tebalance summarize — Covariate-balance summary statistics

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Also see			

Description

tebalance summarize reports diagnostic statistics that are used to check for covariate balance over treatment groups after estimation by a teffects inverse-probability-weighted (IPW) estimator, a teffects matching estimator, or an stteffects IPW estimator.

Quick start

Raw and weighted standardized differences and variance ratios of all covariates from the most recently estimated teffects model or stteffects model

tebalance summarize

Same as above, but report statistics only for covariates x1 and x2

tebalance summarize x1 x2

Baseline means and variances for treated and control groups

tebalance summarize, baseline

Menu

 $Statistics > Causal \ inference/treatment \ effects > Balance > Summaries$

Syntax

```
tebalance summarize [varlist] [, baseline]
```

varlist may contain factor variables; see [U] **11.4.3 Factor variables**. collect is allowed; see [U] **11.1.10 Prefix commands**.

Option

Main

baseline specifies that tebalance summarize report means and variances by treatment level.

Remarks and examples

When the distribution of a covariate is the same for all treatment levels, the covariate is said to be balanced. tebalance summarize reports diagnostic statistics to check for covariate balance after teffects or stteffects. tebalance summarize can be executed after all teffects estimators with the exception of teffects ra and executed after stteffects ipw and stteffects ipwra.

We recommend that you read [CAUSAL] **tebalance** before proceeding; it provides an introduction to covariate balance and an overview of the implemented methods. See [CAUSAL] **stteffects intro** for survival-time discussion and examples.

Example 1: Checking covariate balance after psmatch

Using an extract from the data used by Cattaneo (2010), we use teffects psmatch to estimate the effect of a mother's smoking behavior (mbsmoke) on the birthweight of her child (bweight), controlling for marital status (mmarried), the mother's age (mage), whether the mother had a prenatal doctor's visit in the baby's first trimester (prenatal1), and whether this baby is the mother's first child (fbaby).

```
. use https://www.stata-press.com/data/r19/cattaneo2
(Excerpt from Cattaneo (2010) Journal of Econometrics 155: 138-154)
. teffects psmatch (bweight) (mbsmoke mmarried mage prenatal1 fbaby),
> generate(matchv)
                                                                            4,642
Treatment-effects estimation
                                                Number of obs
                                                                    -
                                                Matches: requested =
Estimator
               : propensity-score matching
                                                                                1
                                                                                1
Outcome model : matching
                                                                min =
                                                                              139
Treatment model: logit
                                                                max =
                             AI robust
               Coefficient std. err.
                                                 P>|z|
                                                            [95% conf. interval]
     bweight
                                            z
ATE
     mbsmoke
    (Smoker
         vs
 Nonsmoker)
                -235.1714
                             27.74409
                                         -8.48
                                                 0.000
                                                           -289.5488
                                                                        -180.794
```

We specified the option generate (matchv) to speed up the postestimation commands that compute balance statistics, as discussed in example 3 under *Remarks and examples* in [CAUSAL] tebalance. We do not interpret the estimated effect produced by this preliminary model but rather check the specification.

We begin by looking at the standardized differences and variance ratios for the raw data and the matched sample.

	Raw	Matched		
Number of obs =	4,642	9,284		
Treated obs =	864	4,642		
Control obs =	3,778	4,642		
	Standardized			
	Raw	Matched	Raw	ance ratic Matched
mmarried				
mmarried mage	Raw	Matched	Raw	Matched
	Raw5953009	Matched .0014107	Raw 1.335944	Matched

The matched sample results indicate that matching on the estimated propensity score balanced the covariates. The standardized differences are all close to zero, and the variance ratios are all close to one. This inference is informal because we do not have standard errors for these statistics.

We may also wish to see the baseline summary statistics.

. tebalance summa:	rize, baselin	e		
Covariate balance	summary			
	Raw	Matched		
Number of obs =	4,642	9,284		
Treated obs =	864	4,642		
Control obs =	3,778	4,642		
	Me	ans	Varia	ances
	Control	Treated	Control	Treated
mmarried	.7514558	.4733796	.1868194	.2495802
mage	26.81048	25.16667	31.87141	28.10429
prenatal1	.8268925	.6898148	.1431792	.2142183
fbaby	.4531498	.3715278	.2478707	.2337654

While we rely on the standardized differences for conclusions about balance in the unmatched sample from this output, the baseline means and variances give us some idea of the scale of the differences.

Example 2: Multivalued treatments

In the multivalued-treatment case, tebalance summarize produces output grouped by treatment level. In the Cattaneo (2010) extract, the variable msmoke is an ordered categorical variable specifying the number of cigarettes smoked. We begin by tabulating msmoke.

. tabulate msmoke					
Cigarettes smoked during pregnancy	Freq.	Percent	Cum.		
0 daily	3,778	81.39	81.39		
1 - 5 daily	200	4.31	85.70		
6-10 daily	337	7.26	92.96		
11+ daily	327	7.04	100.00		
Total	4,642	100.00			

All the treatment groups have significantly smaller numbers of observations than the control group of not smoking. Still, each group has at least 200 observations. We continue by quietly fitting a candidate IPW model and reporting the baseline summaries.

```
. quietly teffects ipw (bweight) (msmoke mmarried mage prenatal1 fbaby)
```

```
. tebalance summarize, baseline
```

Covariate balance summary

		Ob	Observations	
Treatment		Raw	Weighted	
0 daily	=	3,778	1,164.8	
1-5 daily	=	200	1,164.4	
6-10 daily	=	337	1,157.9	
11+ daily	=	327	1,154.9	
Total	=	4,642	4,642.0	

	Me	ans	Variances	
	Control Treated		Control	Treated
1-5 daily				
mmarried	.7514558	.455	.1868194	.2492211
mage	26.81048	24.64	31.87141	31.44764
prenatal1	.8268925	.695	.1431792	.2130402
fbaby	.4531498	.48	.2478707	.2508543
6-10 daily				
mmarried	.7514558	.4480712	.1868194	.2480394
mage	26.81048	25.06231	31.87141	27.07051
prenatal1	.8268925	.6795252	.1431792	.2184188
fbaby	.4531498	.3827893	.2478707	.2369648
11+ daily				
mmarried	.7514558	.5107034	.1868194	.250652
mage	26.81048	25.59633	31.87141	26.93471
prenatal1	.8268925	.6972477	.1431792	.2117409
fbaby	.4531498	.293578	.2478707	.2080261

The results for the control level of 0 daily are repeated for the treatment group. These results give a sense of the scale of imbalance in the raw data. Now we compute the balance statistics.

. tebalance summarize

		Ob	oservations
Treatment		Raw	Weighted
0 daily	=	3,778	1,164.8
1-5 daily	=	200	1,164.4
6-10 daily	=	337	1,157.9
11+ daily	=	327	1,154.9
Total	=	4,642	4,642.0

Covariate balance summary

	Standardized differences		Varia	Variance ratio		
	Raw	Weighted	Raw	Weighted		
1-5 daily						
mmarried	634909	0016208	1.334021	1.001406		
mage	3857482	0219656	.9867038	.9905584		
prenatal1	312519	0012611	1.487927	1.001898		
fbaby	.053769	.0422102	1.012037	1.008631		
6-10 daily						
mmarried	6506304	0108454	1.327696	1.009331		
mage	3220222	0836571	.8493666	.7984901		
prenatal1	3465797	0100232	1.525493	1.015051		
fbaby	1429048	.0268118	.9560018	1.005899		
11+ daily						
mmarried	5147672	0212969	1.34168	1.018136		
mage	2239116	0636951	.8451058	.8468934		
prenatal1	3077549	0380744	1.478852	1.056645		
fbaby	3342243	.0155427	.8392526	1.003598		

These results indicate that the IPW estimator probably did not fully balance the covariates (the variance ratios for mage at the daily levels of 6–10 cigarettes and 11-plus cigarettes are not close to 1). At this point, we would use a richer model and see whether it balanced the covariates.

Note that we cannot use tebalance overid, because it has not been implemented for multivalued treatments.

4

Stored results

tebalance summarize stores the following in r():

Matrices

r(size) r(table) number of observations in the raw and matched or weighted samples table of covariate statistics

Reference

Cattaneo, M. D. 2010. Efficient semiparametric estimation of multi-valued treatment effects under ignorability. *Journal of Econometrics* 155: 138–154. https://doi.org/10.1016/j.jeconom.2009.09.023.

Also see

- [CAUSAL] stteffects intro Introduction to treatment effects for observational survival-time data
- [CAUSAL] stteffects ipw Survival-time inverse-probability weighting
- [CAUSAL] stteffects ipwra Survival-time inverse-probability-weighted regression adjustment
- [CAUSAL] tebalance Check balance after teffects or stteffects estimation
- [CAUSAL] teffects aipw Augmented inverse-probability weighting
- [CAUSAL] teffects ipw Inverse-probability weighting
- [CAUSAL] teffects ipwra Inverse-probability-weighted regression adjustment
- [CAUSAL] teffects nnmatch Nearest-neighbor matching
- [CAUSAL] teffects psmatch Propensity-score matching
- [CAUSAL] teoverlap Overlap plots

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