Description Remarks and examples Also see

## Description

In this example, we show how to estimate and interpret the results of an extended regression model with an ordinal outcome and endogenous treatment.

## **Remarks and examples**

We are studying the effect of having health insurance on women's health status, which we measure with a health score from 1 (poor) to 5 (excellent). We want to estimate the average treatment effect (ATE) of insurance on the probability of having each of the five statuses. We suspect that our model needs to account for the health insurance being an endogenous treatment.

In our fictional study, we collect data on a sample of 6,000 women between the ages of 25 and 30. In addition to the insurance indicator, we include an indicator for whether the woman exercises regularly and the number of years of schooling she completed (grade) as exogenous covariates. For our treatment model, we use grade and an indicator for whether the woman is currently working or attending school (workschool), which is excluded from the outcome model.

. use https:// (Women's healt	'www.stata-pre th status)	ess.com/data	/r19/wome	enhlth		
<pre>. eoprobit hea &gt; vce(robust)</pre>	alth i.exercis	se grade, en	treat(in:	sured = g	grade i.worksc	hool)
(iteration log or	nitted)					
Extended ordered probit regression					Number of ob Wald chi2(4)	s = 6,000 = 516.93
Log pseudolike	elihood = -910	05.4376			Prob > chi2	= 0.0000
		Robust				_
	Coefficient	std. err.	Z	P> z	[95% conf.	interval
health						
exercise#						
insured						
Yes#No	.5296149	.0619049	8.56	0.000	.4082835	.6509463
Yes#Yes	.5190249	.033872	15.32	0.000	.4526371	.5854127
ingurod#						
c grade						
No	.1079014	.0250326	4.31	0.000	.0588383	.1569645
Yes	.1296456	.0107428	12.07	0.000	.10859	.1507012
insured						
grade	.3060024	.0100506	30.45	0.000	.2863036	.3257012
workschool						
Yes	.5387767	.0446794	12.06	0.000	.4512067	.6263466
_cons	-3.592452	.1348431	-26.64	0.000	-3.85674	-3.328165
/health						
insured#						
c.cut1						
No	.6282326	.2393499			.1591154	1.09735
Yes	7255086	.2470598			-1.209737	2412803
insured#						
c.cut2	1 504000	0200150			1 142066	0.044010
NO	1.594089	.2300159			1.143266	2.044912
ingurod#	.4404531	.1986825			.0510426	.8298030
No	2 526424	2241048			2 087186	2 965661
Yes	1.332514	.1845713			.9707608	1.694267
insured#	11002011	1010110			101 01 000	1100 1201
c.cut4						
No	3.41748	.2356708			2.955574	3.879386
Yes	2.292828	.1760594			1.947758	2.637899
corr(e.ins~d,						
e.health)	.3414241	.0940374	3.63	0.000	.1460223	.5111858

The estimated correlation between the errors from the health status equation and the errors from the health insurance equation is 0.34. This is significantly different from zero, so the treatment choice of being insured is endogenous. Because it is positive, we conclude that unobserved factors that increase the chance of having health insurance tend to also increase the chance of being in a high health status.

We see estimates of both the coefficients and the cutpoints for two equations, one for insured women (yes) and one for uninsured (no). For both insured and uninsured, exercise and education have positive effects on health status.

We could use estat teffects to estimate the ATE of insurance on the probabilities of each health category.

. estat teffects

Feel free to run that command and see the results. We estimate and interpret other estimates of these ATEs in [ERM] **Example 6b** after adjusting for endogenous sample selection that is introduced in that example. The ATE estimates there are slightly different, but they estimate the same thing. Given a sufficiently large sample, the two sets of estimates would converge to the same values.

## Also see

[ERM] eoprobit — Extended ordered probit regression

[ERM] eoprobit postestimation — Postestimation tools for eoprobit and xteoprobit

[ERM] estat teffects — Average treatment effects for extended regression models

- [ERM] Intro 5 Treatment assignment features
- [ERM] Intro 9 Conceptual introduction via worked example

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