

Contrastive Balancing Representation Learning for Heterogeneous Dose-Response Curves Estimation

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Abstract

Estimating the individuals’ potential response to varying treatment doses is crucial for decision-making in areas such as precision medicine and management science. Most recent studies predict counterfactual outcomes by learning a covariate representation that is independent of the treatment variable. However, such independence constraints neglect much of the covariate information that is useful for counterfactual prediction, especially when the treatment variables are continuous. To tackle the above issue, in this paper, we first theoretically demonstrate the importance of the *balancing* and *prognostic* representations for unbiased estimation of the heterogeneous dose-response curves, that is, the learned representations are constrained to satisfy the conditional independence between the covariates and both of the treatment variables and the potential responses. Based on this, we propose a novel Contrastive balancing Representation learning Network using a partial distance measure, called **CRNet**, for estimating the heterogeneous dose-response curves without losing the continuity of treatments. Extensive experiments are conducted on synthetic and real-world datasets demonstrating that our proposal significantly outperforms previous methods.

Introduction

Causal inference is crucial for individual decision-making, particularly in answering counterfactual questions such as “What would the individual’s potential response have been had the person received a different dose of treatment” (Raita et al. 2021). For example, precision medicine is developed by studying the response of drug doses (i.e., continuous treatment) to the potential health state (i.e., potential outcome) of patients (with various medical history information, i.e., covariates) (Shi et al. 2020). With accessible observational data, an essential obstacle for the unbiased estimation of causal effects is the *confounding bias* from the confounders (i.e., common causes of treatment and outcome),

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Representation Learning Method	Formulation
Treatment-Balanced	$T \perp\!\!\!\perp \Phi(X)$
Balancing Representation	$T \perp\!\!\!\perp X \mid \Phi(X)$
Prognostic Representation	$Y(t) \perp\!\!\!\perp X \mid \Phi(X)$
Double Balancing (ours)	$(T, Y) \perp\!\!\!\perp X \mid \Phi(X)$

Table 1: A comparison of the constraints employed in various representation learning methods.

which can lead to spurious correlations between treatment and outcome (Mealli et al. 2011; Pearl et al. 2009). Another challenge is the *heterogeneity* of dose-response curves, that is, individuals with different covariates will have different responses even with the same dose given (Wager and Athey 2018; Schwab et al. 2020; Wu et al. 2023; Li et al. 2023c,b).

Compared with the binary treatment case, dose-response curves has greater challenges in adjusting for the confounding bias of high-dimensional covariates on the continuous treatment (Imai et al. 2004; Hirano et al. 2004; Kennedy et al. 2017). To tackle this problem, the generalized propensity score (GPS) serves as a generalization of the propensity score (Rosenbaum and Rubin 1983) in the binary treatment case, using a Gaussian distribution to model the treatment conditional density for given covariates (Imai et al. 2004; Hirano et al. 2004). Motivated by covariate balancing propensity score (Imai and Ratkovic 2014; Hainmueller 2012), the optimal balancing weighting methods focus on learning sample weights such that the treatment and covariates are independent on the re-weighted data (Fong, Hazlett, and Imai 2018; Vegetabile et al. 2021). Despite focusing on the *unbiasedness* that treatments and confounders are conditionally independent on balancing scores, these methods show limited performance in practice when the covariates are high-dimensional (Nie et al. 2021; Schwab et al. 2020). Furthermore, these methods neglect the outcome during the modeling process of the balancing weight, which might omit important confounders that are necessary for outcome pre-

diction (Stuart, Lee, and Leacy 2013; Hansen 2008).

With the progress of deep learning, recent studies apply neural networks to fit dose-response curve of high-dimensional covariates (Bica et al. 2020; Schwab et al. 2020; Nie et al. 2021). In deep methods, a critical challenge is how to learn appropriate covariate representations for heterogeneous dose-response curve estimation (Kallus 2020). Specifically, DRNet (Schwab et al. 2020) propose to learn treatment-balanced representations (Shalit et al. 2017; Wu et al. 2022a; Wang et al. 2023) which force the learned representations to be independent of continuous treatments. Nonetheless, the method’s *unbiasedness* hinges on the assumption of invertibility concerning covariate representations, which is stringent for deep methods (Behrman et al. 2019). In practice, imposing the constraint of independence between treatment assignment and covariate representations runs the risk of neglecting confounder information that is essential for outcome prediction, leading to biased estimates (Assaad et al. 2021). To tackle this problem, VCNet (Nie et al. 2021) employs a propensity score estimator to constrain the representations for unbiased average dose-response curve estimation. However, while the propensity score is the coarsest balancing score (Rosenbaum and Rubin 1983), it may not be adaptable for the heterogeneous dose-response curve estimation because of the covariate information loss (Hahn 1998). In other words, it might not *prognostic* that potential outcomes and confounders are conditionally independent given balancing scores (Hansen 2008). For the prognostic representation, SCIGAN (Bica, Jordon, and van der Schaar 2020) directly models the treatment effect by generative adversarial networks (Goodfellow et al. 2020). However, it is noteworthy that SCIGAN does not explicitly account for the unbiasedness.

Overall, obtaining appropriate representations that eliminates confounder bias and retains necessary confounder information for the unbiased heterogeneous dose-response curve is still a challenging problem (Wu et al. 2022b). To solve this problem, we systematically introduce the double balancing representation, i.e., a combination of the balancing and prognostic representations, which is constrained to satisfy the conditional independence between the covariates and both of the treatments and the potential outcomes. For the double balancing representation, we propose a novel contrastive regularizer, applying contrastive learning (Chen et al. 2020; He et al. 2020; Grill et al. 2020) to monitor the unbiasedness condition and maintain treatment continuity. Specifically, we create negative samples by randomly shuffling the original covariates and treat the original covariates as positive samples (Arbour, Dimmery, and Sondhi 2021; Cheng et al. 2020). Adaptable to the cross-entropy loss (Chen et al. 2020), we adopt partial distance measure (Székely and Rizzo 2014) to evaluate the unbiasedness condition and design a contrastive regularizer loss to minimize the partial distance measure while discriminating among positive and negative samples. Moreover, to preserve the predictive power of the representation for the outcome, we design a mean squared error loss specifically tailored to address prognostic representation. Empirically, we demonstrate that CRNet achieves state-of-the-art performance on

both synthetic and semi-synthetic datasets with different dimensions of continuous treatments. We summarize our contribution as follows:

- For unbiased heterogeneous dose-response curve estimation, we systematically define a double balancing representation condition which satisfies the conditional independence constraint between the covariates and both of the continuous treatments and the observed outcomes.
- We propose a novel CRNet architecture for learning double balancing representations without losing the continuity of treatments. Specifically, we design a contrastive loss with a partial distance measure of positive and negative samples and a mean square error loss to optimize the CRNet. To the best of our knowledge, this is the first paper to apply contrastive learning in the field of heterogeneous dose-response curve estimation.
- Empirically, varying the dimension of continuous treatments and covariates in both simulated and real-world datasets, we demonstrate that the proposed CRNet outperforms other baseline methods on HDRC estimation.

Related Work

Dose-Response Curve Estimation. For estimating the dose-response curve¹, traditional methods (Imbens et al. 2000; Imai et al. 2004; Fong et al. 2018; Vegetabile et al. 2021) learn sample weights on selected metrics to achieve the balance of covariates to eliminate the confounding bias. However, these methods neglect the outcome during the modeling of the balancing weight, which might omit confounders that are necessary for outcome prediction (Hansen 2008; Stuart, Lee, and Leacy 2013; Lee and Lee 2022).

Deep methods learn appropriate representations for DRC estimation (Bica et al. 2020; Schwab et al. 2020; Nie et al. 2021). Treatment-balanced representation methods, for instance, DRNet (Schwab et al. 2020) constrains representations independent of continuous treatments. VCNet (Nie et al. 2021) and SCIGAN (Bica, Jordon, and van der Schaar 2020) constrain representations by treatment estimators/discriminators. None of them explicitly constrain that the learned representation satisfies both balancing and prognostic representation conditions for dose-response curve estimation. Instead, we propose a novel contrastive regularizer network to obtain double balancing representations for unbiased heterogeneous dose-response curve estimation directly.

Contrastive Representation Learning. Contrastive representation learning (Chen et al. 2020; He et al. 2020; Grill et al. 2020; Zhang et al. 2021, 2022; Yao et al. 2022; Gan et al. 2023) is a self-supervised learning method. It approximates the latent representations by constructing contrastive samples (positive and negative instances) to facilitate instance discrimination (Wu et al. 2018). Through the process of discriminating between contrastive samples, positive instances are closer to the original instance in the projection space, while negative instances are further away from the original instance in the projection space to maximize

¹We only discuss weighting methods because matching and stratification can be considered as particular forms of weighting.

the lower bound of the mutual information (Wang and Isola 2020; Huang, Yi, and Zhao 2021). In this paper, we apply contrastive learning to regularize this representation without breaking the continuity of treatments. To the best of our knowledge, this is the first paper to apply contrastive learning in heterogeneous dose-response curve estimation.

Problem Setup

For the case of continuous treatments, we observe n units with baseline covariates $X \in \mathcal{X} \subset \mathbb{R}^p$, continuous treatments $T \in \mathcal{T} \subset \mathbb{R}^q$ and outcome $Y \in \mathcal{Y} \subset \mathbb{R}$, where p, q is dimension of covariates and treatments, respectively. We also let $\mathbf{X} \in \mathcal{X}^n \subset \mathbb{R}^{n \times p}$, $\mathbf{T} \in \mathcal{T}^n \subset \mathbb{R}^{n \times q}$ and $\mathbf{Y} \in \mathcal{Y}^n \subset \mathbb{R}^n$ denote all the observed baseline covariates, continuous treatments, and outcomes, respectively. Using Neyman-Rubin potential outcome framework (Rubin 1974; Rosenbaum and Rubin 1983), for an observation for unit i with received $T_i = t$, there is a potential outcome $Y_i(t)$.

Throughout this paper, we assume three assumptions that are commonly made in continuous treatment settings (Imbens 2000; Schwab et al. 2020; Nie et al. 2021; Bica, Jordan, and van der Schaar 2020). Specifically, for a unit i , we assume the stable unit treatment value assumption (SUTVA) assumption holds that we can only observe the potential outcome corresponding to the received treatment level t , i.e., $Y_i = Y_i(t)$ and there should not be alternative forms of the treatment and interference between units, capturing consistency and non-interference. Moreover, we assume the unconfoundedness assumption that $Y(t) \perp\!\!\!\perp T \mid X$ and the positivity assumption that $0 < \mathbb{P}(t|x)$ for $T = t$ and $X = x$. In this paper, $\perp\!\!\!\perp$ denotes (conditional) independence, and \mathbb{P} is the probability density function (pdf). We consider estimating the heterogeneous dose-response curve (HDRC):

$$h(t, x) = \mathbb{E}[Y(t) \mid X = x], \quad (1)$$

where \mathbb{E} denotes expectation.

Motivation

For estimating the heterogeneous dose-response curve, deep methods require an appropriate criterion to monitor the representation they produce (Kallus 2020; Schwab et al. 2020). Inspired by the effective balancing score (Hu, Follmann, and Wang 2014; Huang and Chan 2017), a linear function of covariates for unbiased causal effect estimation, we turn to define two conditions of representation for unbiased heterogeneous dose-response curve estimation.

Definition 1 (Balancing Representation Condition). *A balancing representation $\Phi(X)$, $X \in \mathcal{X}$, correlated to treatments $T \in \mathcal{T}$ and outcome $Y \in \mathcal{Y}$ satisfies:*

$$X \perp\!\!\!\perp T \mid \Phi(X). \quad (2)$$

Theoretically, let $F_X(\cdot|\cdot)$ denote conditional probability distributions for X , we can derive the treatment assignment:

$$\begin{aligned} \mathbb{P}_T(T = t|\Phi(x), Y(t)) \\ &= \int_{x'} \mathbb{P}_T(T = t|X = x', \Phi(x), Y(t)) dF_X(X = x'|\Phi(x), Y(t)) \\ &= \int_{x'} \mathbb{P}_T(T = t|X = x') dF_X(X = x'|\Phi(x)) = \mathbb{P}_T(t|\Phi(x)). \end{aligned} \quad (3)$$

The first and third equations hold by using iterated expectation operation, the second equation holds by unconfoundedness assumption and Definition 1. The above equation implies that $X \perp\!\!\!\perp T \mid \Phi(X)$ is equivalent to the unbiasedness condition, i.e., $Y(t) \perp\!\!\!\perp T \mid \Phi(X)$. It guarantees that the treatment assignment is ignorable given the balancing representation when the unconfoundedness assumption is satisfied (Rosenbaum and Rubin 1983). As a result, we can identify the average dose-response curve as:

$$\begin{aligned} \mathbb{E}[Y(t)] &= \mathbb{E}_X[\mathbb{E}[Y(t) \mid \Phi(x)]] \\ &= \mathbb{E}_X[\mathbb{E}[Y(t) \mid \Phi(x), T = t]] \\ &= \mathbb{E}_X[\mathbb{E}[Y \mid \Phi(x), T = t]]. \end{aligned} \quad (4)$$

The first equation holds by the iterated expectation, the second equation holds by $Y(t) \perp\!\!\!\perp T \mid \Phi(X)$, and the third equation holds by the consistency assumption in SUTVA. Nevertheless, regressing outcome Y on balancing representation $\Phi(X)$ and treatment T is inadequate for the heterogeneous dose-response curve estimation. This inadequacy can be attributed to the following reasons:

$$\mathbb{E}[Y(t) \mid x] \neq \mathbb{E}[Y(t) \mid \Phi(x)]. \quad (5)$$

For instance, VCNet (Nie et al. 2021), which employs a propensity score constraint on representation, is sufficient for unbiased average dose-response estimation. Nonetheless, it is important to acknowledge that the propensity score is the coarsest balancing score (Rosenbaum and Rubin 1983). Using representations that are constrained by it might result in the loss of covariate information for outcome prediction (Hahn 1998). This concern is amplified in situations where VCNet discretizes the continuous treatment variable into discrete intervals and utilizes the cross-entropy loss function for training the propensity score (Li et al. 2023a).

Definition 2 (Prognostic Representation Condition). *A prognostic representation $\Phi(X)$, $X \in \mathcal{X}$ correlated to treatments $T \in \mathcal{T}$ and outcome $Y \in \mathcal{Y}$ satisfies:*

$$X \perp\!\!\!\perp Y(t) \mid \Phi(X). \quad (6)$$

Theoretically, the prognostic representation condition in Eq. (6) is sufficient for unbiased heterogeneous dose-response curve estimation. Consider a unit i with treatment t , we can write the heterogeneous dose-response curve as:

$$\mathbb{E}[Y(t) \mid x] = \mathbb{E}[Y(t) \mid \Phi(x)] = \mathbb{E}[Y \mid \Phi(x), T = t]. \quad (7)$$

The first equation holds by Definition 2 and the second equation holds because the prognostic representation is also a balancing representation (Hansen 2008; Stuart, Lee, and Leacy 2013). The above analysis implies that given the prognostic representation, the covariates are ignorable for the outcome prediction (Hansen 2008).

Learning the prognostic representation presents a challenge due to the unobservability of potential outcomes $Y(t)$ (Holland 1986). In practical scenarios, we are constrained to derive representations based on the condition $X \perp\!\!\!\perp Y \mid \Phi(X)$, which we refer to as the *learnable* prognostic representation condition, a condition also implicitly utilized in SCIGAN (Bica et al. 2020). Consequently, when representations are constrained by this prognostic representation

condition between covariates and *observed* outcomes, there exists a potential concern regarding ensuring unbiasedness (Hansen 2008; Huang and Chan 2017).

To address the challenges posed by both the balancing representation and prognostic representation conditions, where balancing representation condition alone may lead to the loss of essential information for outcome prediction and prognostic representation condition constrained by observed outcomes may introduce bias, we propose the condition of double balancing representation. This condition aims to enhance both unbiasedness through the balancing representation condition and the predictive capacity for outcomes through the prognostic representation condition.

Definition 3 (Double Balancing Representation Condition). *A double balancing representation $\Phi(X)$, $X \in \mathcal{X}$ correlated to treatments $T \in \mathcal{T}$ and outcome $Y \in \mathcal{Y}$ satisfies:*

$$X \perp\!\!\!\perp T \mid \Phi(X), \quad X \perp\!\!\!\perp Y \mid \Phi(X). \quad (8)$$

Theoretically, consider a unit i with treatment t . Given the double balancing representation, we can identify the heterogeneous dose-response curve as:

$$\mathbb{E}[Y(t)|x] = \mathbb{E}[Y|x, T = t] = \mathbb{E}[Y|\Phi(x), T = t]. \quad (9)$$

It becomes evident that the second equation is valid when the condition of double balancing representation is met. In the context of HDRC estimation, the two conditions comprising the double balancing representation are of paramount importance, as they mutually reinforce the effectiveness of this representation. Hence, it is imperative to verify the fulfillment of the double balancing representation condition.

Method

The two conditions in double balancing representation both control confounder information of treatment assignment and retain necessary confounder information for outcome prediction. For unbiased heterogeneous dose-response curve estimation, we design the contrastive regularizer loss and mean square loss to constrain these two conditions.

Contrastive Regularizer

In the setting of dose-response curve estimation, the treatments can be multiple and continuous and the covariates are high-dimensional. To ensure the unbiased treatment assignment, it is necessary to quantify the conditional dependence of T and X given $\Phi(X)$ (Rosenbaum and Rubin 1983). Without loss of generalization, we adopt partial distance measure (Székely and Rizzo 2014) to achieve this goal. The partial distance measure is a scalar quantity that captures dependence, which equals the conditional correlation in Gaussian scenarios. In the non-Gaussian case, a partial distance of zero does not confirm conditional independence, however, such a measure that is closer to zero indicates a weaker association (refer to Sec 4.2. in (Székely and Rizzo 2014)).

Partial Distance Measure. For all observed data, assuming three variables \mathbf{X} , \mathbf{T} , \mathbf{Z} and their double-centered pairwise distance $\omega(\mathbf{X})$, $\omega(\mathbf{T})$, $\omega(\mathbf{Z})$, we define $[\omega(\mathbf{X})]_{i,j} = \|\mathbf{X}_i - \mathbf{X}_j\| - \frac{1}{n} \sum_{k=1}^n \|\mathbf{X}_k - \mathbf{X}_j\| - \frac{1}{n} \sum_{l=1}^n \|\mathbf{X}_i - \mathbf{X}_l\|$

$+ \frac{1}{n^2} \sum_{k=1}^n \sum_{l=1}^n \|\mathbf{X}_k - \mathbf{X}_l\|$ where $\|\cdot\|$ is the Euclidean norm and $\omega(\cdot) \in \mathbb{R}^{n \times n}$. The form of $\omega(\mathbf{T})$, $\omega(\mathbf{Z})$ are similar. We define the inner product of $\omega(\mathbf{X})$ and $\omega(\mathbf{T})$ as $\omega(\mathbf{X}) \otimes \omega(\mathbf{T}) = [n(n-3)]^{-1} \sum_{i \neq j} [\omega(\mathbf{X})]_{i,j} \cdot [\omega(\mathbf{T})]_{i,j}$.

The double-centered pairwise distance orthogonal projection of \mathbf{X} on \mathbf{Z} is $\text{proj}_{\mathbf{Z}}(\mathbf{X}) = \omega(\mathbf{X}) - \omega(\mathbf{X}) \otimes \omega(\mathbf{Z}) [\omega(\mathbf{Z}) \otimes \omega(\mathbf{Z})]^{-1} \omega(\mathbf{Z})$, and the projection of $\omega(\mathbf{T})$ on $\omega(\mathbf{Z})$ is similar. Then, we formulate the partial distance measure $D_{\mathbf{Z}}(\mathbf{X}, \mathbf{T})$ as follows:

$$D_{\mathbf{Z}}(\mathbf{X}, \mathbf{T}) = \frac{|\text{proj}_{\mathbf{Z}}(\mathbf{X}) \otimes \text{proj}_{\mathbf{Z}}(\mathbf{T})|}{\|\text{proj}_{\mathbf{Z}}(\mathbf{X})\| \cdot \|\text{proj}_{\mathbf{Z}}(\mathbf{T})\|}, \quad (10)$$

where $|\cdot|$ is the absolute operation. The norm $\|\text{proj}_{\mathbf{Z}}(\mathbf{X})\| = (\text{proj}_{\mathbf{Z}}(\mathbf{X}) \otimes \text{proj}_{\mathbf{Z}}(\mathbf{X}))^{1/2}$ and the norm $\|\text{proj}_{\mathbf{Z}}(\mathbf{T})\|$ similarly defined.

Given the partial distance measure, a key challenge relates to the design of the loss function (LeCun et al. 2006). The motivation for employing contrastive learning stems from the potential mode collapse issue (Jing et al. 2021; Goodfellow et al. 2020), which can occur when naively minimizing partial distance measures for positive samples. Mode collapse is a fundamental problem in representation learning (He et al. 2020; Chen et al. 2020; Chen and He 2021) and arises when a model fails to adequately capture the diverse patterns within the data, instead collapsing them into a single mode or a limited set of modes. For instance, if the balancing representation exhibits a multi-modal distribution, but the model only learns a uni-modal distribution, it becomes susceptible to mode collapse. This situation can introduce bias into the learned representation for the estimation of heterogeneous dose-response curves (Li et al. 2023a). To obviate it, we adopt the contrastive learning (Chen et al. 2020).

We propose a novel contrastive regularizer (CR) to constrain the balancing representation. To construct the positive and negative samples for contrastive learning, we randomly shuffle the n units of \mathbf{X} in the original data m times to get $n * m$ permuted data \mathbf{X}' that $\mathbf{X}' \perp\!\!\!\perp \mathbf{T}$ (Arbour, Dimmery, and Sondhi 2021; Cheng et al. 2020). Then we name \mathbf{X} *positive samples* and \mathbf{X}' *negative samples* and define their partial distance measure as:

$$D_{\Phi(\mathbf{X})}(\mathbf{X}, \mathbf{T}) = \frac{|\text{proj}_{\Phi(\mathbf{X})}(\mathbf{X}) \otimes \text{proj}_{\Phi(\mathbf{X})}(\mathbf{T})|}{\|\text{proj}_{\Phi(\mathbf{X})}(\mathbf{X})\| \cdot \|\text{proj}_{\Phi(\mathbf{X})}(\mathbf{T})\|}, \quad (11)$$

$$D_{\Phi(\mathbf{X}')}(\mathbf{X}, \mathbf{T}) = \frac{|\text{proj}_{\Phi(\mathbf{X}')}(\mathbf{X}) \otimes \text{proj}_{\Phi(\mathbf{X}')}(\mathbf{T})|}{\|\text{proj}_{\Phi(\mathbf{X}')}(\mathbf{X})\| \cdot \|\text{proj}_{\Phi(\mathbf{X}')}(\mathbf{T})\|}. \quad (12)$$

As the Fig. 1 shown, given the representations $\Phi(\mathbf{X})$ and $\Phi(\mathbf{X}')$ from n observed covariates \mathbf{X} and n shuffled covariates \mathbf{X}' , the correctly specified function Φ should satisfy that $D_{\Phi(\mathbf{X})}(\mathbf{X}, \mathbf{T}) \ll D_{\Phi(\mathbf{X}')}(\mathbf{X}, \mathbf{T})$. Then we propose to perform contrastive learning for the positive samples \mathbf{X} and negative samples \mathbf{X}' . The contrastive regularizer loss is formulated as follows:

$$\ell_{\Phi}^{CR}(\mathbf{X}, \mathbf{T}) = D_{\Phi(\mathbf{X})}(\mathbf{X}, \mathbf{T}) - \log \sum_{j=1}^m \exp(D_{\Phi(\mathbf{X}'_j)}(\mathbf{X}, \mathbf{T})), \quad (13)$$

where m represents the number of shuffles, and $\mathbf{X}'_{(j)}$ denotes the shuffled covariates from the n negative samples

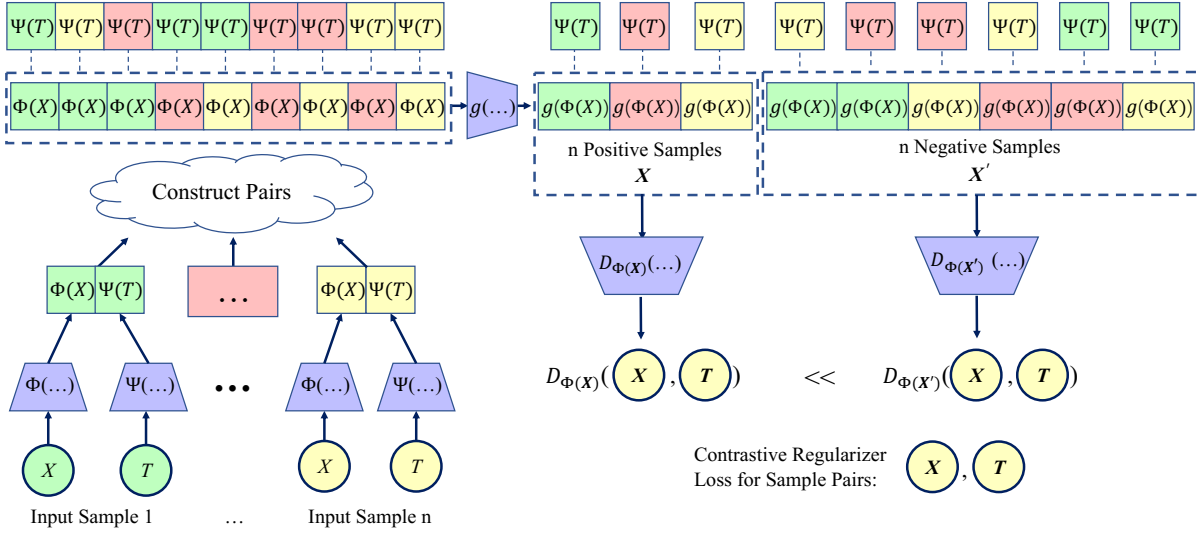


Figure 1: Contrastive regularizer. The n covariates \mathbf{X} undergo a transformation via the encoder Φ resulting in $\Phi(\mathbf{X})$. $\Phi(\mathbf{X})$ transforms to $g(\Phi(\mathbf{X}))$ through projection head g (Chen et al. 2020). $g(\Phi(\mathbf{X}))$ is directly constrained by $\ell_{\Phi}^{CR}(\mathbf{X}, \mathbf{T})$. To simplify notation, we use $\Phi(\mathbf{X})$ in the context to represent $g(\Phi(\mathbf{X}))$. $D_{\Phi(\mathbf{X})}$ and $D_{\Phi(\mathbf{X}')}$ are partial distance measure of positive/negative samples (Székely and Rizzo 2014).

acquired during the j th shuffle. The total count of negative samples is given by $n \times m$. During the training procedure, for each batch of samples, we perform random shuffling of the original covariates within the batch a total of m times, and we set $m = 1$ with default (Cheng et al. 2020).

It is worth noting that the contrastive regularizer serves a dual purpose, not only preserving unbiasedness but also ensuring the continuity of treatments, thereby benefiting prognostic condition, owing to its enhancement of representation quality. More specifically, given that all discrimination operates at the instance level (Wu et al. 2018), there is no necessity to discretize treatment variables into bins (Schwab et al. 2020; Bica, Jordon, and van der Schaar 2020; Nie et al. 2021). Consequently, the continuity of treatments is inherently maintained. Furthermore, the contrastive regularizer with positive/negative samples effectively captures diverse information from covariates X for representation learning. This aspect aligns with the requirement of addressing prognostic condition, aiming to capture the differences in causal effects among various study subjects (Hansen 2008).

CRNet

Different from the unbiasedness condition, which focuses on the treatment assignment. The prognostic condition focus on the outcome prediction power in representation. In this paper, we design a two-head neural network, which encodes the treatments T through Ψ and covariates X through Φ for representations $\Psi(T)$ and $\Phi(X)$. Then, we adopt a mean square error loss (MSE) to directly constrain the condition in the double balancing representation that $Y \perp\!\!\!\perp X | \Phi(X)$. In particular, for a unit i , the MSE loss is formulated as follows:

$$\ell^{MSE}(X_i, T_i, Y_i) = (Y_i - h(\Phi(X_i), \Psi(T_i)))^2. \quad (14)$$

Although the MSE loss has been commonly employed in previous works for outcome prediction (Schwab et al. 2020; Bica, Jordon, and van der Schaar 2020; Nie et al. 2021), it's important to note that most of these approaches do not constrain the prognostic condition effectively. To elaborate, DRNet (Schwab et al. 2020) imposes the MSE loss on a treatment-balanced representation that is independent of treatments T . However, as treatments T is correlated with covariates X , this approach may lead to a loss of essential confounder information for outcome prediction. VCNet (Nie et al. 2021) utilizes the MSE loss on representations constrained by a propensity score estimator, which is considered the coarsest balancing score (Rosenbaum and Rubin 1983). Representations subject to this constraint may also fail to satisfy the prognostic representation condition (Hahn 1998). Furthermore, these methods tend to neglect the issue of mode collapse, which can compromise their ability to estimate heterogeneous causal effects effectively. Different from them, our MSE loss is imposed on double balancing representations, while constraining the representation to satisfy unbiasedness. We achieve this by employing the contrastive regularizer to preserve the confounder information of X . This facilitates the direct regression model to learn prognostic representation as much as possible.

In summary, we propose a neural network framework called CRNet for the estimation of HDRC. As depicted in Figure 2, the overall architecture of CRNet comprises three distinct blocks: a) Two-Head Encoder. The first head, denoted as Φ , encodes covariates \mathbf{X} into representation $\Phi(\mathbf{X})$. The second head, denoted by Ψ , encodes treatments \mathbf{T} into representation $\Psi(\mathbf{T})$; b) Projection Head. The projection head, denoted by g , project the covariate representation $\Phi(\mathbf{X})$ into $g(\Phi(\mathbf{X}))$ for the partial distance measure involving covariates \mathbf{X} and treatments \mathbf{T} ; c) Outcome Estimator.

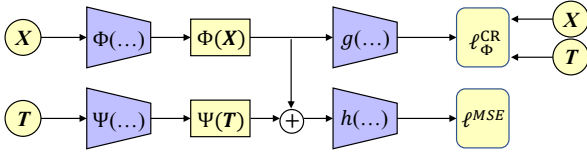


Figure 2: *CRNet*. For the training procedure, the representations $\Phi(\mathbf{X})$ constrained by contrastive loss $\ell_{\Phi}^{CR}(\mathbf{X}, \mathbf{T})$ are concatenated and input to MLPs h to obtain the estimated outcome \hat{Y} by the final loss in Eq. (15). The final objective is to minimize the loss. For the inference procedure, the estimated HDRC is obtained by $h(\Phi(\mathbf{X}), \Psi(\mathbf{T}))$.

The outcome estimator h takes the concatenated representations of covariates and treatments, $\Phi(\mathbf{X})$ and $\Psi(\mathbf{T})$, as input and transforms them into $h(\Phi(\mathbf{X}), \Psi(\mathbf{T}))$. This estimated outcome $h(\Phi(\mathbf{X}), \Psi(\mathbf{T}))$ approximates the observed Y by the regularized regression loss $\ell^{final}(\mathbf{X}, \mathbf{T}, \mathbf{Y})$:

$$\ell^{final}(\mathbf{X}, \mathbf{T}, \mathbf{Y}) = \sum_{i=1}^n \ell^{MSE}(X_i, T_i, Y_i) + \alpha * \ell_{\Phi}^{CR}(\mathbf{X}, \mathbf{T}), \quad (15)$$

where α represents the hyperparameter. The use of both the MSE loss ℓ^{MSE} and the contrastive regularizer loss ℓ_{Φ}^{CR} is necessary for unbiased estimation of HDRC. The loss ℓ^{MSE} is used to minimize the difference between the predicted outcome and the observed outcome, thus ensuring that the model can make reliable predictions. Without this loss, the CRNet model would not be able to accurately predict the outcomes, resulting in loss of prediction capacity. On the other hand, the loss ℓ_{Φ}^{CR} helps to prevent treatment assignment bias and outcome overfitting by comparing the representation of positive/negative samples. Without this loss, the CRNet model might induce treatment assignment bias or mode collapse, leading to inaccurate outcome prediction. In short, the two losses in ℓ^{final} complement each other.

Experiments

Since the true HDRC are rarely available in real application, in line with previous work (Nie et al. 2021; Bica et al. 2020), we simulate 4 synthetic data and 5 semi-synthetic data from two real-world datasets IHDP² and News³.

Experimental Setup

Synthetic Data Generation. We simulate synthetic data as follows. For each unit $i \in \{1, 2, \dots, n\}$, we generate $p = 100$ covariates from an independent identical distribution, i.e., $\mathbf{X}_i \sim \mathcal{N}(\mathbf{0}_p, \mathbf{E}_p)$, where $\mathbf{0}_p$ denotes a p -dimensional vector with all elements equal 0, and \mathbf{E}_p represents p -order identity matrix. We generate q treatments using the following rules: $T_{i,j} = 0.2 \sum_{j=1}^5 W_j X_{i,j} + \frac{1}{p-11} \sum_{j=11}^p W_j X_{i,j}^2 + \tilde{T}_{i,j} + 0.5 \tilde{T}_{i,j}^3 X_{i,p-j}$. Here, we denote $\tilde{T}_{i,j} \sim \mathcal{N}(0, 1)$, $W_j \sim U(0.5, 1)$ for $j \in \{1, 2, \dots, q\}$. The outcome is generated according to the following

rules: $Y_i = 0.5 \sum_{j=1}^q W_j^T |T_{i,j}| + 0.5 \sum_{j=6}^{10} W_j X_{i,j}^2 + \sum_{j=11}^p W_j X_i + 0.5 \sum_j^q T_{i,j} X_{i,q-j-10}$. Here, we denote $W_j^T \sim U(0.5, 1)$. Then, we design 4 simulation datasets and name them Data- q where q means the dimension of \mathbf{T} and \mathbf{X} (e.g., Data-1 means a simulation with 1 treatment, 100 covariates). Then we sample 2100/600/300 units for training/validation/test for each data.

Semi-synthetic Data Generation. We proceed to perform semi-simulation experiments with the aim of demonstrating the robustness of our method across a range of settings. These settings are designed in accordance with the data generation rules of synthetic data generation. We sample units from the IHDP data to create the training, validation, and test sets, with 522/150/75 units for each data split. For the News dataset, we perform data splits into training, validation, and test sets with 2100/600/300 units, respectively.

Baselines and Evaluation. We compare our model with the following baselines in the above datasets: For statistical methods, we use (1) **Causal Forest** (Wager et al. 2018), a random forest algorithm for causal inference. (2) **GPS** (Imbens 2000), a generalized propensity score for continuous treatments. (3) **CBGPS** (Fong et al. 2018), a generalized covariate balancing propensity score (Imai and Ratkovic 2014) for continuous treatments. For deep methods, we apply (4) **SCIGAN** (Bica et al. 2020), a hierarchical generative adversarial network (Goodfellow et al. 2020). (5) **DRNet** (Schwab et al. 2020), a multi-head deep model stratified according to treatment. (6) **VCNet** (Nie et al. 2021), a varying coefficient neural network with functional targeted regularization.

For all experiments, we perform 30 replications to report the mean integrated square error (MISE) and the standard deviations (std) of HDRC estimation: $\text{MISE} = s^{-1} \sum_{i=1}^s \int_a^b (h(t, X_i) - \hat{h}(t, X_i))^2 dt$, where s is the test sample size and $[a, b]$ is the sampling interval of treatment values.

Results

Performance Comparison. We conduct simulation and semi-simulation experiments as shown in Table 2, where bold indicates optimal performance, and underlined indicates suboptimal performance. As the dimensionality of treatments increases, traditional statistical methods tend to fail, highlighting their limitations in handling complex, high-dimensional data. CRNet surpasses both DRNet and VCNet in performance, underscoring that relying solely on treatment-balanced representation or balancing representation can indeed lead to a loss in predictive capabilities. SCIGAN’s poor performance in high-dimensional data reflects the instability inherent in generative adversarial networks while also emphasizing the necessity of balancing representation condition. CRNet attains a state-of-the-art performance level in all conducted experiments. This demonstrates the effectiveness of the double balancing representation condition in enhancing both the constraint on unbiasedness and the outcome predictive capacity.

Ablation Studies. To verify the performance of prognostic representation, we conduct the w/o balancing (BR) abla-

²<https://www.fredjjo.com>

³<https://paperdatasets.s3.amazonaws.com/news.db>

Method	Data-1	Data-2	Data-5	Data-10	IHDP-1	News-2	News-4	News-8	News-16
GPS	57.7 ± 18	57.8 ± 14	57.4 ± 15	78.0 ± 19	0.98 ± 0.4	84.3 ± 4.6	83.8 ± 4.5	87.8 ± 3.8	89.0 ± 4.2
CBGPS	57.8 ± 18	57.8 ± 14	57.3 ± 15	70.5 ± 19	1.03 ± 0.4	84.1 ± 4.4	83.6 ± 4.6	85.5 ± 5.0	86.7 ± 4.5
CF	1.83 ± 0.6	2.50 ± 0.7	5.16 ± 0.9	14.9 ± 2.4	0.79 ± 0.3	26.8 ± 15	26.9 ± 11	47.9 ± 21	82.7 ± 81
DRNet	2.35 ± 0.7	3.49 ± 1.4	6.39 ± 2.1	18.5 ± 4.7	1.29 ± 0.4	18.0 ± 8.9	18.6 ± 10	33.3 ± 65	26.1 ± 10
SCIGAN	15.0 ± 13	26.1 ± 13	43.6 ± 15	59.6 ± 26	0.65 ± 0.3	233 ± 218	163 ± 151	254 ± 365	200 ± 248
VCNet	5.79 ± 4.8	6.41 ± 4.7	13.7 ± 5.7	28.2 ± 7.1	1.28 ± 0.7	11.3 ± 6.0	9.80 ± 3.3	26.5 ± 51	25.3 ± 31
CRNet	1.69 ± 0.5	2.07 ± 0.8	3.05 ± 0.7	7.55 ± 2.6	0.22 ± 0.1	3.21 ± 1.4	5.19 ± 2.3	8.35 ± 5.0	9.18 ± 2.9
w/o BR	2.04 ± 0.5	2.56 ± 1.0	4.76 ± 1.2	9.69 ± 5.1	0.63 ± 0.4	6.03 ± 4.6	5.60 ± 3.4	9.88 ± 5.9	15.9 ± 23
w/o PR	52.9 ± 16	53.9 ± 14	51.0 ± 13	55.2 ± 16	0.92 ± 0.4	35.3 ± 17	36.1 ± 17	36.1 ± 15	38.3 ± 14

Table 2: Performance comparison (MISE ± std) and ablation studies on simulation Data- q - p , IHDP- q and News- q .

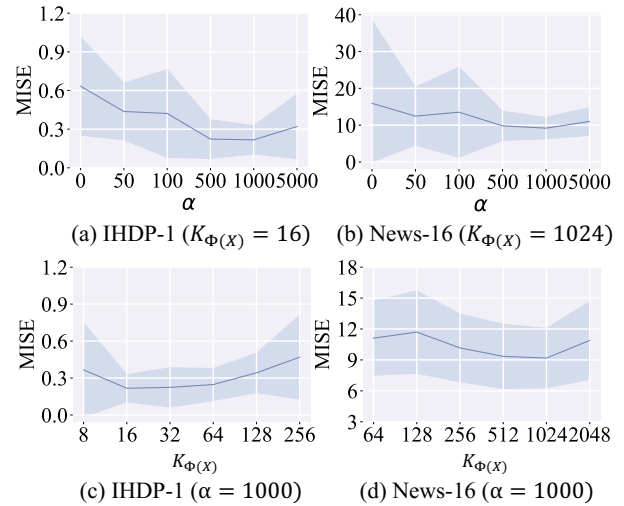
$n * m$	Data-1	Data-10	IHDP-1	News-16
$m = 0$	1.99 ± 0.6	11.0 ± 3.1	0.58 ± 0.3	10.2 ± 2.9
$m = 1$	1.69 ± 0.5	7.55 ± 2.6	0.22 ± 0.1	9.18 ± 2.9
$m = 2$	1.69 ± 0.5	7.06 ± 2.4	0.24 ± 0.1	<u>10.1 ± 4.0</u>
$m = 3$	1.69 ± 0.5	7.38 ± 3.2	0.23 ± 0.1	10.9 ± 5.0
$m = 5$	1.71 ± 0.6	8.08 ± 3.1	0.23 ± 0.1	10.5 ± 4.1
$m = 10$	1.70 ± 0.6	7.36 ± 2.7	<u>0.23 ± 0.1</u>	11.5 ± 6.4

Table 3: Performance comparison (MISE ± std) varying values m of the number of negative sample augmentations.

tion study on CRNet with hyperparameter $\alpha = 0$. To verify the performance of balancing representation, we conduct the w/o prognostic (PR) ablation study on CRNet, which applies a two-stage training strategy: Only loss ℓ_{Φ}^{CR} is used in the first stage, and only ℓ^{MSE} loss is used in the second stage. The results are shown in Table 2. Although w/o balancing achieved good performance in most settings, its performance was still significantly degraded compared to CRNet. On the other hand, w/o prognostic performed poorly in all settings. This result aligns with our expectations since the model’s predictive accuracy deteriorates when the prognostic representation condition is unsatisfied, and the sole reliance on prognostic representation proves biased in practice.

Hyperparameters Tuning. We conduct experiments to evaluate the impact of hyperparameters α in Eq. (15), the dimension of double balancing representation $K_{\Phi(X)}$, the augmentation of negative samples m on the performance of CRNet. As Fig. 3 shown, we found that a large α improves estimation performance. Nevertheless, when α is too large, it will be an obstacle to fitting the outcome. Moreover, we found that increasing the dimension $K_{\Phi(X)}$ does not lead to a substantial improvement in estimation performance, which implies that CRNet is not sensitive to the dimension.

We further conduct experiments, as shown in Table 3, by increasing the number of shuffle times m from 0 to 10. The results show a degradation in performance when $m = 0$, highlighting that naive minimization of the partial distance measure can induce mode collapse. Conversely, increasing m to 1 significantly improves performance, indicating the effectiveness of our designed negative sample constraint. This issue is particularly pronounced in high-dimensional

Figure 3: The sensitivity experiments (MISE ± SD) for the value of α and the dimension of double balancing representation $K_{\Phi(X)}$ on IHDP-1 and News-16 datasets.

datasets such as Data-10 and News-16. The results also show that our best results from the main text (Tables 2) can be further improved by increasing the number of m . To enhance training efficiency, this paper defaults to $m = 1$.

Conclusion

For estimating heterogeneous dose-response curves, we propose a neural network called CRNet. With no break of the continuity of treatments, this network discriminates between positive samples \mathbf{X} and negative samples \mathbf{X}' by a partial distance measure applied to double balancing representation. By employing this network, we enforce unbiasedness in our estimates and enable us to capture the prognostication present among individuals. Besides, this study has some potential limitations. We assume unconfoundedness and although we make efforts to control for potential confounding factors, there remains a possibility that unmeasured or unknown confounders may influence the results. Additionally, different conditional dependence measures may lead to different conclusions about the performance of our method.

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