

# ARE213 Problem Set #1B

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## 1 Problem #1

### 1.1 Part A

*Under the assumption of random assignment conditional on the observables, what are the sources of misspecification bias in the estimates generated by the linear model estimated in Problem Set 1a?*

**Wrong functional form.** In Problem Set 1A we used linear (i.e.,  $y = \beta x + \epsilon$ ) estimators to make “corrections” while the true functional form of the relationships between the covariates we included in the model were certainly not linear. By imposing a linear function on a non-linear data generating process (described by the CEF), we introduce misspecification bias in the model.

**Omitted Variables Bias.** We were able to use variables included in the dataset in our linear model, but not the unobserved variables that may be important for control. If omitted variables exist that both determine outcomes related to birth weight and are correlated with smoking status we will over- or under-estimate the effect (depending on the characteristics of the omission).

### 1.2 Part B

*Now, consider a series estimator. Estimate the smoking effects using a flexible functional form for the control variables (e.g., higher order terms and interactions). What are the benefits and drawbacks to this approach?*

We can attempt to reduce the magnitude of the first source of bias mentioned above (functional form) by introducing non-parametric series estimators as a replacement for linear regression. To implement this we used a natural cubic spline with two knots on the “dmar” variable (maternal age) in the regression from PS1A. The tobacco use (treatment) and marital status remain as factors. We also implemented a version of the model with interactions between the splined maternal age term and the two discrete terms. The summary of the results are in Table 1. The ATE for the model we used in PS1A for tobacco use was 200 grams (rounded from an exact estimate of 195 grams). This is essentially unchanged with the addition splines to the maternal age relationship (an exact estimate of 199 grams). Adding interaction terms results in an ATE for tobacco use of 220 grams.

The benefits to applying splines in this case is that the regression model more closely matches the reality of the data, which show that birth weight’s relationship to maternal age has a peak and is not monotonically increasing. The drawback is that the true functional form is only obscured in this approach. While the interaction terms result in an ATE that is different from the one in a non-interacting model, the interpretation becomes much more difficult. In a policymaking environment the addition of splines and interactions would represent a potential roadblock to the essential message, which remains unchanged, which is that birth weight is reduced in mothers who use tobacco (by about 200 grams).

## 2 Problem #2

The Propensity Score Method (PSM) uses a “surrogate” normalized metric (p-score) as a replacement for the observable controls that would normally be used to condition the estimates of a treatment response to the variable in question. The p-score is defined as a normalized score that represents the likelihood a sample selects into treatment conditioned on observables. Because it collapses all the dimensions into a 0:1 continuum PSM avoids the curse of dimensionality encountered with large nonparametric regression models, where it can be difficult to find neighbors or “bandwidth-mates” in n-dimensional space.

Table 1: Comparison of three linear models for birth weight

	Birth Weight		
	1) PS1A LM	2) 1+spline	3) 2+interaction
tobacco2	195.101*** (4.764)	199.060*** (4.774)	252.395*** (84.171)
dmage	2.716*** (0.338)		
ns(dmage, df = 3)1		147.297*** (10.062)	85.607** (37.532)
ns(dmage, df = 3)2		342.494*** (36.880)	386.881** (177.619)
ns(dmage, df = 3)3		-10.419 (25.826)	-55.186 (104.185)
dmar2	-146.507*** (4.538)	-123.962*** (4.797)	57.854 (85.517)
tobacco2:ns(dmage, df = 3)1			101.145** (41.432)
tobacco2:ns(dmage, df = 3)2			-68.050 (194.021)
tobacco2:ns(dmage, df = 3)3			33.670 (109.995)
tobacco2:dmar2			-267.716*** (94.824)
ns(dmage, df = 3)1:dmar2			-135.516*** (50.824)
ns(dmage, df = 3)2:dmar2			-398.948* (214.796)
ns(dmage, df = 3)3:dmar2			-275.447* (165.568)
tobacco2:ns(dmage, df = 3)1:dmar2			42.062 (59.539)
tobacco2:ns(dmage, df = 3)2:dmar2			619.892*** (239.750)
tobacco2:ns(dmage, df = 3)3:dmar2			391.482** (192.669)
Constant	3,170.698*** (10.921)	3,040.520*** (16.392)	2,989.989*** (76.157)
$N$	3 114,610	114,610	114,610
$R^2$	0.037	0.039	0.040
Adjusted $R^2$	0.037	0.039	0.040

*Notes:*

\*\*\*Significant at the 1 percent level.

\*\*Significant at the 5 percent level.

\*Significant at the 10 percent level.

## 2.1 Part A

To calculate the propensity score, we estimated a logit model of mother's tobacco use (0=non-smoker, 1=smoker) as determined by the predetermined covariates shown in Table 2. Model #1 shows the full model using all of the covariates suspected to be predetermined. Model #2 is a reduced form of the same model, preserving just those covariates that were significant at the 1% level in Model #1.

To test whether the propensity scores predicted by these two models are significantly different we perform a likelihood ratio test between the full and reduced model. This test yields the following output:

**Likelihood ratio test for MLE method:** Chi-squared 3 d.f. = 10.21274,  
P value = 0.01684173

NOTE from class: including insignificant terms can be beneficial in terms of getting better fit (by reducing

## 2.2 Part B

This estimation assumes unconfoundedness. and conditional independence

This suggests that (pursuant to these assumptions) the average effect of smoking on birthweight is a reduction of 223 grams.

## 2.3 Part C

We estimate the average treatment effect of smoking on birthweight to be 222 grams when using the reweighting approach. This approach involved taking a weighted average of all observations using the (normalized inverse) of the propensity score as a weighting factor. This is consistent with the estimate produced using the regression approach.

We estimate the average treatment on the treated to be

## 2.4 Part D

Here we estimate the density function with a kernel density estimator, using the density() function in R. We estimate the density function separately for the smoking and non-smoking members of the sample, and weight

Table 2: Logistic function coefficients for propensity score models

	Mother Tobacco-Use Status	
	(1)	(2)
Mother's Race not White or Black	−1.956*** (0.134)	−1.954*** (0.133)
Mother's Years of Education	−0.817*** (0.028)	−0.818*** (0.028)
Marital status	−0.205*** (0.005)	−0.204*** (0.005)
Father's age	−1.256*** (0.022)	−1.251*** (0.021)
Father's Years of Education	0.029*** (0.002)	0.030*** (0.001)
Father Mexican	−0.131*** (0.005)	−0.131*** (0.005)
Father Puerto Rican	−1.961*** (0.173)	−1.957*** (0.173)
Father Cuban	−1.267*** (0.058)	−1.268*** (0.058)
Father Central or South American	−0.567 (0.364)	−0.567 (0.364)
Father Race Other or Unknown Hispanic	−1.933*** (0.205)	−1.932*** (0.205)
Plurality of Infant	−0.890*** (0.120)	−0.889*** (0.120)
Sex of Infant	−0.148*** (0.054)	
Mother's age	−0.019 (0.017)	
dmage	0.003 (0.002)	

their responses with the propensity scores normalized to the subsample (e.g.  $p(X_i)/\sum_{j=1}^{N_{smokers}} p(X_j)$ )

We estimate the density function using the Epanechnikov kernel and bandwidths ranging from 15 grams to 50 grams in increments of 5 grams. Figure 1 shows the density function estimated with a bandwidth of 40 grams. This bandwidth appears to be a good compromise between washing out some of the noise at lower bandwidths while preserving the underlying CEF.

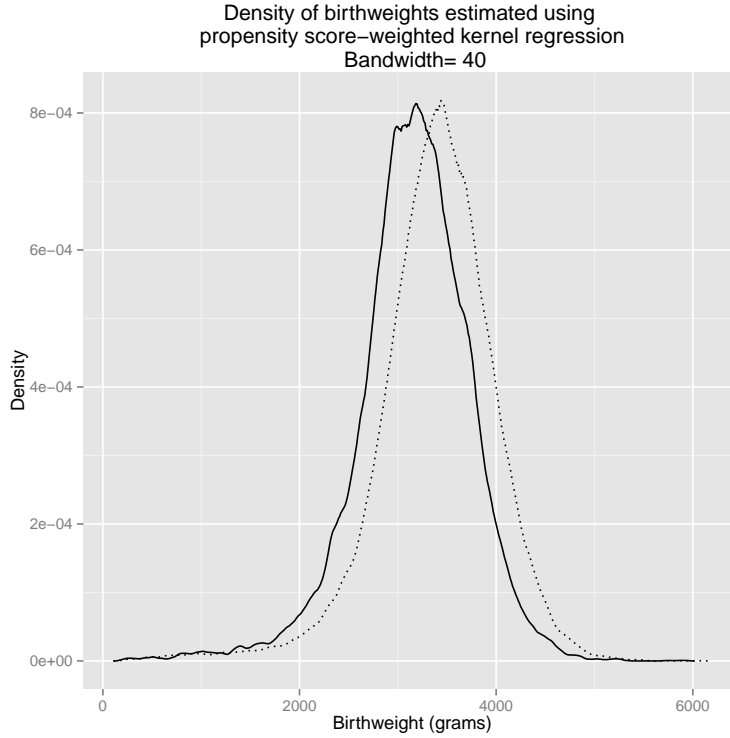


Figure 1: Birthweight density function estimates produced using Epanechnikov kernel estimator for smokers and non-smokers.

We also estimate the density at  $x=3000$  grams by hand. We first calculate the average propensity score for both smokers and non-smokers with infants at 3000 grams. The dataset has 12 smokers and 47 non-smokers with infants born at this weight. The average propensity score for these smokers is 0.27 and for non-smokers it is 0.20. These values stand to reason- the people who have opted in to smoking in this class have been predicted as more likely to

be smokers.

### 3 Code

We used R to complete this assignment. The code is below:

```
1 # PROBLEM SET 1B
2 # ARE 213 Fall 2013
3 ## TO DO:
4 # Figure out ATT in 2c
5 # Get a legend on the kerndensity plots to make the "beautiful and
  publication ready"
6 # Figure the kernel regression by hand problem
7 # problem 5
8 # writing up a number of problems (I will get more done on this in the
  morning - need to go take a midterm).
9
10 # Frank's Directory
11 #setwd("/media/frank/Data/documents/school/berkeley/fall13/are213/are213/ps1
  ")
12
13 # Peter's Directory
14 #setwd("~/Google Drive/ERG/Classes/ARE213/are213/ps1")
15
16
17 # Packages -----
18 library(foreign) #this is to read in Stata data
19 library(Hmisc)
20 library(psych)
21 library(stargazer)
22 library(ggplot2) # for neat plotting tools
23 library(plyr) # for nice data tools like ddply
24 library(epicalc) # For likelihood ratio test
25 library(car) # "companion for applied regression" - recode fxn, etc.
26 library(gmodels) #for Crosstabs
27 library(splines) # for series regression
28 library(np) #nonparametric regression
29 library(rms) #regression modeling tools
30 library(effects)
31
32 # Homebrewed functions
33 source("../util/are213-func.R")
34 source("../util/watercolor.R") # for watercolor plots
35
36 # Data -----
37 ps1.data <- read.dta(file="ps1.dta")
38
39 var.labels <- attr(ps1.data, "var.labels")
40
41 # Data Cleaning Step
42 full.record.flag <- which(ps1.data$cardiac != 9 &
43                           ps1.data$cardiac != 8 &
44                           ps1.data$lung != 9 &
45                           ps1.data$lung != 8 &
```

```

46         ps1.data$diabetes !=9 &
47         ps1.data$diabetes !=8 &
48         ps1.data$herpes != 9 &
49         ps1.data$herpes != 8 &
50         ps1.data$chyper != 9 &
51         ps1.data$chyper != 8 &
52         ps1.data$phyper != 9 &
53         ps1.data$phyper != 8 &
54         ps1.data$pre4000 !=9 &
55         ps1.data$pre4000 !=8 &
56         ps1.data$preterm != 9 &
57         ps1.data$preterm != 8 &
58         ps1.data$tobacco != 9 &
59         ps1.data$cigar != 99 &
60         ps1.data$cigar6 !=6 &
61         ps1.data$alcohol != 9 &
62         ps1.data$drink != 99 &
63         ps1.data$drink5 !=5 &
64         ps1.data$wgain !=99
65     )
66
67     ps1.data$full.record <- FALSE # initialize column as F
68     ps1.data$full.record[full.record.flag] <- TRUE #reassign level to T for full
        records
69
70     ps1.data.clean <- subset (ps1.data, full.record == TRUE)
71     ps1.data.missingvalues <- subset(ps1.data, full.record == FALSE)
72
73     # Problem 1a : Describes PS1a results. -----
74     # Problem 1b -----
75     # This is using a series estimator. I think smooth.spline() is the right
        function to use, but let me know if you think we should be doing kernel
        regression instead. I'm also not sure how to go about adding interaction
        terms. I think a kernel regression is more appropriate here...mostly
        because I don't know the spline function and there seems to be a good
        package ("np") for running kernel regression.
76
77     # SPLINE FIT FOR # CIGS
78
79     # sm.flex <- with(ps1.data.clean, smooth.spline(cigar, y=dbrwt, nknots=10,
        spar = 0.7, tol = 0.0001)) # Fits a smooth line to the data
80     # sm.flex.df <- data.frame(sm.flex$x, sm.flex$y) #converts the fitted values
        into a data frame for ggplot
81     #
82     # splineplot <- ggplot(sm.flex.df, aes(x = sm.flex.x, y=sm.flex.y))
83     # splineplot <- splineplot +
84     #   geom_point(data=ps1.data.clean, aes(x = cigar, y = dbrwt), pch = 1) +
85     #   geom_line(color='red') +
86     #   labs(x = 'Cigarettes smoked per day by mother', y= 'Birthweight')
87     # splineplot
88     #
89     # ggsave(filename = 'img/splineplot.pdf')
90
91     # Using Series estimator with splines on maternal age.
92
93     ps1.data.clean$tobacco <- as.factor(ps1.data.clean$tobacco)
94     ps1.data.clean$dmar <- as.factor(ps1.data.clean$dmar)

```



```

95
96 wsp.ps1a <- lm(dbrwt ~ tobacco + dmage + dmar, data=ps1.data.clean)
97 wsp <- lm(dbrwt ~ tobacco + ns(dmage, df=3) + dmar, data=ps1.data.clean)
98 wsp.int <- lm(dbrwt ~ tobacco * ns(dmage, df=3) * dmar, data=ps1.data.clean)
99
100 stargazer(wsp.ps1a, wsp, wsp.int, style="qje", no.space = TRUE, dep.var.
      labels = "Birth Weight")
101
102
103
104 # This is the ATE with a splines regression on Age
105 summary(effect("tobacco", wsp))
106
107 # This is the ATE with a complex, interacting splines regression on AGE
108 summary(effect("tobacco", wsp.int))
109
110 # Problem 2a -----
111 ps1.data.clean$tobacco.rescale <- with(ps1.data.clean, recode(tobacco, "
      2='0'", as.numeric.result=TRUE)) #rescales the tobacco use variable to
      be 0/1, where 0=no and 1 = yes
112 ps1.data.clean$dmar.rescale <- with(ps1.data.clean, recode(dmar, "2='0'"))
113
114 smoke.propensity.all <- glm(tobacco.rescale ~ as.factor(mrace3) + dmeduc +
      dmar.rescale + dfage + dfeduc + as.factor(orfath) + dplural + csex +
      dmage, data=ps1.data.clean, family = binomial()) ## Did I miss any
      predetermined covariates here? No.
115
116 smoke.propensity.reduced <- glm(tobacco.rescale ~ as.factor(mrace3) + dmeduc
      + dmar.rescale + dfage + dfeduc + as.factor(orfath), data=ps1.data.
      clean, family = binomial())
117
118
119 stargazer(smoke.propensity.all, smoke.propensity.reduced,
120           type = "latex",
121           covariate.labels = c("Mother's Race not White or Black", "Mother'
      s Years of Education", "Marital status", "Father's age", "
      Father's Years of Education", "Father Mexican", "Father
      Puerto Rican", "Father Cuban", "Father Central or South
      American", "Father Race Other or Unknown Hispanic", "
      Plurality of Infant", "Sex of Infant", "Mother's age"),
122           style = "qje",
123           align = TRUE,
124           label = "tab:propensities",
125           title = "Logistic function coefficients for propensity score
      models",
126           dep.var.labels = "Mother Tobacco-Use Status",
127           out = "propensityscores.tex"
128           )
129
130 ps1.data.clean$propensityfull <- predict(smoke.propensity.all, type = "
      response")
131 ps1.data.clean$propensityreduced <- predict(smoke.propensity.reduced, type =
      "response")
132
133 detach("package:rms")
134 sink(file = "lrtest.tex", append = FALSE)
135 lrtest(smoke.propensity.all, smoke.propensity.reduced) #Test whether the two

```

```

    scores are statistically different
136 sink()
137
138 require(rms)
139
140 #Problem 2b - Estimating a regression model using propensity scores -----
141
142 sm.propensityregression <- lm(dbrwt ~ propensityreduced * tobacco.rescale,
    ps1.data.clean)
143
144 #calculation of average treatment effect:
145 coefficients(sm.propensityregression)[2] + coefficients(sm.
    propensityregression)[4]*mean(ps1.data.clean$propensityreduced)
146
147 tobacco.effects <- (effect("tobacco.rescale", sm.propensityregression))
148
149 stargazer(sm.propensityregression,
150     type = "latex",
151     covariate.labels = c("Delta1", "Beta", "Delta2", "Constant"),
152     style = "qje",
153     align = TRUE,
154     font.size="footnotesize",
155     label = "tab:propensitymodel",
156     title = "Model of effects of tobacco use on birthweight using
        propensity score as a control",
157     dep.var.labels = "Mother Tobacco-Use Status",
158     out = "propensityscoremodel.tex"
159 )
160
161 #Problem 2c - Using reweighting with propensity scores -----
162
163 ps1.data.clean$tobacco.rescale.n <- as.numeric(levels(ps1.data.clean$tobacco
    .rescale))[ps1.data.clean$tobacco.rescale]
164
165 term1 <- with(ps1.data.clean, sum((tobacco.rescale.n*dbrwt)/
    propensityreduced)/sum(tobacco.rescale.n/propensityreduced))
166 term2 <- with(ps1.data.clean, sum(((1-tobacco.rescale.n)*dbrwt)/(1-
    propensityreduced))/sum((1-tobacco.rescale.n)/(1-propensityreduced)))
167
168 weightingestimator <- term1-term2 #This should be the average treatment
    effect
169
170 term1.T <- with(subset(ps1.data.clean, tobacco.rescale.n=1), sum((tobacco.
    rescale.n*dbrwt)/propensityreduced)/sum(tobacco.rescale.n/
    propensityreduced))
171 #term2.T <- with(subset(ps1.data.clean, tobacco.rescale=1), sum(((1-tobacco.
    rescale)*dbrwt)/(1-propensityreduced))/sum((1-tobacco.rescale)/(1-
    propensityreduced)))
172
173 weightingestimator.T <- term1.T#-term2.T #This should be the average
    treatment on treated
174
175
176 # Problem 2d - Kernel Density Estimator
177 tot.propensity.nosm <- with(subset(ps1.data.clean, tobacco.rescale == 0),
    sum(propensityreduced))
178 tot.propensity.sm <- with(subset(ps1.data.clean, tobacco.rescale == 1), sum(

```

```

    propensityreduced))
179
180 kerndensity.plot.fn <- function(h){
181 kerndensity.nosm <- with(subset(ps1.data.clean, tobacco.rescale == 0),
182     density(dbrwt, #if nobody smoked
183         kernel = "epanechnikov",
184         bw = h,
185         weights = propensityreduced/tot.propensity.
            nosm))
186 kerndensity.nosm.df <- data.frame(kerndensity.nosm[1], kerndensity.nosm[2])
187
188 kerndensity.sm <- with(subset(ps1.data.clean, tobacco.rescale == 1),
189     density(dbrwt, #if everybody smoked
190         kernel = "epanechnikov",
191         bw = h,
192         weights = propensityreduced/tot.propensity.sm)
            )
193 kerndensity.sm.df <- data.frame(kerndensity.sm[1], kerndensity.sm[2])
194
195 kerndensity.plot <- ggplot(kerndensity.nosm.df, aes(x, y))
196 kerndensity.plot <- kerndensity.plot +
197     geom_line(linetype = 'dotted') +
198     geom_line(data = kerndensity.sm.df, aes(x, y)) +
199     labs(title = paste("Density of birthweights estimated using \n propensity
        score-weighted kernel regression \n Bandwidth=", as.factor(h)), x = "
        Birthweight (grams)", y = "Density") +
200     guides(linetype = "Legend") # Having trouble getting a legend.
201
202 kerndensity.plot
203
204 ggsave(file = paste0('img/kerndensity', h, '.pdf'), plot = kerndensity.plot)}
205
206 ##Problem 2d - calculating kernel value by 'hand' at dbrwt = 3000 -----
207 ##I can't figure out what to do here. Most of this is probably wrong but
    maybe something is right. Want to take a whack?
208 ##h <- 30
209 ##kernel.epa <- function(u){
210 ##return(0.75*(1-u*u))}
211
212 ##propensity3000.sm <- with(ps1.data.clean, mean(propensityreduced[which(
    dbrwt == 3000 & tobacco.rescale == 1)]))
213 ##propensity3000.nosm <- with(ps1.data.clean, mean(propensityreduced[which(
    dbrwt == 3000 & tobacco.rescale == 0)]))
214 ##for(i in 1:nrow(subset(ps1.data.clean, tobacco.rescale == 1))){
215 ##with(subset(ps1.data.clean, tobacco.rescale == 1),
216 ##    kern3000.sm.num <- kern3000.sm.num +
217 ##    kernel.epa(((propensity3000.sm-propensityreduced[i])/h)*dbrwt))
218 ## with(subset(ps1.data.clean, tobacco.rescale == 1),
219 ##    kern3000.sm.den <- kern3000.sm.den +
220 ##    kernel.epa(((propensity3000.sm-propensityreduced[i])/h))
221 ## }
222 ## kern3000.sm <- kern3000.sm.num / kern3000.sm.den
223
224
225 ## kernel3000.sm <- with(subset(ps1.data.clean, tobacco.rescale == 1), data.
    frame(window = (3000 - dbrwt/h)))
226 ## kernel3000.sm$enumerator <- with(subset(ps1.data.clean, tobacco.rescale ==

```

```

1), kernel.epa(((3000/propensity3000.sm) - (dbrwt/propensityreduced))/h
))
227 ## kernel3000.sm$denominator <- with(subset(ps1.data.clean, tobacco.rescale
    == 1), kernel.epa(((3000/propensity3000.sm) - (dbrwt/propensityreduced))
    /h))
228
229 ## with(kernel3000.sm[window < 1 & window > -1], sum(numerator))/(nrow(
    kernel3000.sm[abs(window < 1)]*h)
230
231 #Problem 2e -----
232 for(h in seq(from = 15, to = 50, by = 5)){
233   kerndensity.plot.fn(h)} # This should make plots of the kernel density
    function for bandwidths ranging from 15 to 40 by 5. Feel free to adjust
    these values
234
235
236
237 ### Problem 3
238 ## Using blocking estimator
239 # Divide smokers into ~100 equally spaced blocks
240 prop.max <- with(ps1.data.clean, max(propensityreduced))
241 prop.min <- with(ps1.data.clean, min(propensityreduced))
242 prop.binsize <- (prop.max - prop.min)/99
243
244 ps1.data.clean$blocknumber <- with(ps1.data.clean,
245     round(propensityreduced/prop.binsize,
        digits = 0) + 1)
246
247 blocktreatmenteffects <- ddply(ps1.data.clean, .(blocknumber), summarize,
    smokers = sum(tobacco.rescale == 1), nonsmokers = sum(tobacco.rescale ==
    0), smokerdbrwt = mean(dbrwt[tobacco.rescale == 1]), nonsmokerdbrwt =
    mean(dbrwt[tobacco.rescale == 0]))
248
249 blocktreatmenteffects$badbin <- with(blocktreatmenteffects, as.numeric(
    smokers == 0 | nonsmokers == 0))
250
251 cleaned.blocks <- subset(blocktreatmenteffects, badbin == 0)
252 cleaned.blocks$avgtreatmenteffect <- with(cleaned.blocks, smokerdbrwt -
    nonsmokerdbrwt)
253 cleaned.blocks$weight <- with(cleaned.blocks, (smokers + nonsmokers)/sum(
    smokers + nonsmokers))
254 cleaned.blocks$weightedTE <- with(cleaned.blocks, weight *
    avgtreatmenteffect)
255
256 blocksATE <- sum(cleaned.blocks$weightedTE)
257
258 ### Problem 4
259 ps1.data.clean$lowbrwt <- as.numeric(ps1.data.clean$dbrwt < 2500)
260
261 blocklowbrwt <- ddply(ps1.data.clean, .(blocknumber), summarize, smokers =
    sum(tobacco.rescale == 1), nonsmokers = sum(tobacco.rescale == 0),
    lowbrwtprob.sm = mean(lowbrwt[tobacco.rescale == 1]), lowbrwtprob.nosm =
    mean(lowbrwt[tobacco.rescale == 0]))
262
263 blocklowbrwt$badbin <- with(blocklowbrwt, as.numeric(smokers == 0 |
    nonsmokers == 0))
264

```