External Validity

Erick Gong (thanks to K. Ajayi)

UC Berkeley & CEGA

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Agenda

- Internal Validity
- External Validity
- Case Studies
What is validity?

Two types

- Internal Validity
- External Validity
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Two types

- Internal Validity
- External Validity

Internal Validity: Accurate estimate of the causal effect within the sample.
External Validity: Accurate estimate of the causal effect outside the sample.

Emphasis of course so far has been on internal validity.
Why do we care?

External validity
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External validity

- Program Expansion or Scalability
- Replication
- Economic Theory
- Example: Progressa & CCT
Why do we care?

External validity

- Program Expansion or Scalability
- Replication
- Economic Theory
- Example: Progressa & CCT

Answer: We care because we want our research/findings to lead to more effective policies.
Goal: To convince policymakers, NGOs, governments to adopt effective policies.
Randomized Evaluations
Method: Random assignment of treatment and control arm
Examples: Deworming medication, monetary incentives for HIV tests, scholarships for students
What are we measuring?
(ATE) Average Treatment Effects
Randomized Evaluations have two types of effects
2 Effects:
ITT (Intent to Treat) = People made eligible for treatment / intervention
TOT (Treatment on the Treated) = People who actually took the treatment / intervention
Policy Implications?
Internal Validity

- Regression Discontinuity
  Compare two groups on each side of the threshold
Internal Validity

- Regression Discontinuity
  
  Compare two groups on each side of the threshold

Examples: Effect of winning scholarship, class size

Effect: LATE (Local Average Treatment Effect)

Policy Implication?
Internal Validity

Using methods we can measure

- **Average Treatment Effect (ATE):** Effect of treatment on randomly selected person
- **Intent to Treat Effect (ITT):** Effect of being made *eligible* for treatment
- **Treatment on Treated Effect (TOT):** Effect of *taking* treatment
- **Local Average Treatment Effect (LATE):** Effect of treatment for population near threshold

All our *causal* effects.
External Validity

- Can we now recommend intervention to other areas?
- Example: Scholarship Program in Kenya (Busia & Teso)
  Scholarships awarded to highest scoring 15% of girls
  Overall scholarship program has positive effect on test scores
- Policy implication: scholarships nationwide?
External Validity

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Wait! How would scholarship program affect these other groups:
1) Girls in urban schools
2) Girls in high income areas (Nairobi suburbs)
3) Girls who had dropped out of school
4) First graders in sample region (not just 6th graders)
5) Boys in 6th grade
6) Girls in Uganda
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**Heterogeneity** in treatment effects.
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**Heterogeneity** in treatment effects.
Goal: Want intervention to have an effect - OR - no reason to motivate people who will already do something.
Population Concepts

- What is the population of interest? or Who do we care about?
  - Example: Cash rewards in this class
  - Example: Scholarship Program in Kenya
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1. All primary school students
2. Female/ Male Students
3. Urban / Rural Areas
4. Students from disadvantaged families or backgrounds
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- Helps sometimes to think about why we are conducting an intervention.
  Usually in development it is to help assist the poor out of poverty.
- Clarify who we are interested in and make sure it is an interesting population to study
In an evaluation / study we usually analyze samples.
Define population of interest & then take sample.

Population > Sample > Treatment Group

- Treatment Group -> Sample
- Sample -> Population

Concern: How was sample selected?
Example: Scholarship program for young girls
Population of Interest: School girls from poor families
Selection of Sample: Flyers and radio ads asking students to sign up for program
Problem: Selection Problem - when people in the sample are different from our population of interest in some unobserved way (i.e. motivation)
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External Validity

Two Concerns about population / sample

- **Selection Problem**: Is the way the sample was chosen representative of the population of interest?
- **Heterogeneity**: Is the treatment effect going to be vary?

Example: CCT for safe sexual behavior to reduce HIV transmission
Two Concerns about population / sample

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- **Heterogeneity**: Is the treatment effect going to be vary?

Example: CCT for safe sexual behavior to reduce HIV transmission

Population of Interest: Sexually Active Young People

Selection: Schools? Homes? Bars?

Heterogeneity in treatment: Female / Male
How does it work?

- In randomized evaluations, we have evidence IF intervention has an effect, but we don’t know WHY.
- Not just economics . . . medical evaluations (vaccinations)
Conditional Cash Transfers (CCT)

- Treatment: Conditioned cash payments on school enrollment
- How does it work? Is it because students adhering to the conditionality?
  OR - Is there an income effect? Would unconditional cash payments do the same?
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Mechanism / Channel: How is the intervention actually working?
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Mechanism / Channel: How is the intervention actually working?

Why is this important?

We can improve program if we know specifically how an intervention is working.

Example: CCTs can be very expensive to monitor.
Most evaluations assume partial equilibrium
Hypothetical Example: Vocational training program
Research Design: Sample in rural Kenya in 10 villages
Treatment: Training to become a skilled laborer (i.e. plumber, mechanic, electrician)
Effect: People in program earn more money (+40% gain in wages)

What if vocational training rolled out nationwide?
Most evaluations assume **partial equilibrium**

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As more people became skilled laborers, wages will go down, leading to decrease in wage gains
General Equilibrium

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General Equilibrium Effects
Using impact evaluation method for internal validity
  => find a causal effect (average treatment, intent to treat)

External Validity
  1) What is population of interest?
  2) How are we selecting sample?
  3) Heterogeneity in treatment effects?
  4) How is the treatment actually working (the mechanism)?
  5) Are there general equilibrium effects?

Replications where careful sampling of population of interest using theory.

Example: Cash Transfers (Income vs. Conditionality Effect)
Intermission

Stretch, take a break, think about external validity
How can we reduce corruption?
Community Based Monitoring
  Idea: People using the services are best ones to monitor
Three studies that look at this
Uganda Healthcare

- Bjorkman & Svensson (2007)
  Does community monitoring increase the quality and quantity of health service provision?

- Randomized Evaluation:
  Treatment: Report cards on health clinics (service delivery), encouraged community to develop own monitoring methods.
  Outcomes: Health outcomes for children, utilization of health clinics, service quality: waiting time, attendance of health care workers

- What effect is it?
  What is population of interest?
  Heterogeneous Treatment Effects?
  How is the treatment actually working?
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Number of different ways: 1) Monitoring and enforcing higher quality, 2) Awareness of health issues, 3) others?
Unclear on the mechanism that this is working through
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Should we recommend this program to other areas?
Brazil & Government Audits

- Ferraz & Finan (2008)
  Question: Do voters punish/reward politicians for corrupt practices?
- Randomization
  Treatment: Municipalities randomly audited
  Outcomes: Electoral performance of incumbent mayors
- How is treatment working?

The channel might be informing the electorate through media (local radio).

Should we recommend this to other areas with similar levels of medical coverage, civic engagement (mandatory voting in Brazil), and corruption?
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Should we recommend this to other areas?

- similar levels of medical coverage
- similar levels of civic engagement (voting mandatory in Brazil)
- similar levels of corruption
Indonesia Road Construction

- Olken (2007)
  Question: Effects of audits and monitoring on corruption in road construction?

- Randomization
  Treatment: Audit of construction project (top down)
  Invitations to increase participation at meetings, comment box (bottom up)
  Outcome: Core samples of road to measure corruption

- Channel: Top down monitoring more effective than community based
Summary

- Community Based Monitoring May Work in Different contexts
- Evidence in support (Uganda Health Clinics, Electoral Outcomes in Brazil)
- Evidence not in favor (Indonesia Road Construction)
- Understand differences, do additional evaluations
- What policies are you comfortable with now to reduce corruption?
Research Proposals

- Worth spending 20 to 30 minutes over next week thinking about it
- Group Formation
- Questions?