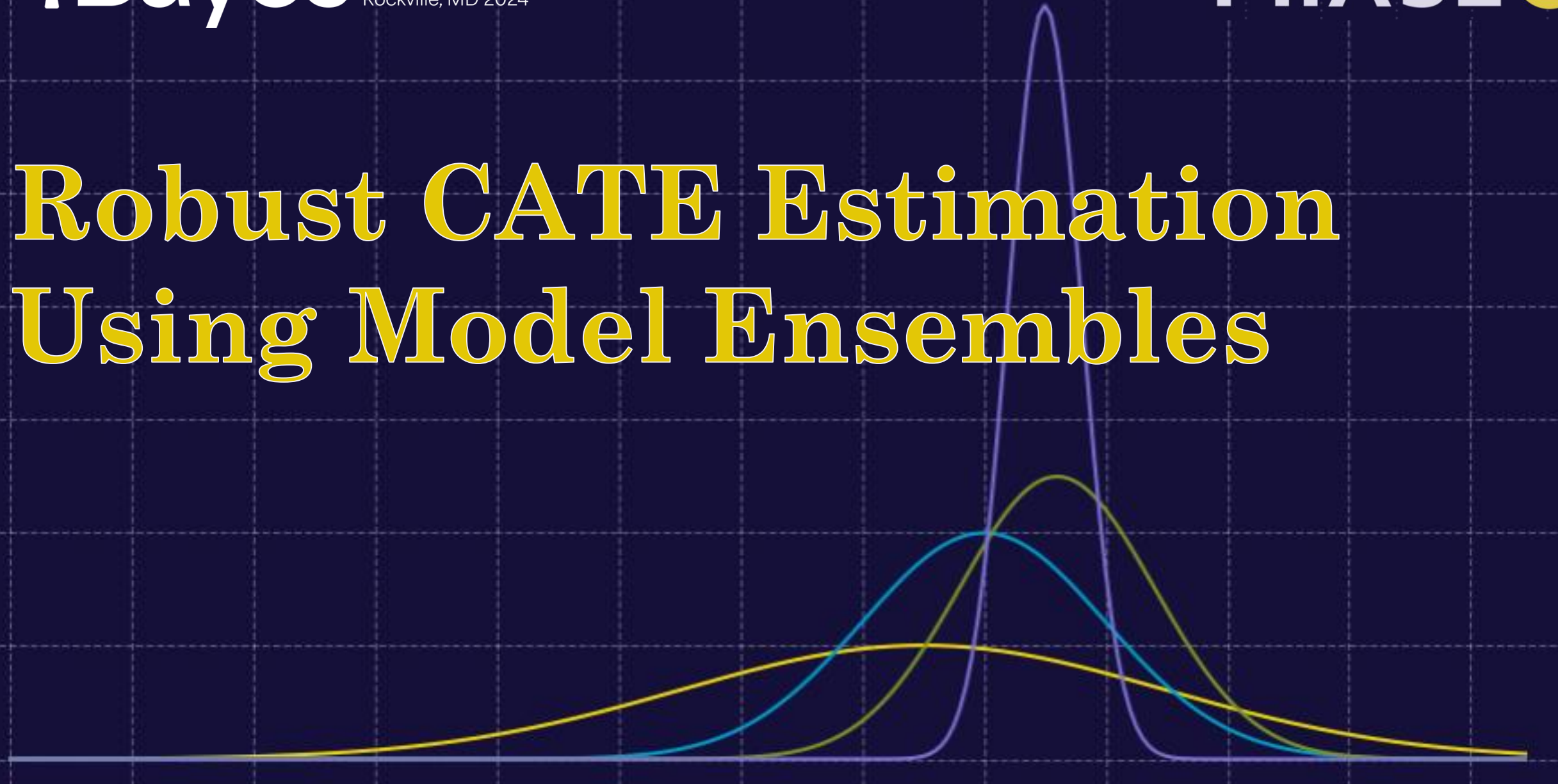


Robust CATE Estimation Using Model Ensembles



- We want to understand **what works**, and **for whom**
- Several available approaches, **each can fall short** in certain scenarios
- Since the scenario (DGP) is unknown in a real setting, we **look for methods that are robust to the scenario**
- **Ensembles improve robustness** of estimation

The treatment effect for an individual can be thought of as the contrast between their two potential outcomes – $e_i = y_i^{T=1} - y_i^{T=0}$

This individual effect is unobservable!

Hence, a common focal point is the **Average Treatment Effect**:

$$ATE = \mathbb{E}(y^{T=1} - y^{T=0}) = \mathbb{E}(y^{T=1}) - \mathbb{E}(y^{T=0})$$

In an RCT $\mathbb{E}(y^{T=i}) = \mathbb{E}(y | T = i)$. Therefore:

$$ATE = \mathbb{E}(y | T = 1) - \mathbb{E}(y | T = 0)$$

There's more to it than just the average

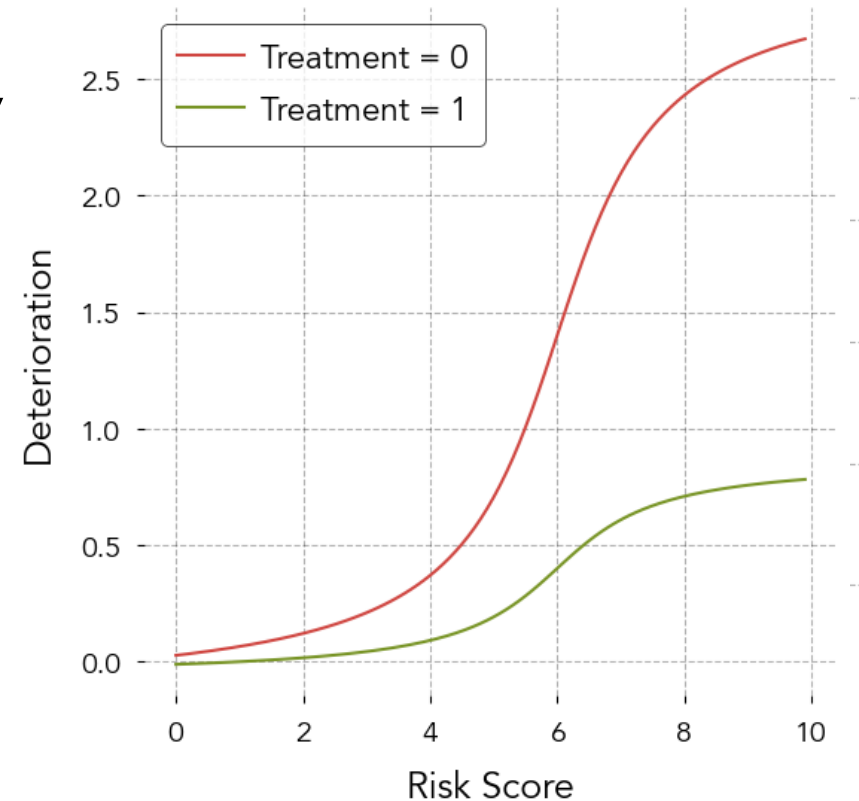
However, the ATE is not always enough.

When effect heterogeneity is plausible, focus may shift to the **Conditional ATE** (CATE):

$$CATE(x) = \mathbb{E}(y^{T=1} - y^{T=0} | X = x)$$

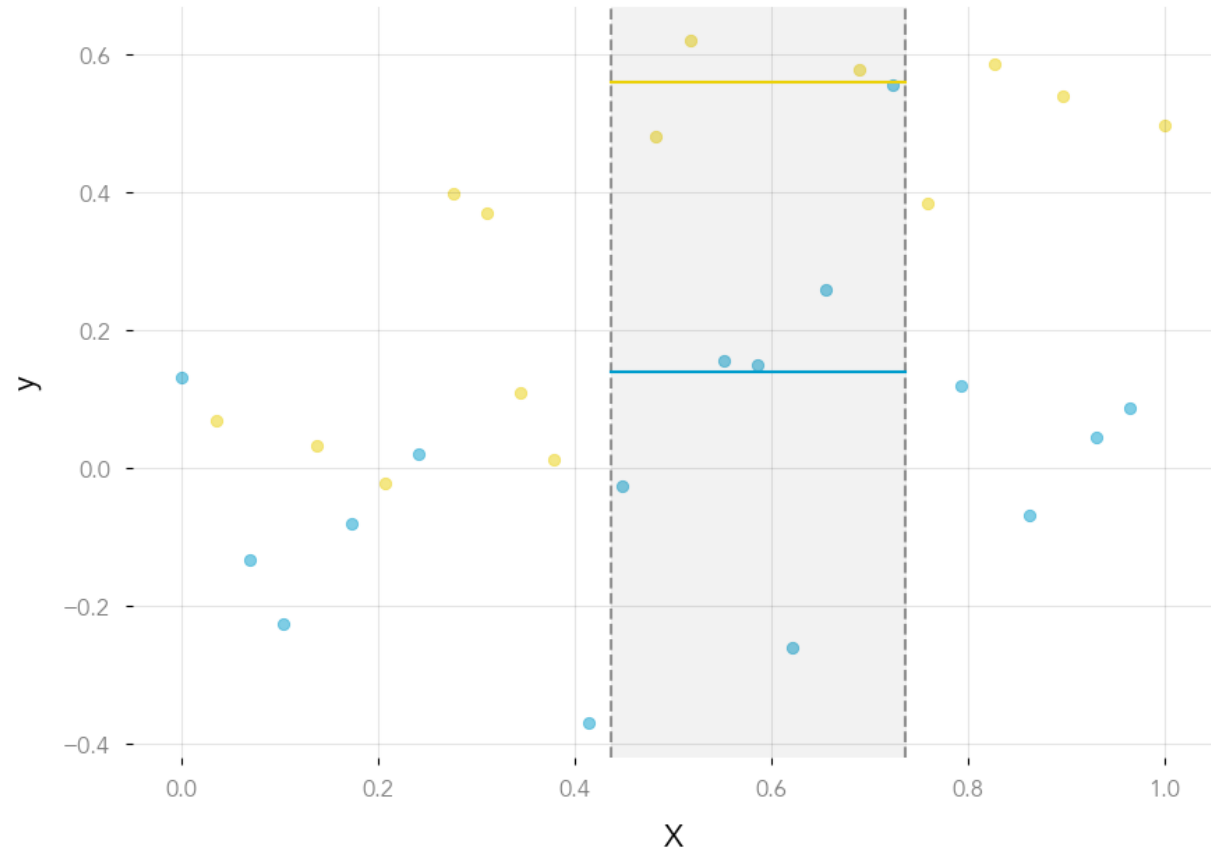
However, for CATE (even in an RCT) averaging by treatment is not a practical approach:

$$CATE(x) = \mathbb{E}(y|T = 1, X = x) - \mathbb{E}(y|T = 0, X = x)$$



- **Causal Forest:**

If averaging is infeasible at a single point level, how about averaging in “areas”?



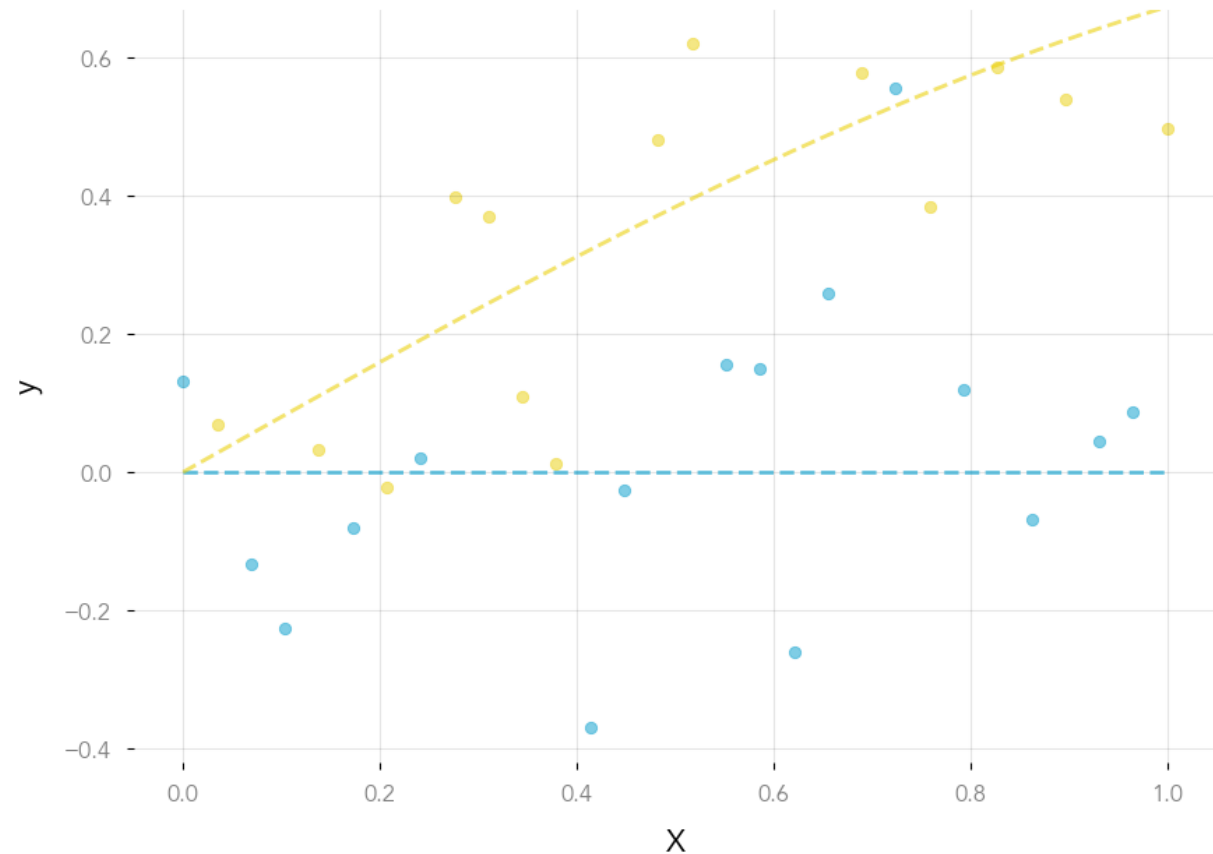
So What Can We Do?

- **Causal Forest:**

If averaging is infeasible at a single point level, how about averaging in “areas”?

- **Meta-Learners:**

Use global models to estimate the conditional outcomes (and other “nuisance” functions).



- S (Single)

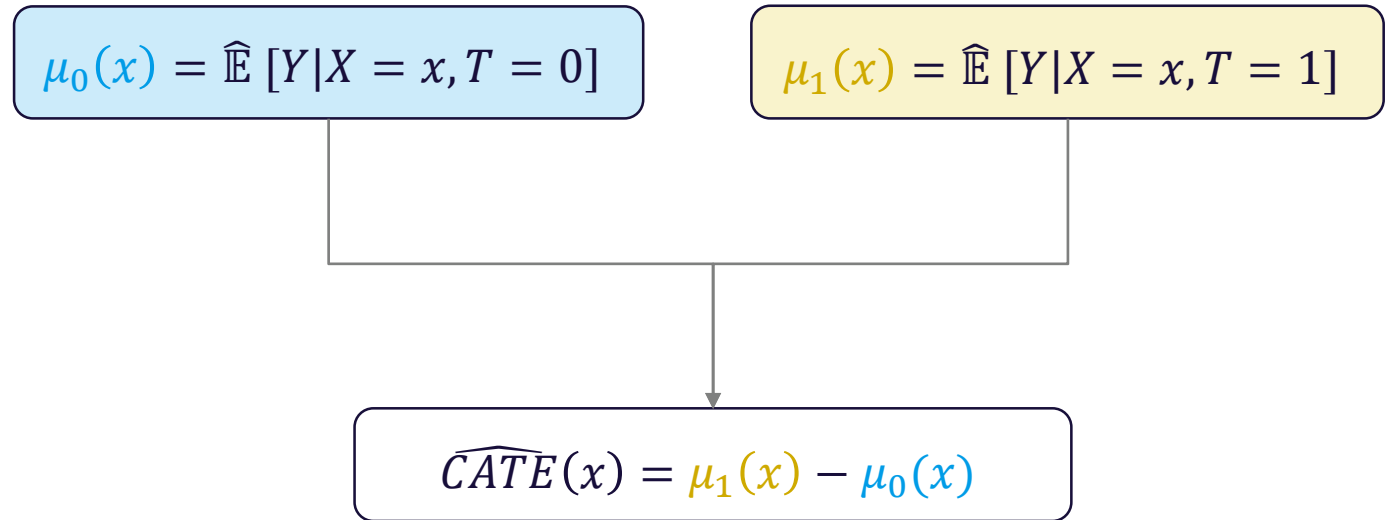
Train an outcome model using both X and T :

$$\mu(x, t) = \hat{\mathbb{E}}[Y \mid X = x, T = t]$$

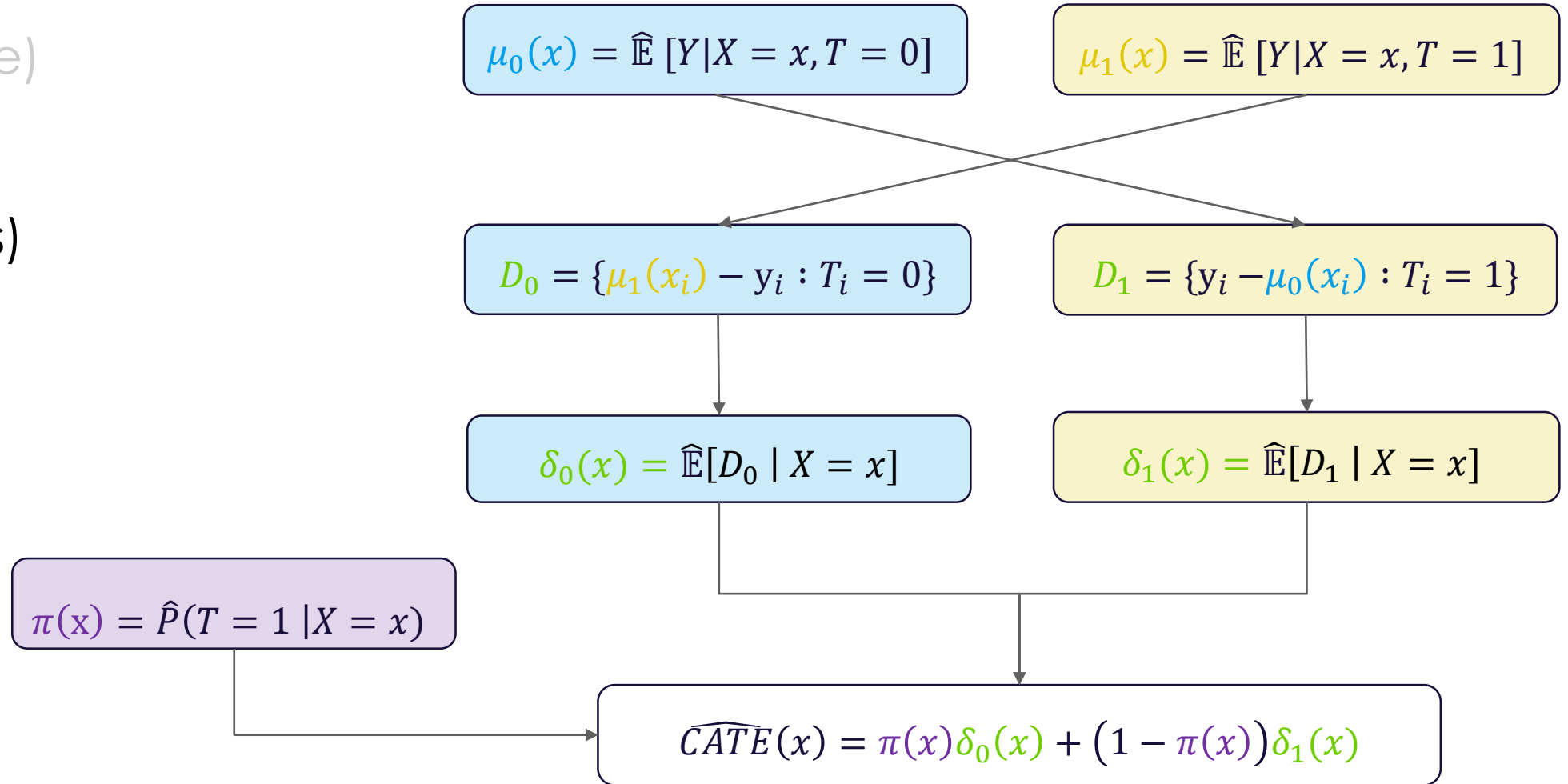
Estimate CATE using the difference:

$$\widehat{CATE}(x) = \mu(x, \mathbf{1}) - \mu(x, \mathbf{0})$$

- S (Single)
- T (Two)



- S (Single)
- T (Two)
- X (Cross)



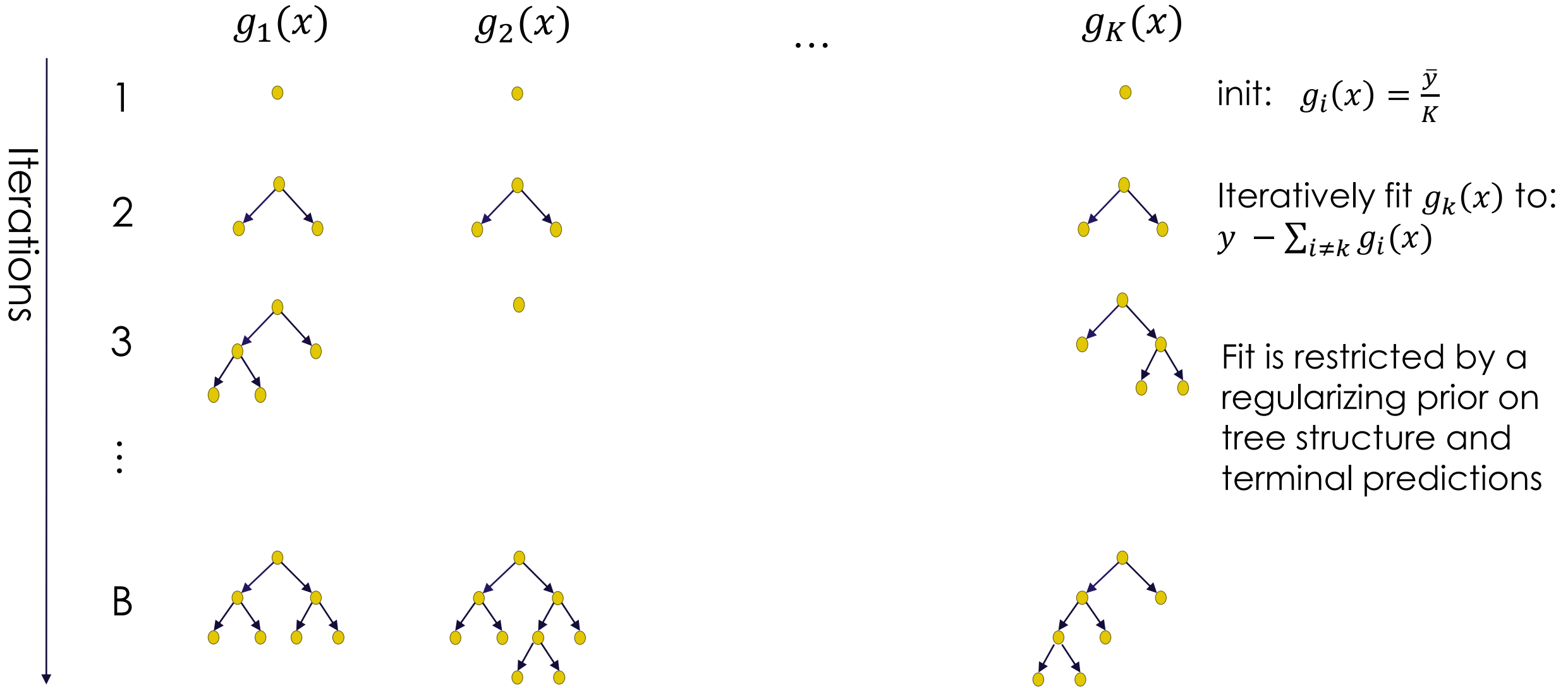
- S (Single)
- T (Two)
- X (Cross)
- R (Residualized)

- S (Single)
- T (Two)
- X (Cross)
- R (Residualized)
- DR (Doubly Robust)

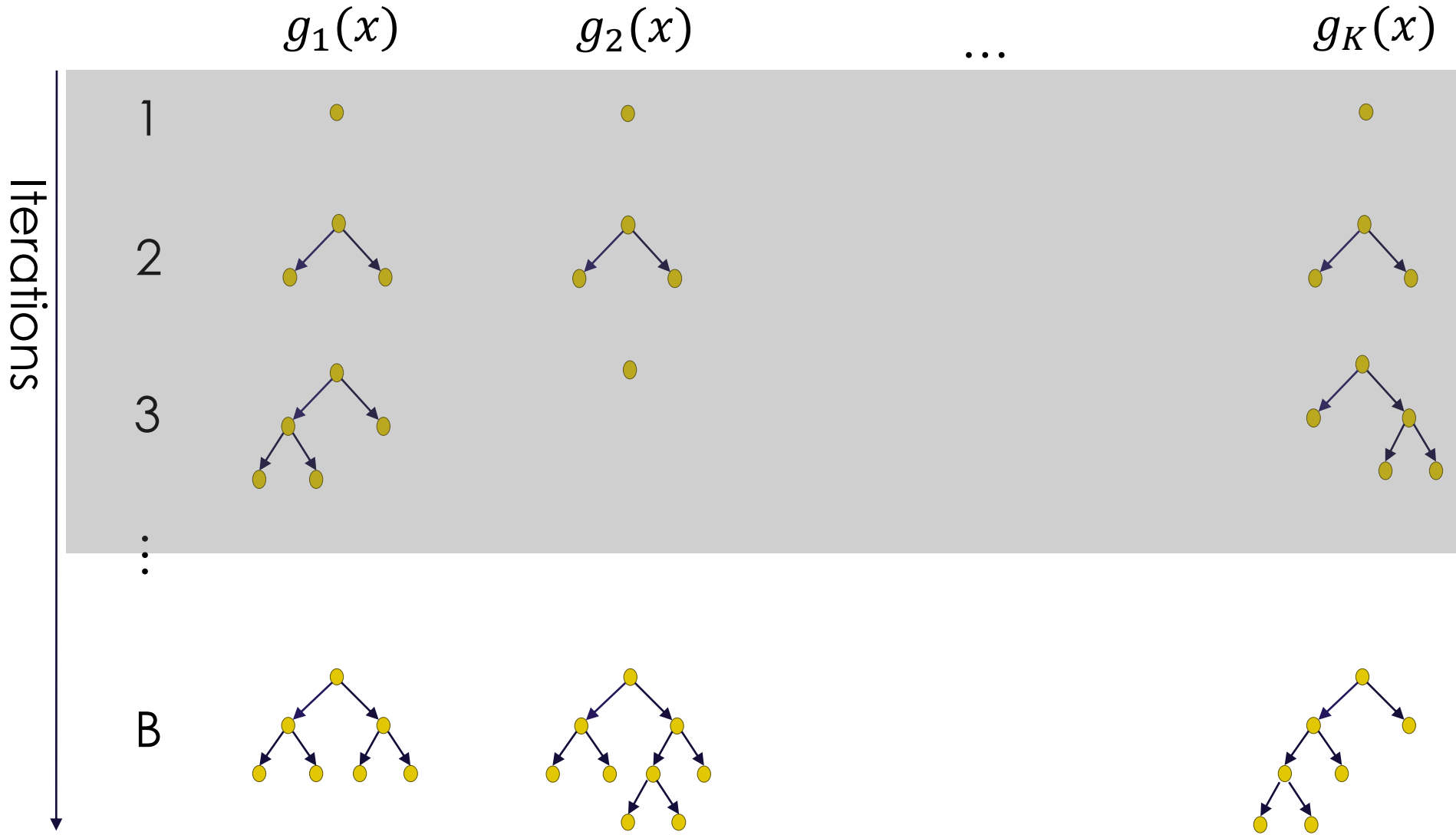
- S (Single)
- T (Two)
- X (Cross)
- R (Residualized)
- DR (Doubly Robust)

- Can utilize any “base” model for learning the “nuisance” functions:
 - GLMs
 - Random Forests
 - Boosting
 - NN
 - BART

BART (Bayesian Additive Regression Trees)



BART (Bayesian Additive Regression Trees)



init: $g_i(x) = \frac{\bar{y}}{K}$

Iteratively fit $g_k(x)$ to:
 $y - \sum_{i \neq k} g_i(x)$

Fit is restricted by a regularizing prior on tree structure and terminal predictions

Excluding a burn-in, the chain of iterations provides a posterior sample for $f(x)$:

$$\left\{ \sum g_i^b(x) \right\}_{b=b_0}^B$$

A BART-tailored meta-learner with a disciplined approach for controlling the regularization of CATE explicitly:

$$\mu(x_i) = \text{BART}(x_i, \pi(x_i))$$

$$\text{CATE}(x_i) = \text{BART}(x_i) \quad \longleftarrow \text{more heavily regularised}$$

$$y_i = \mu(x_i) + \text{CATE}(x_i) * T_i + \epsilon_i$$

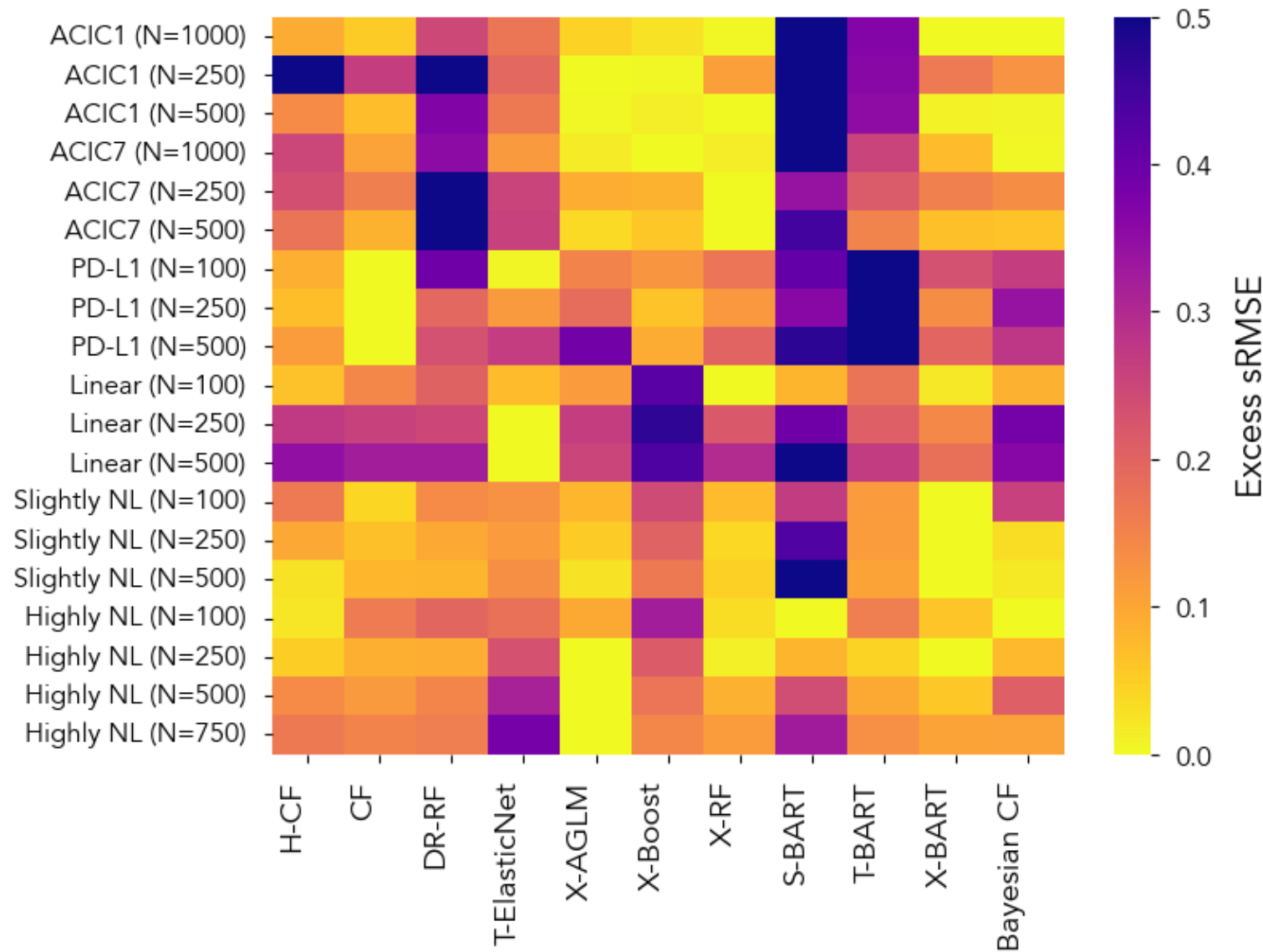
Fitted using a Gibbs sampler that iteratively sets one of $\mu(x_i)$; $\text{CATE}(x_i)$ constant, and updates the other.

- Scenarios (DGP):
 - ACIC – well known and used benchmark dataset
 - PDL1 – A Mechanistic model of PDL1 pathophysiology in oncology
 - Multivariate linear additive model (prognostic + predictive)
 - Multivariate non-linear models (various kinds)
- Sample sizes: 100 – 1000, to represent clinical data
- **Key performance measure:** standardised RMSE * (RMSE / s.d.(CATE))

* Aka PEHE in this context

No Single Dominant Model

Scenario (DGP, sample size)



Estimation Method

Which method is “best”?

In each DGP, different methods perform better/worse.

+

In reality the DGP is unknown.

+

Ability to validate is limited:

- Individual effects are unobserved
- In clinical datasets – samples are relatively small

=

We want methods that are robust to the scenario (DGP)

We want to combine models $\hat{y}^1 \dots \hat{y}^K$.

We do so by regressing them on the true outcome (in a test sample)

$$\hat{y} = \sum_{k=1}^K \omega^k \hat{y}_i^k \quad : \quad \omega = \operatorname{argmin}_{\omega} \left\{ \sum_{i=1}^N \left[y_i - \sum_{k=1}^K \omega^k \hat{y}_i^k \right]^2 : \omega \geq 0 \right\}$$

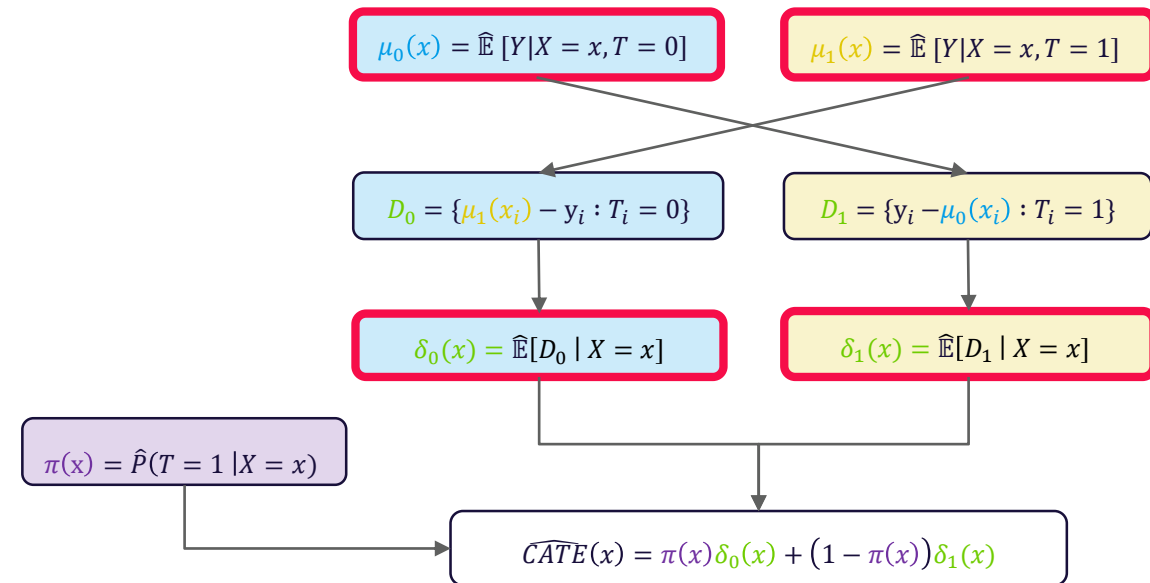
In the causal setting:

The “label” is not y_i , but $e_i = y_i^{T=1} - y_i^{T=0}$, which is unobserved.

Several workarounds were suggested to substitute the missing label.

While we cannot directly stack on the unobserved effect e_i , we can benefit from stacking models for the outcome y_i ($\mu_0(x)$, $\mu_1(x)$).

In an X-Learner, we can also apply in the “pseudo-outcomes” D_i ($\delta_0(x)$, $\delta_1(x)$).



Train “base” models $f^k(x)$.

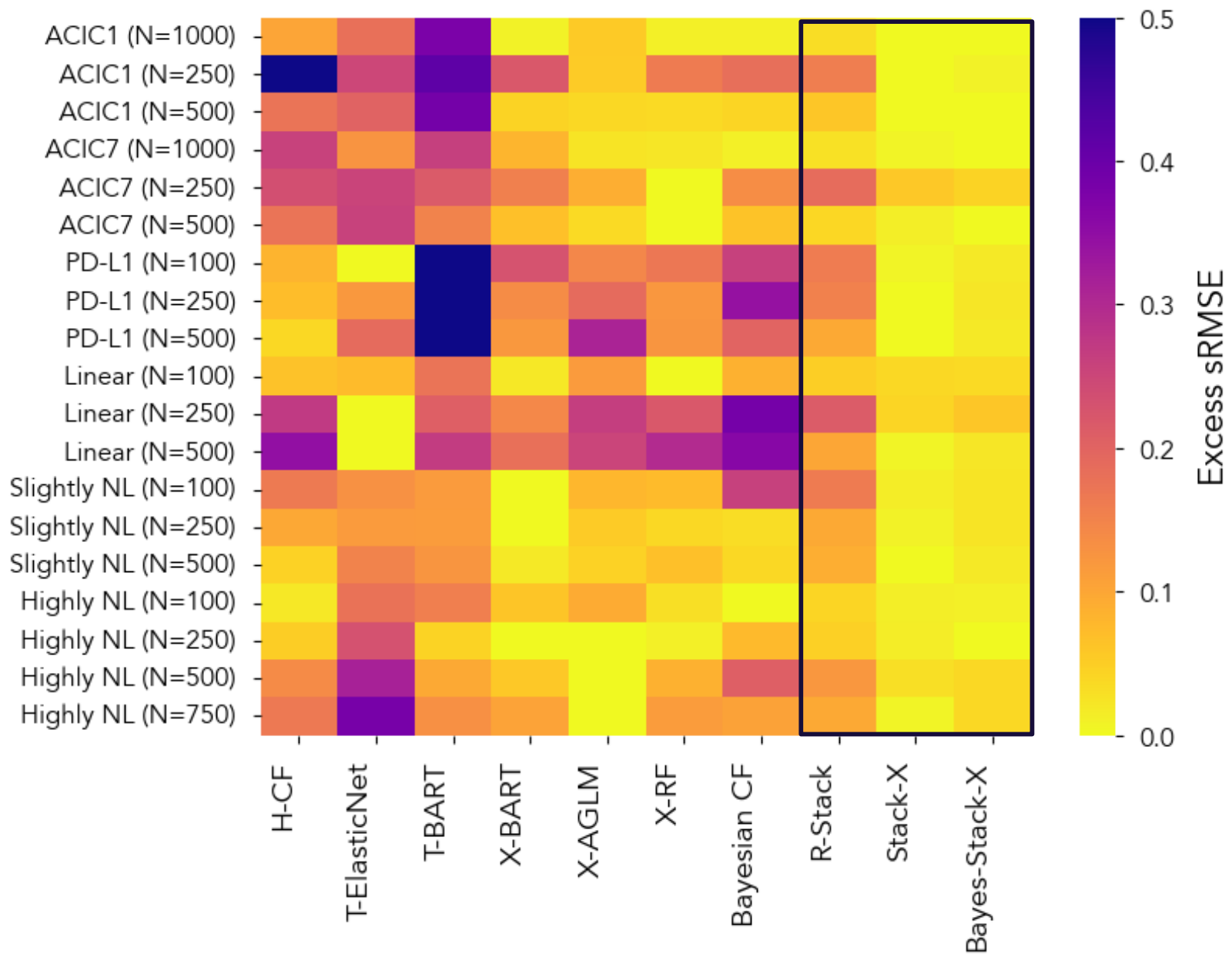
Also train a “null” model $f^0(x) = \bar{y}_{train}$.

$$y_i = \omega^0 f^0(x_i) + \sum_{k=1}^K \omega^k f^k(x_i) + \varepsilon$$

$$\omega^0, \omega^1, \omega^2 \dots \omega^K \sim \text{Dirichlet} \left(1, \frac{1}{10}, \frac{1}{10} \dots \frac{1}{10} \right)$$

$$\varepsilon \sim N(0, \sigma^2)$$

$$\sigma \sim HN \left(0, \frac{\sqrt{\text{var}(y_{train})}}{3} \right)$$



Causal Forest doi.org/10.1073/pnas.1510489113

Recursive partitioning for heterogeneous causal effects, S. Athey G. Imbens, 2016

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Double/Debiased/Neyman Machine Learning of Treatment Effects, V. Chernozhukov et al, 2017

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BART: Bayesian additive regression trees, H. Chipman, E. George, R. McCulloch, 2010

BCF [10.1214/19-BA1195](https://doi.org/10.1214/19-BA1195)

Bayesian regression tree models for causal inference: regularization, confounding, and heterogeneous effects, R. Hahn et al, 2020

Stacking <https://hastie.su.domains/ElemStatLearn/>

The Elements of Statistical Learning, T. Hastie, R. Tibshirani, J. Friedman, 2008, Chapter 8.8

Bayesian Stacking [10.1214/17-BA1091](https://doi.org/10.1214/17-BA1091)

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