MY457/MY557

Causal Inference for Experimental and Observational Studies

<u>Week 2: Randomized Controlled Trials</u>

Paper: Zhang, N., Gereke, J., & Baldassarri, D. (2022). Everyday discrimination in public spaces: a field experiment in the Milan metro. European Sociological Review, 38(5), 679-693.

1. **General**
   a. What is the purpose/relevance of this study? What research gap does this paper try to fill?
   b. Why do the authors conduct a field experiment? Or put differently: Why can we not just collect all "bench-sitting data" in the Italian tube system and then test for different "sitting-rates"?
   c. Why was the field experiment conducted twice? Do you see a problem with the timing of the field experiment?

2. **Measurement**
   a. What is the treatment? What is the outcome (variable)? Which exact causal question do the authors try to answer?
   b. What is the unit of analysis / what are the observations?
   c. Why is it difficult to measure everyday discrimination?
   d. Why do the authors use three (treatment/control) groups / different types of treatments (instead of two)?

3. **Research design**
   a. How would you assess whether the field experiment is (likely to be) internally valid? Do the authors provide supporting tests for the identifying assumption(s)?
   b. What are the key concerns why this field experiment may not be internally validity?
   c. Do the authors remove some observations? If so, why? If not, would you recommend doing so? Discuss.
   d. How do the authors measure individuals' demographics? Do you see a problem with that?

4. **Heterogeneity and mechanisms**
   a. According to the authors, what are the two competing theories that explain everyday discrimination? How do they test which one is (more likely to be) true? Discuss their approach.
   b. Which heterogeneous effects do the authors examine? Which other ones would you have assessed?

Final question:

- How would you assess everyday discrimination? Can you define a research design where treatment assignment is (kind of) random, without you (the researcher) directly having control over treatment status?