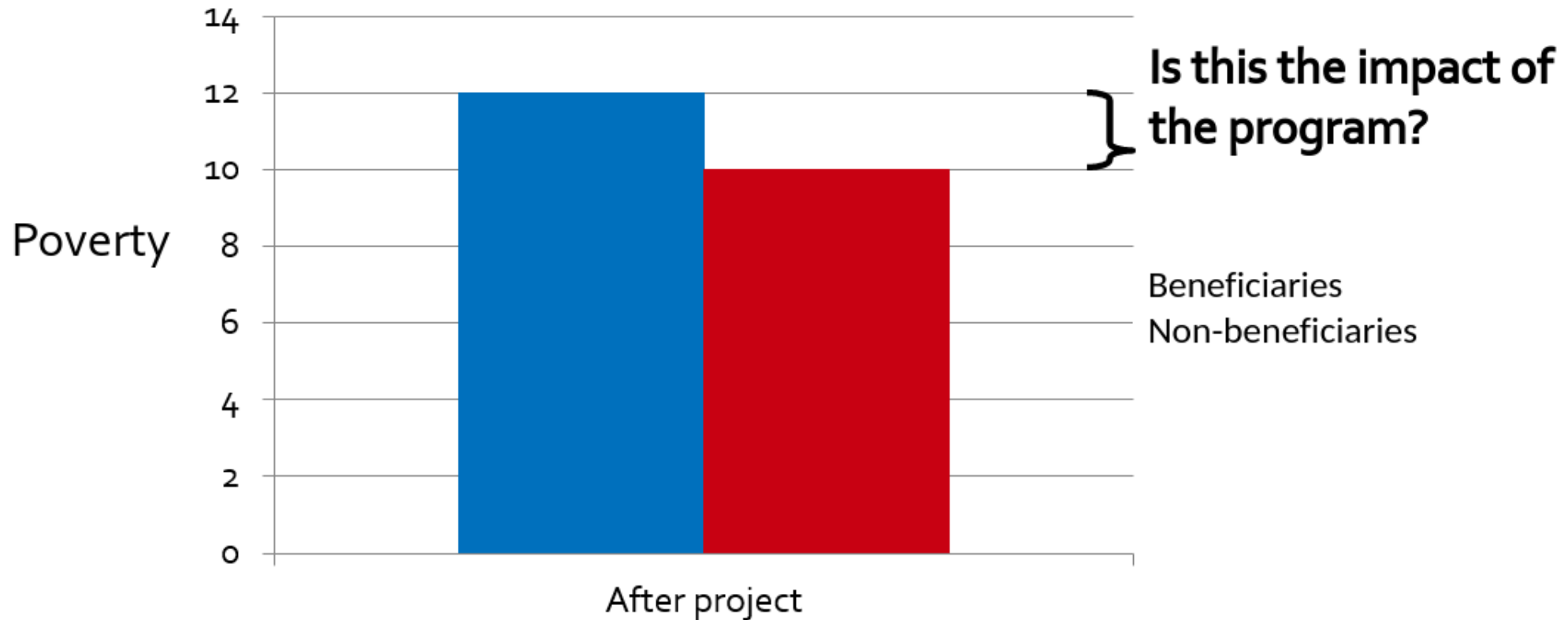
Compare beneficiaries before and after?



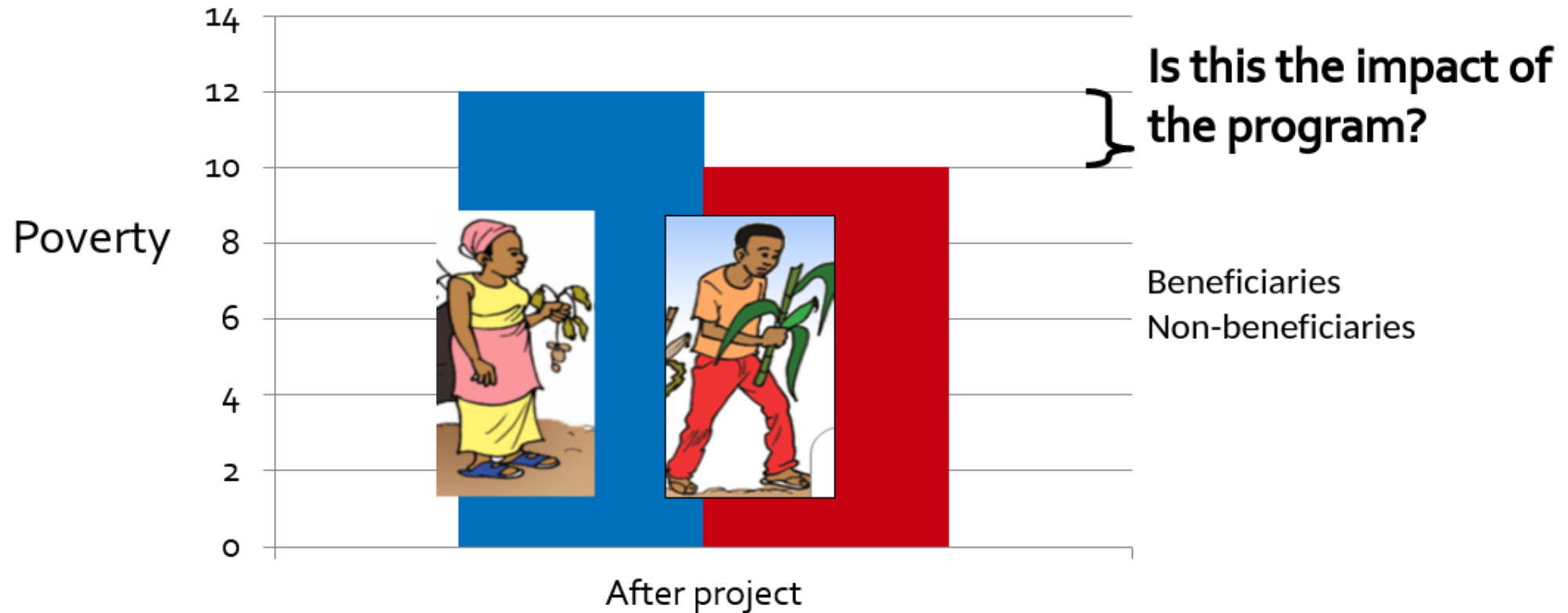
Compare beneficiaries before and after?



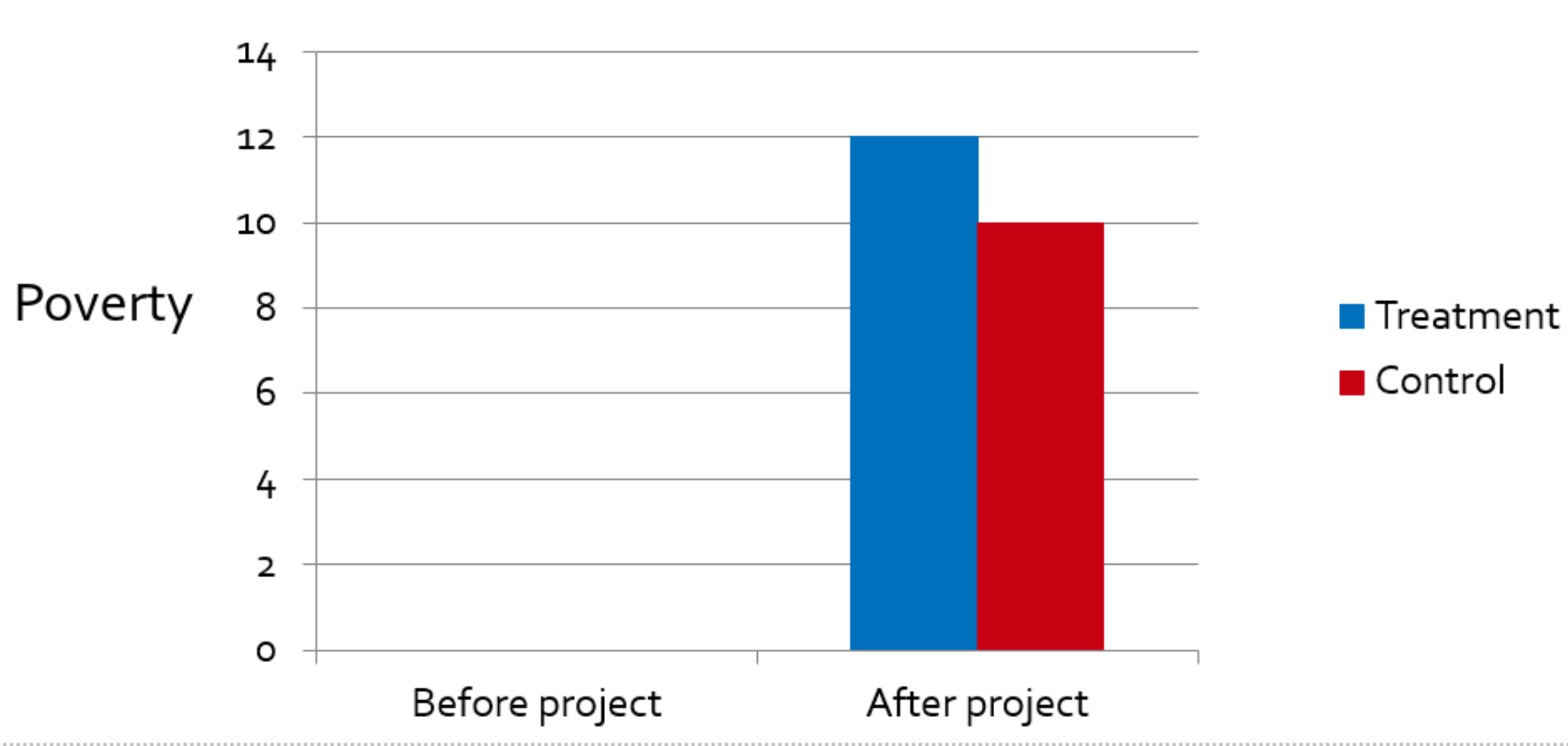
Compare beneficiaries and non-beneficiaries?



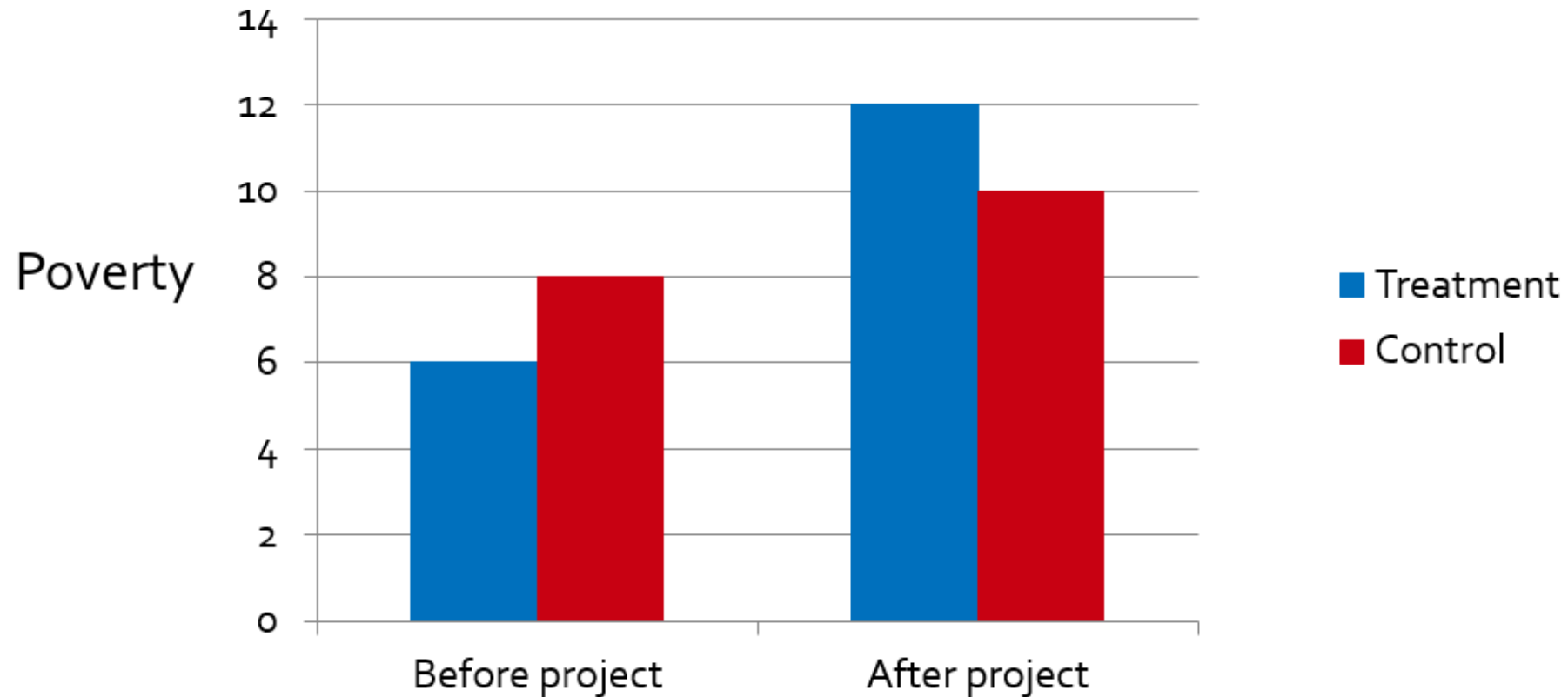
Compare beneficiaries and non-beneficiaries?



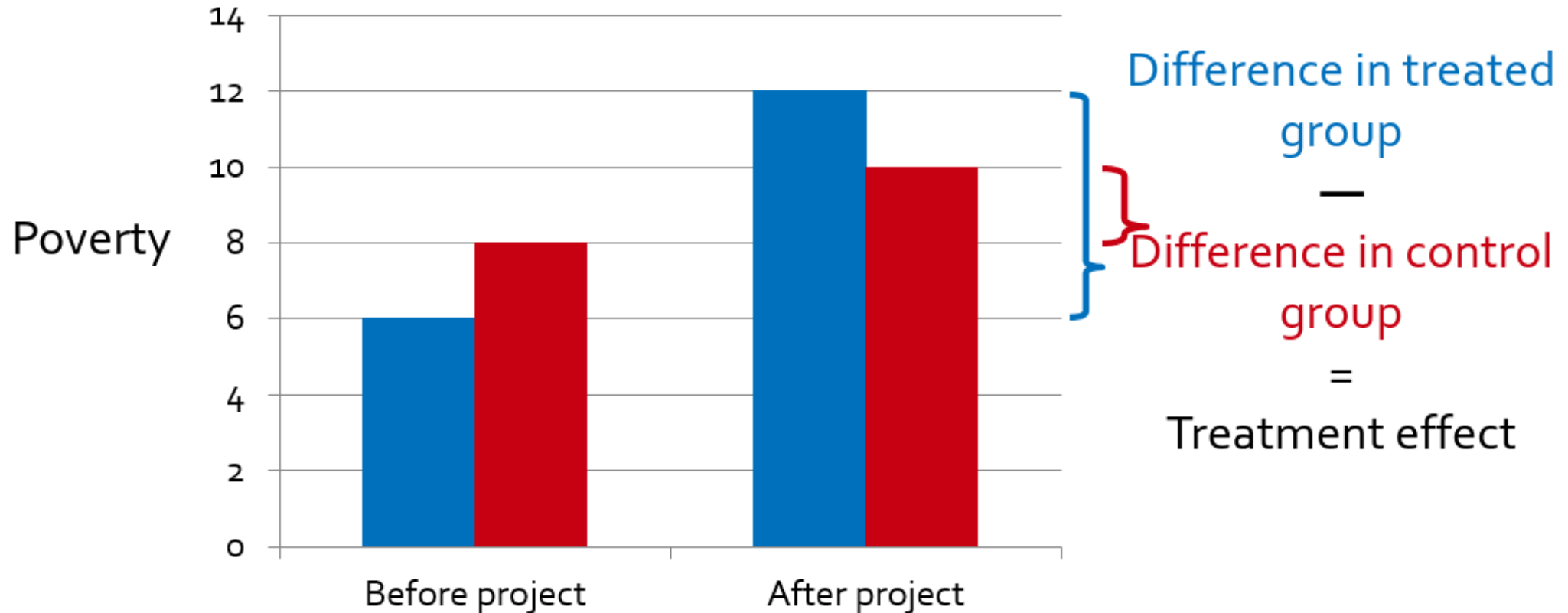
D-i-D: Combine the two differences?



D-i-D: Combine the two differences?



Difference-in-differences



Difference-in-differences

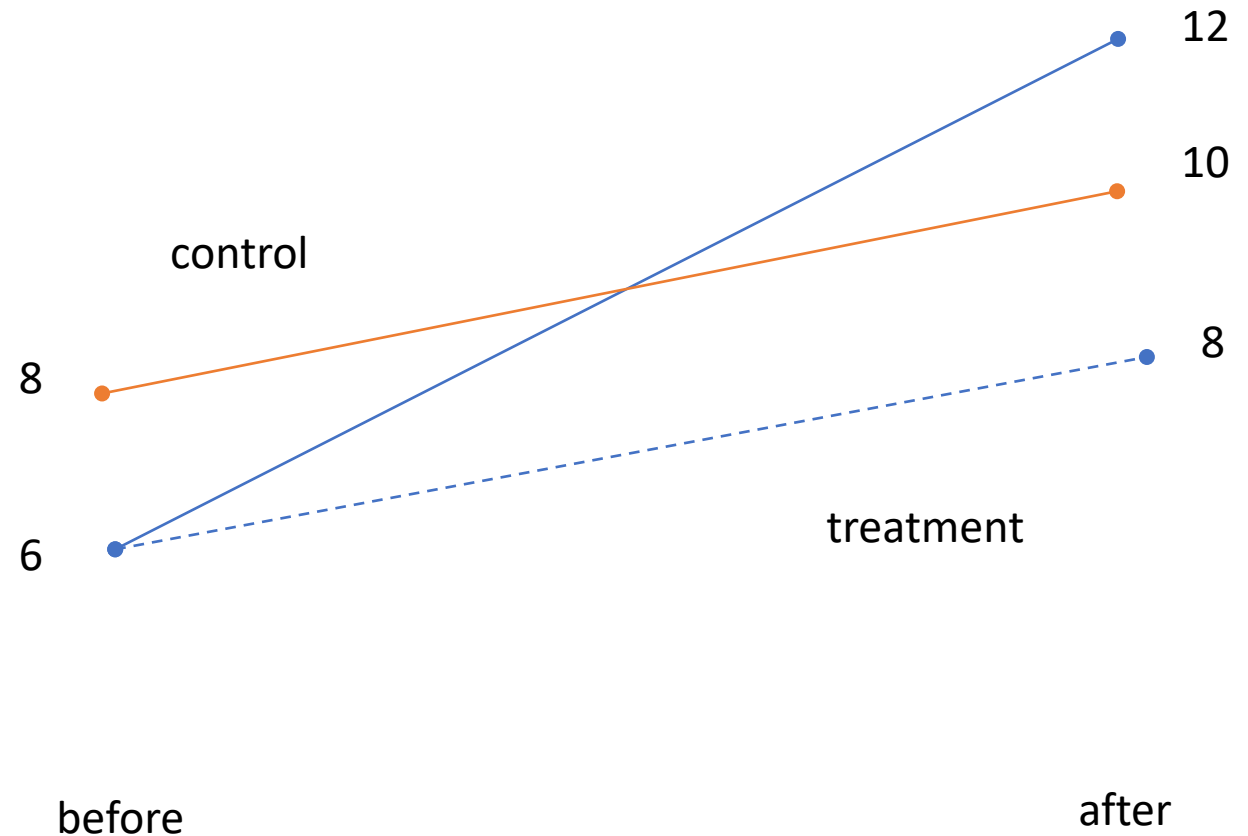
- Difference #1: compare over time, before and after the program
- Difference #2: compare treatment and control groups

	Treatment	Control	Difference
Before	6	8	-2
After	12	10	2
Difference	6	2	4

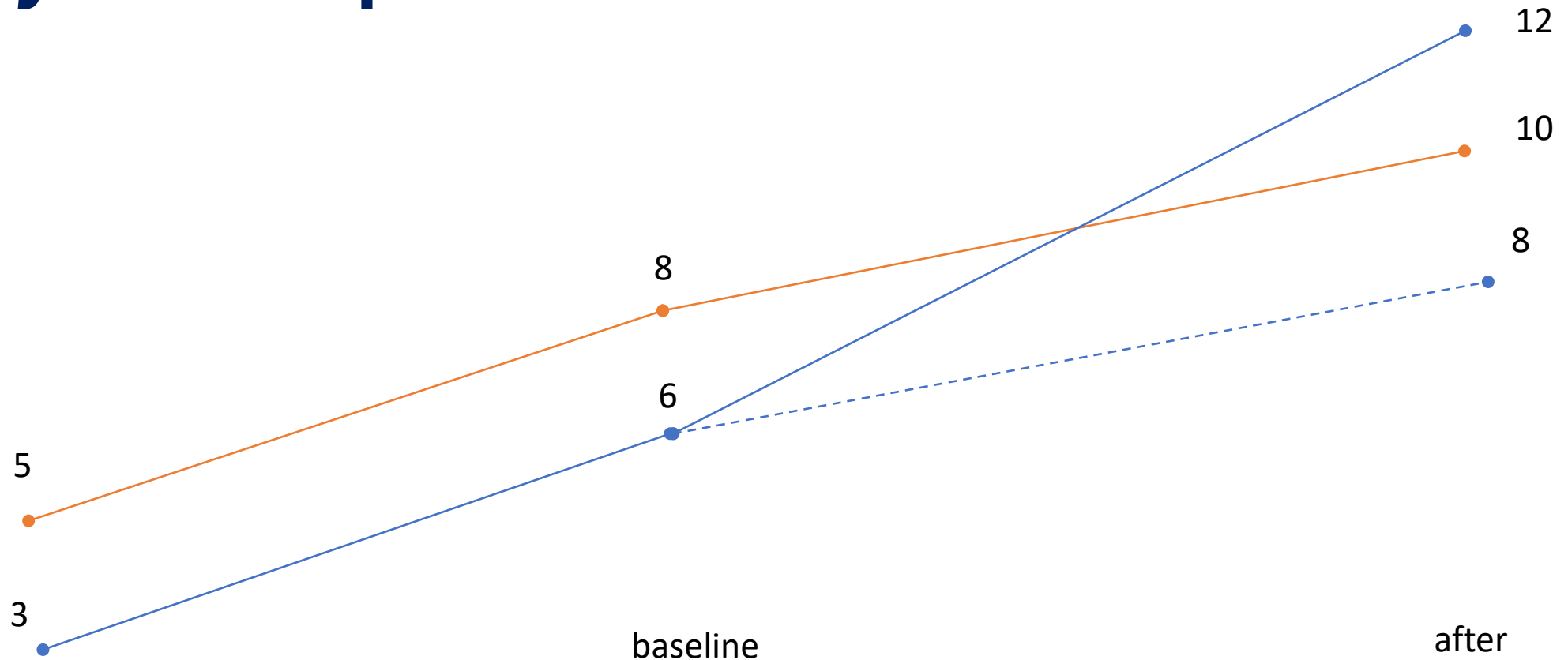
Annotations:

- Arrows from "Treatment - Control" point to the -2 and 2 values in the "Difference" column.
- Arrows from "Before - After" point to the 6 and 2 values in the "Difference" row.
- An arrow from "Difference-in-differences" points to the 4 value in the bottom-right cell.

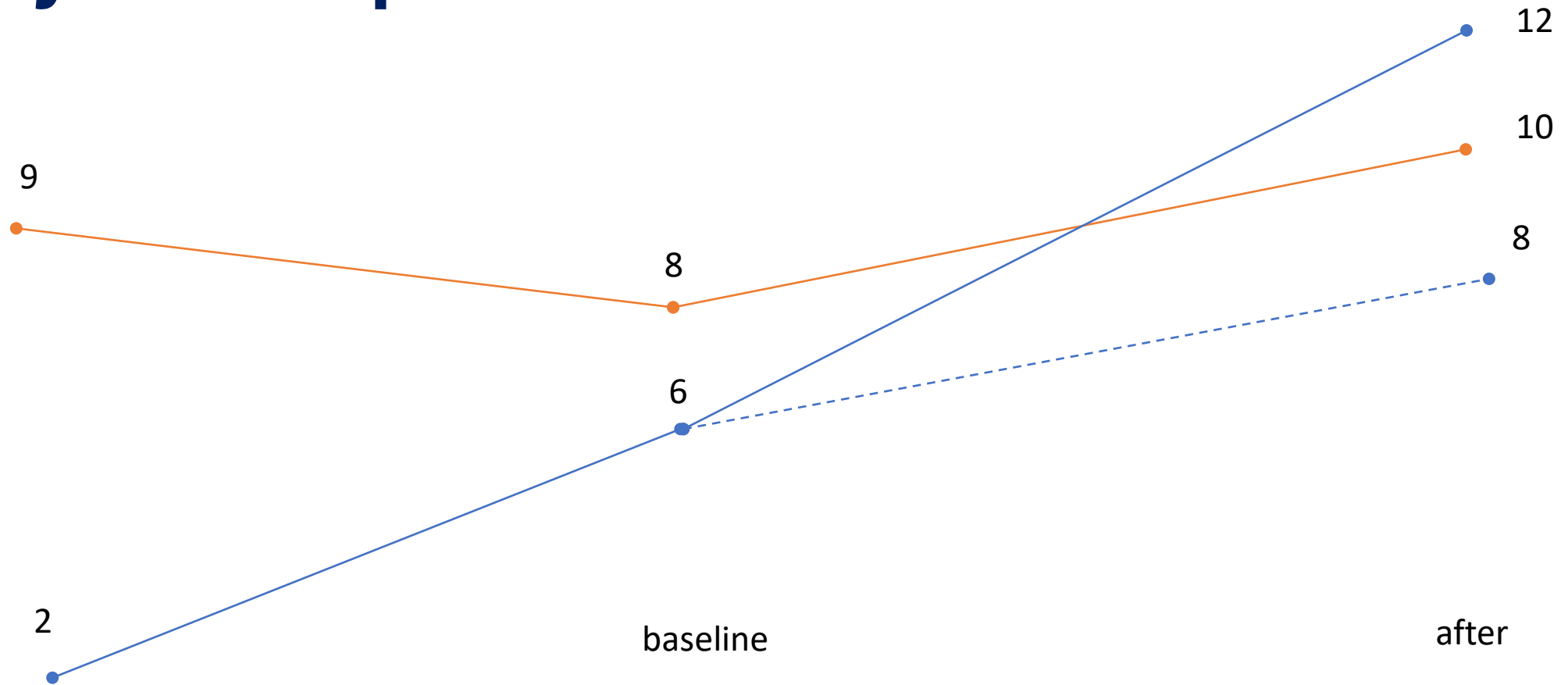
Key assumption: Parallel trends



Key assumption: Parallel trends

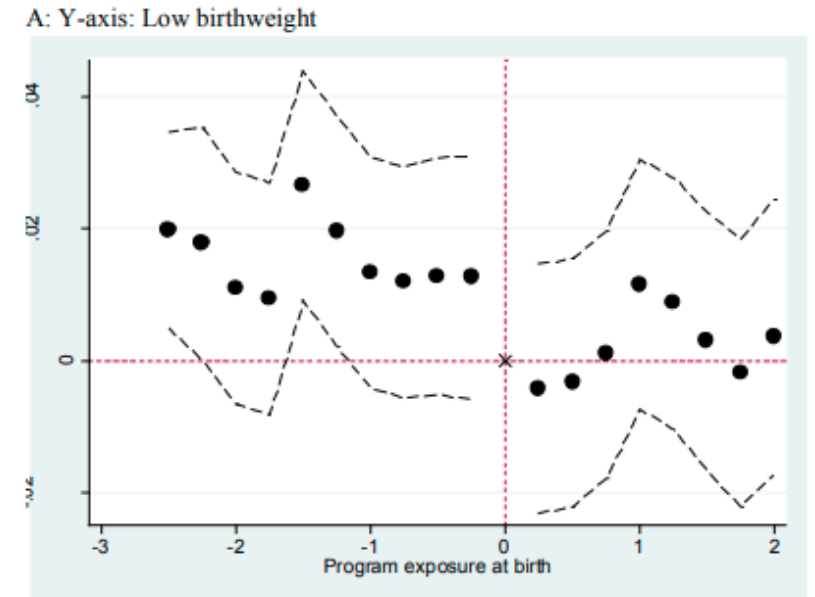


Key assumption: Parallel trends



Case study 1: Difference-in-differences

- Eligible PANES applicants
 - 2003 - 2005 (pre-PANES) low birthweight: 0.102
 - 2005 - 2007 (post-PANES) low birthweight: 0.091
- Ineligible PANES applicants
 - 2003 - 2005 (pre-PANES) low birthweight: 0.093
 - 2005 - 2007 (post-PANES) low birthweight: 0.091
- Difference-in-differences estimate
 - $(\text{Treated after} - \text{Treated before}) - (\text{Control after} - \text{Control before}) =$
 - $(0.091 - 0.102) - (0.091 - 0.093) = -0.009$
 - 10% decrease in low birthweight



How do we know?

- Compare history of control and treatment groups before baseline
 - Sometimes administrative data is available, but often limited
- More likely to hold when groups are similar at baseline, and treatment selection is based on criteria other than the outcome indicator of interest
 - Often not the case: Targeting is frequently determined by outcomes we care the most about, e.g., poverty

Identifying a control group

Which of these two groups could serve as a counterfactual? Choose!

1. Households in the same country but without PANES?
2. Households outside the country and without PANES?
3. Both?
4. Neither?

Why didn't those communities get the intervention?

- Selection criteria are sources of differences!

Case study 2: Turkey ESSN

- In some cases, matching methods can help improve balance between control and treatment groups in a difference-in-differences design
 - [Özler et al. \(2021\)](#) find an emergency cash transfer program targeting refugees in Turkey increased household consumption, but induced children to shift from treated to control households
 - To improve credibility of difference-in-difference estimates, they compare changes in outcomes among matched treated and control households with similar characteristics

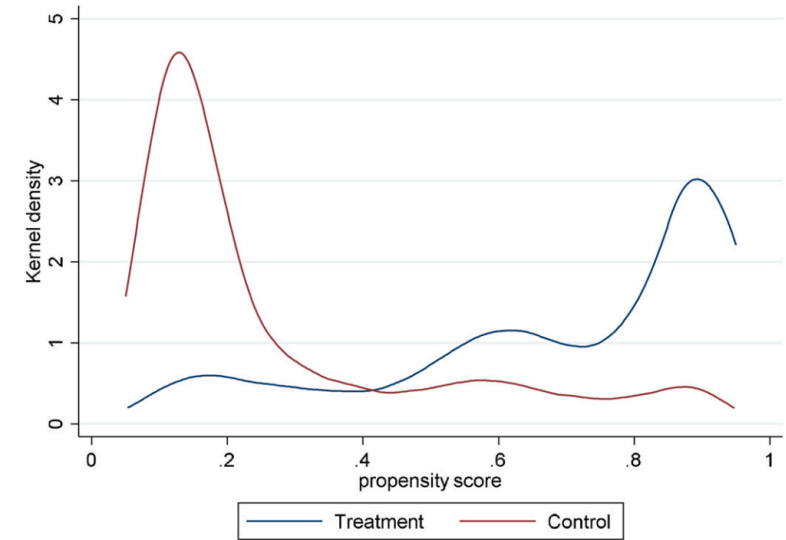
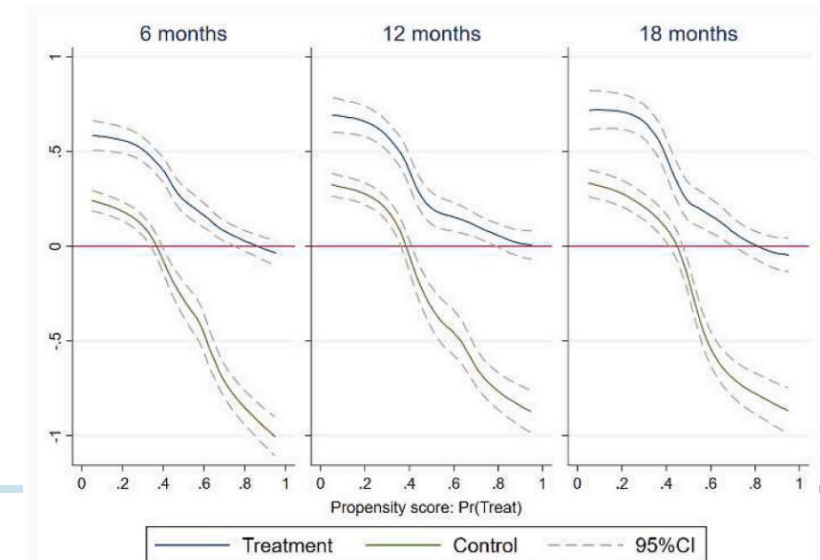


Fig. 1. Kernel density smoothing of propensity score across treatment and control samples.

Panel B: Changes in the number of children aged 0-17 years since baseline by propensity score



Summary: Difference-in-differences

- Compare treatment and control groups before AND after the project interventions
- Pick control that is as similar as possible to the treatment group at baseline
 - Create a long list of sites that could receive the project
 - Use historical data available to pick comparison sites
- If selection already happened, we need historical data to make the parallel trends assumption credible

Regression discontinuity designs

- Regression discontinuity designs (RDD) are more similar to randomization
 - Identifying "almost random" assignment from selection process
- Need a clear and enforced eligibility rule
 - A simple, quantifiable score ("threshold")
- Assignment to treatment must be based on this rule
 - e.g., target households with poverty score above a threshold
 - e.g., target households with children below a certain age
- Basic idea: Compare individuals just above and just below threshold

RDD logic

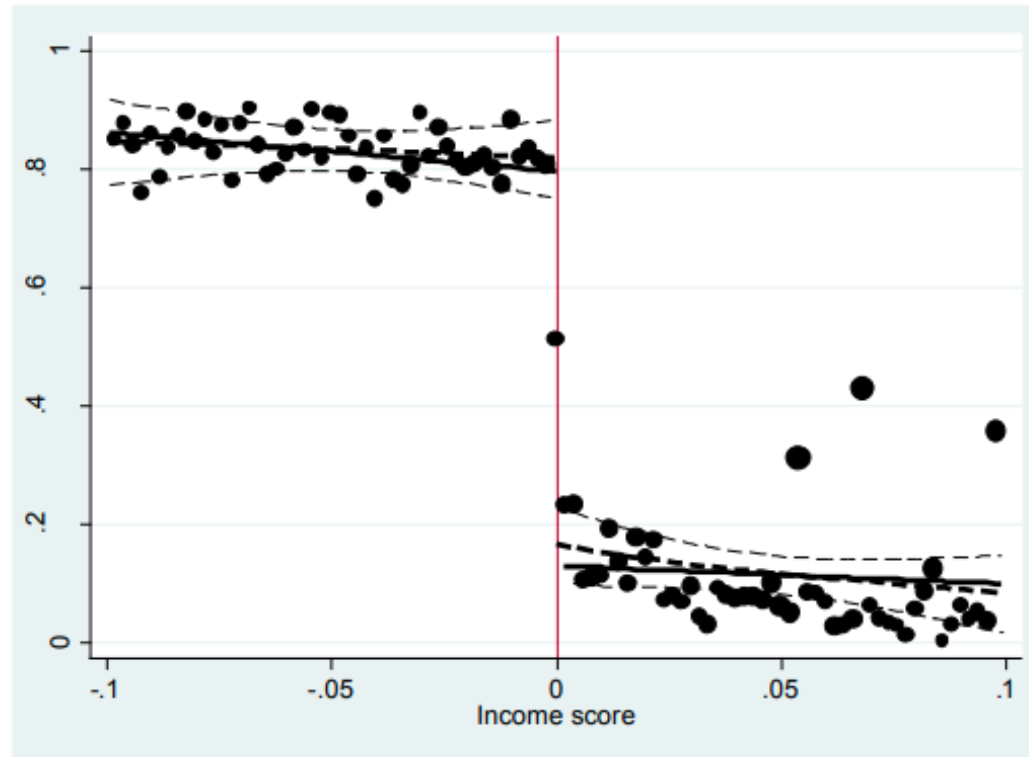
- Assignment to treatment depends on continuous "score" or ranking (e.g., child's age)
 - Potential beneficiaries are ordered by score
 - There is a cut-off point for "eligibility" -- clearly defined pre-determined criterion
 - Cut-off determines assignment to treatment
- This usually results from administrative decisions
 - e.g., resource constraints limit coverage
 - e.g., very targeted intervention expected to be more suitable for some people
 - Transparent rules rather than discretion used

Case study 3: Uruguay PANES

- Two approaches to estimating the impacts of Uruguay PANES
 - **Difference-in-differences:** Compare eligible and ineligible beneficiaries, before and after the program
 - **Regression discontinuity design:** Compare just barely eligible and just barely ineligible beneficiaries

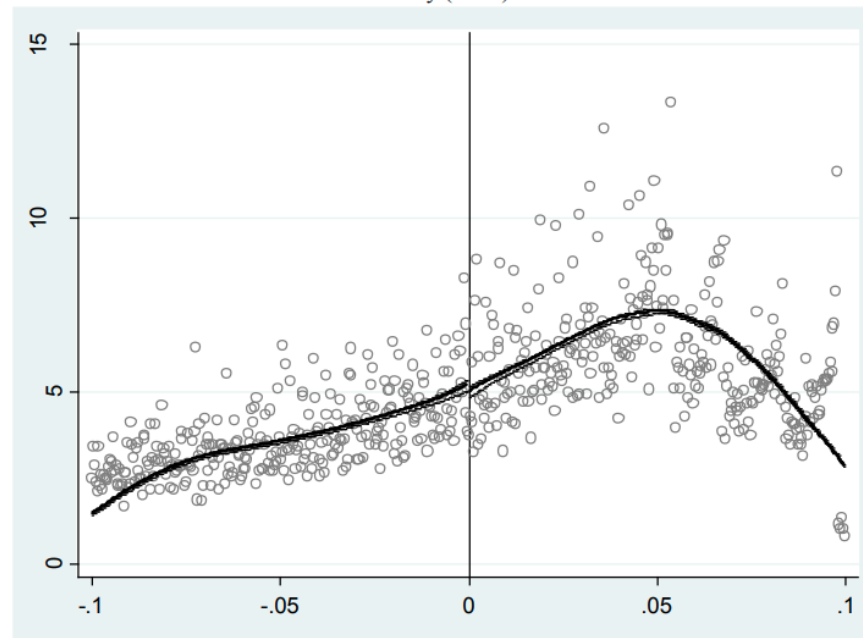
Below threshold, most receive PANES

C: Treated



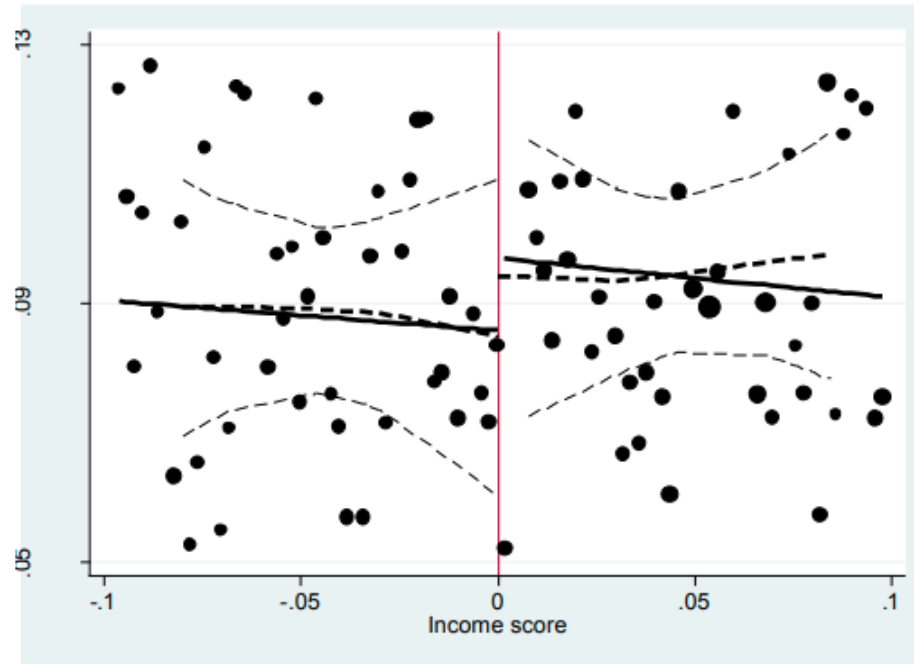
Many observations near threshold, no evidence of manipulation

Panel A: Distribution of the standardized *PANES* predicted income score, McCrary (2008) test

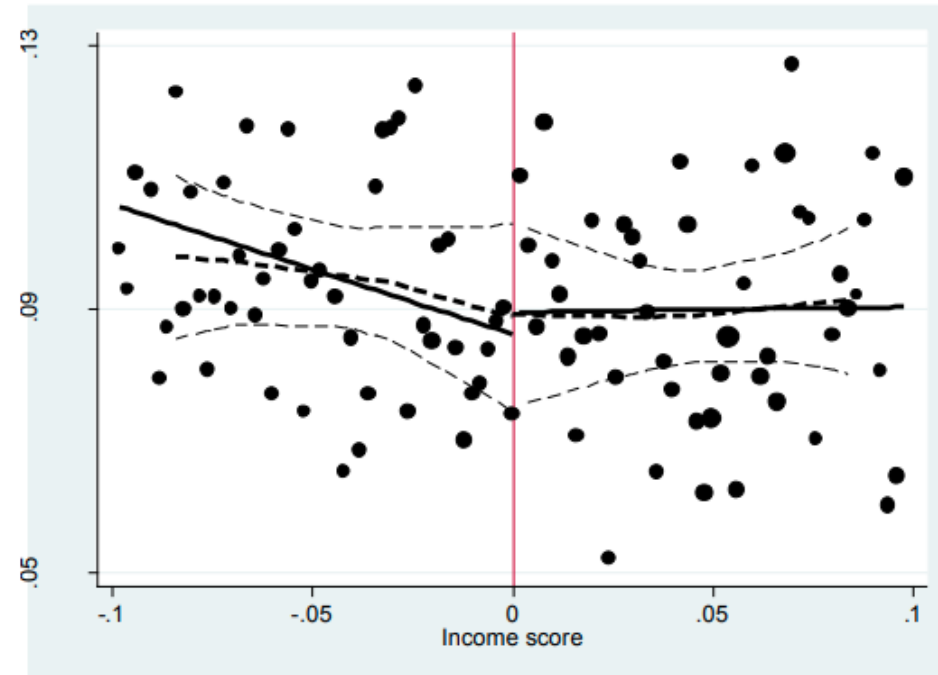


Differences in birthweight only emerge after program

A: Low birthweight, program period



B: Low birthweight, pre-program period



RDD drawbacks

- How generalizable are the results?
 - They only tell us about the impact of economic inclusion programs on birthweight for households at the threshold!
 - Economic inclusion may have different impacts on birthweight for the poorest households, or richer households!
- Hard to know in advance how many households will be close to the cut-off

Using RDDs

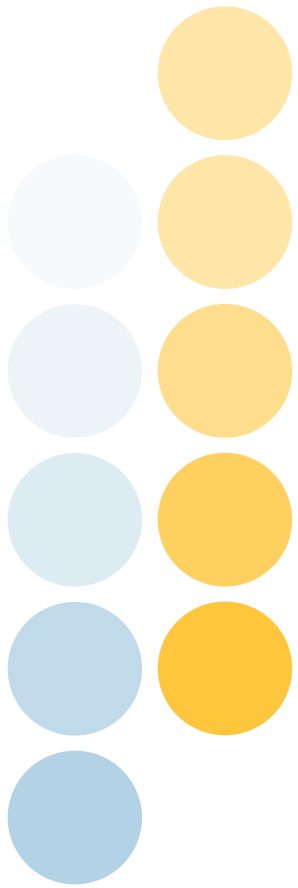
- Major advantages
 - Transparency
 - Graphical, intuitive presentation
- Major shortcomings
 - Requires many observations around cut-off
 - Not guaranteed ex-ante
- Why?
 - Can only estimate impacts using sample close to cut-off
 - Results therefore most applicable only to households close to cut-off

Summary: RDD

- Randomized control trials require minimal assumptions and provide intuitive estimates
 - Not always feasible
- Non-experimental methods require assumptions that must be carefully tested
 - More data-intensive
 - Not always testable
 - Challenging to use when you want to "unbundle" impacts

How to fit things together

- **Get creative**
 - Mix-and-match types of methods!
 - In example of PANES: Finding similar results using regression discontinuity and difference-in-differences improves credibility of results
 - Sometimes, may be possible to implement multiple methods on one data set (e.g., administrative data), but for other outcomes may need to use just one method
 - **Difference-in-differences requires many observations of the same individuals over time**
 - **Regression discontinuity requires many observations of individuals near the threshold**
 - Address relevant questions with relevant techniques



Thank you!

Presenter's name

Contact



PEI FUNDING PARTNERS



Implemented by

