

INVESTIGATING THE ROLE OF  
HEALTH: IS IT REALLY AN  
INTANGIBLE RESOURCE FOR  
ECONOMIC GROWTH?

by

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Abstract

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In this study I investigate the empirical evidence of health factor influence on economic growth in different country groups. A particular attention is paid to the research of health peculiarities in the countries with transition economies. Based on the PCA method I construct four different health indices including eight health factors that could proxy for health. Extending production function model of economic growth by constructed health indices I examine the influence of health factor on the real output. The main finding is that under majority of specifications health indices were found to be positive and significant. The influence of health on productivity growth in transition countries does not differ much from the health influence on productivity in the other countries groups. Under stochastic frontier estimation approach, in terms of coefficients the health influence on output was also found to be positive and significant. The main findings provide the grounds to claim that health is an important factor for the output growth, and the governments should consider for the nexus between health and productivity when deciding for different policy implications.

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## GLOSSARY

<b>IV</b>	Instrumental Variable
<b>Immunization DPT</b>	Immunization from Diphtheria, Pertussis, Tetanus
<b>CIS</b>	Commonwealth of Independent States
<b>EU</b>	European Union
<b>FSU</b>	Former Soviet Union
<b>GDP</b>	Gross Domestic Product
<b>GNI</b>	Gross National Income
<b>PCA</b>	Principal Component Analysis
<b>ROW</b>	Rest of the World

## *Chapter 1*

### INTRODUCTION

The idea that a healthy person is likely to be more productive, more able to be educated and more effective than one with poor health is not a new one. Moreover, the most recent research provides a clear evidence of economic benefits of better health. It has already been investigated that healthy people get better jobs and are able to earn more than unhealthy people do (Bliss and Stern, 1970; Ross and Mirovsky, 1995). This means that general health improvements, given the same level of combination of skills, physical capital and technological knowledge, should increase a country's productivity, which in its own turn is an important factor of a country's economic growth (Howitt, 2005).

In modern economic theory two approaches are applied for investigating the influence of health on productivity at both micro- and macro- levels. The first type of research is concentrated at the level of households and individuals, investigating the interdependence between people's health and their productivity and income. The second one is a comparison of economic performance of different countries over time, using proxy indicators for health such as life expectancy, total fertility rate and GDP. I am going to focus my research on the second one. Motivation for investigating this question is that in transition countries there is no such a strong correlation between education and productivity, as large amount of population even with higher education show low income and productivity, in this case health might better explain human capital and be significant for explaining growth. The second reason is that for now there are no empirical studies on the impact of health capital on economic growth in CIS countries considering for peculiarities in determinants of economic growth and health systems, including such factors as structural economical changes, CO<sub>2</sub> pollutions, immunizations, quality of political institutions, physicians per 1000 people, increase in tobacco and alcohol consumption due to stress of uncertainty etc.

. While doing my research I am going to apply two approaches.

Considering for the estimation of health influence on economic growth proposed by Bloom (2001) I'll try to model the proxy determinants of economic growth with the emphasis on variables that approximate health. The novelty of my research at this step will be that for modeling health index I will apply the Principle Component Analysis that will allow constructing a health index considering for eight different factors that could possibly proxy for health. In order to compare the influence of health on productivity in transition countries versus the other countries groups the model specification including dummy variables for transition countries are estimated.

In most cases it is difficult to sort out the nature of the relationship between health and income. If income is very low, health suffers, sometimes to the point of death and vice versa, a person in a very poor health may have no capacity to create wealth. The same trend can be observed on the level of countries, wealthy countries are always found to be healthier than poor ones, and of course the poor countries are both less healthy and as a result less productive. At this point it is difficult to determine what initially causes what, and as a result the problem of endogeneity arises. Finding of an appropriate instrumental variable can allow for a possible solution to this problem.

The second approach will consider for the importance of health factor in explaining the efficiency in production function for the countries in transition vs the ROW countries classified by income. I am going to estimate the stochastic frontier of the production function of different countries at the first step without health variable, and at the next step considering for the health variables. This will give the evidence, how important health can be in terms of explaining the inefficiencies.

This paper will consist of several parts.

The next chapter is literature review of the papers already written on the subject and general conclusions found for most countries investigated, including those in transition.

In the third chapter the data description is presented with short variables description and summary statistics on each of the variables, which are included in the empirical model.

In the fourth chapter the methodology is analyzed. The main description of the model, advantages and disadvantages of both applied in the estimation part methods.

The fourth chapter is dedicated to empirical estimations on the basis of model. The results received are analyzed and compared to the expected; basically in this part I check for the hypothesis on the importance of health factor in economic growth of countries with transition economies.

In the conclusive chapter the results obtained are discussed, possible policy implementations are provided, and of course questions of interest for future investigations in this area are formulated.

## Chapter 2

### LITERATURE REVIEW

Nowadays the idea of health as one of the most important factors in human capital is quite spread in the scientific world. The identity of being “healthy is successful” or “health is wealth” is a key one in cultures of most countries. No doubt that health is important on both individual and overall nation’s levels. In a global survey prepared for the Millennium Summit of the United Nations a good health was ranked as the number one desire of men and women around the world. For any individual health is an important asset for personal development and future prosperity. It is the basis of the capacity to learn at school, of the ability to grow intellectually and physically; moreover it’s one of the cornerstones of an individual economic productivity. The health of the population is determined by the health of separated households or individuals, so in the long run this fact makes possible to treat health as the inevitable factor for economic development at the scale of whole nation. The same logic can be applied in case of alternative approach – economic costs of being ill. Sickness decreases the annual income of the society, diminishes the lifetime income of the individuals, and causes the slow downs in economic growth, which expressed in money equivalent, could be equated to the hundreds of billions of US dollars (Gwatkin, 2000).

Taking into consideration the multidirectional influence of health, the literature devoted to this topic can be classified into two basic directions micro- oriented, which considers health impact at the individual and household level, and macro-oriented which estimates the contribution of health on the economy overall.

The studies devoted to the economic impact of health at the *individual(micro) level* usually consider such questions as the impact of health on wages, earnings, the amount of hours worked, labor force participation, personal education, early retirement and labor supply and the importance of physiology in earnings and wages. The key questions of the

*macro effects* are aggregated effect of the abovementioned factors on the country level in terms of GDP or the GDP growth rate. This research is mostly concentrated on the macro level questions, particularly I apply the principle component analysis in order to model the health index, including different health factors that can influence the health on the country level and then investigate the influence of constructed health index on economic growth of different countries groups with particular analysis of the Eastern Europe transition countries.

The interest to the relationship between health and economic growth is not a new one in the literature, but the new wave of discussion in considerable extent was raised by The World Bank report on health 1993 (World Bank 1993). The studies in this area can be examined in two aspects: including either theoretical and empirical analysis or just empirical one.

#### **Papers Considering both Theoretical and Empirical Research**

In a *theoretical basis*, Grossman (1972) developed the model that set health capital formation as a capital good, which was able to produce domestic goods and to earn money. His model assumes health as initial endowment, depreciating with age and growing with investment in health. The basic conclusions of the model are that the productive nature of health is when a good state of health allows for a more effective performance in the job and study. He considered demand for medical services and main determinants of health capital accumulation to be determined by wages, age and level of education.

The Nobel laureate Robert Fogel was among the pioneers in developing models that included health capital specifically. Fogel (1994) examined the contribution of health improvement to the economic development of several countries over one or two centuries. His investigations gave an explanation to the relationship between body size and food supply and showed it to be critical for long-term labor productivity (Report of the Commission on Macroeconomics and Health, WHO, 2001). Fogel states that increase in the amount of calories available for work over the past 200 years in Europe

have been importantly boosted by the increased availability of calories in the diet, as well as by advances in public health and medical technologies, which in its own case resulted in huge productivity growth (Fogel, 1994).

Sorkin (1977) was the first one to conclude that health in terms of reduction in mortality had a significant effect on economic growth at the beginning of the 20<sup>th</sup> century. Sorkin separated the influence of health on the economy in developing and developed countries. He found that improvement of health status of the developed countries population would have insignificant influence on economic growth, while in developing countries the expected result is vice versa.

The majority studies that examine the effect of health on economic growth widely use theoretical framework that underlies the specification of the conditional convergence model developed by Barro and Sala-i-Martin (1995). Common empirical estimation based on this theoretical framework focuses on the cross-section of countries. The standard approach is to regress the rate of growth income per capita on the initial level of health, which is typically proxied by life expectancy or adult survival rate. The possible problem that can arise underlies in the idea that countries can be very different in income level, so to control for the initial level of income and for some other factors that could possibly influence steady state income levels different authors include various policy variables such as institutions (Knack and Keefer(1995)), measure of openness to trade, which in its own turn also depends on country-specific market institutions (Sachs and Warner (1995)), measure of ethno-linguistic fractionalization (Easterly and Levine (1997)), variables that control for geographical factors that possibly influence the productivity and trading opportunities (Gallup, Sachs et al.) etc.

Hamoudi and Sachs (1999); Bloom and Canning (2000); Bloom, Canning and Graham (2003) consider different ways through which health improvements can influence the pace of income growth influencing the changes on worker productivity, labor market participation, investments in human capital, saving, population and age structure. Empirical approach peculiar to the previously considered papers for studying the health impact on economic growth is based on above mentioned Barro and Sala-i-

Martin theoretical framework. All these studies differ in terms of functional forms, data definitions and configurations, country samples, time trends etc., but important is the fact that the results of these papers in terms of parameter estimates of life expectancy and age structure on economic growth are quite comparable.

Also following Barro and Sala-i-Martin theoretical framework Bloom, Canning and Sevilla (2001) extend production function model of economic growth in order to account for to fundamental components of human capital from the point of view of microeconomics such as work experience and health. In previous works health in form of life expectancy was widely used in many cross country regressions, and in most papers it was found to have significant and positive effect on economic growth, but before it was not clearly indicated whether health directly influences growth or it is just a proxy for the other possible missing factors. To test for the existence of a true effect of health on labor productivity and to estimate its strength Bloom et al include health and experience in a well specified production function. The variable experience, along with political institutions and geography function is included to avoid the problem of overestimation of contribution of health variable. In result the authors found that “a one year improvement in population’s life expectancy contributes to a 4 per cent increase in output”, when experience and experience squared were found to be insignificant. The other aspect of the model used is that it “considers for the efficiency with which the inputs are used”, by other words it considers for the total factor productivity, estimating it under assumption that steady state TFP levels are the same in every country. In my research I would estimate a production function model of economic growth, keeping the specification as close as possible to that of Bloom, Canning and Sevilla (2001) in order to facilitate the comparison between estimates obtained in my model to the result obtained by the authors. To improve the model instead of life expectancy as a proxy for health I will construct a health index including 8 different factors which influence health both on the individual and country level and aggregated could be considered as a more efficient proxy for health. To consider for the efficiency with which the different country groups use their inputs I would apply the other different from the Bloom et al (2001) method, in particular Simor and Wilson (2005) efficiency estimation. Applying the Simor and Wilson (2005) method to the same specified production function I would estimate how much of

the inefficiency of the production frontier of different country groups can be explained in terms of health. The second approach allows alternatively estimate the influence of health factor on countries' growth productivity, which can also be considered as advantage. Along with considering on health index and applying the alternative estimation approach I would also consider peculiarly for the transition countries in terms of including dummy for this particular group. The interest to this particular country group is motivated by two reasons: 1) the research of health factor on productivity growth considering for this countries group has not been done yet and is not considered in above mentioned paper, this fact can be explained by poor data availability because of historical and political peculiarities of these countries; 2) education in the Eastern Europe transition countries do not correlate so much with income as it does in other countries of the world, which can be explained by the fact that higher education was free of charge and available almost for everybody, and now there are many people who have higher education and do not have job or have low level of income.

Bhargava et al. (2001) applied different approaches to modeling the proximate determinants of economic growth with emphasis on variables that approximate health of the population. They developed an analytical framework within which issues of human development, capital formation, and demographic transition can be discussed. The models developed include stochastic properties of GDP series and consider for data limitations. For investigation of stochastic properties of the GDP series from Penn World Table and World Development Indicators the authors applied fixed effect framework and dynamic random effects models. Average growth rates at 5 years intervals were modeled via using model similar to Barro (1997) but allowing for some simultaneity and interactions between dependent variables. The results in estimated models showed that in spite of the rough approximation of individual's health in national averages there is significant effect of adult survival rate on economic growth for low-income countries. A novelty of the paper was in the ability of authors to estimate the threshold point beyond which adult surviving rate had negligible effect on growth rates; confidence intervals estimated for the net impact of adult surviving rate on economic growth proved the asymmetries for poor and rich countries. The main drawback of given research rather unevenly available data for poor, middle and high income countries. Analyses

based on more complicated and precise data sets would allow sharper insights into the influence of health on economic growth.

Bloom and Canning (2005) “compare the size of macroeconomic estimates of the effect of health on worker productivity with the microeconomic estimates of the effect of health on wages. The authors estimated that one percentage point increase in adult survival rates increases labor productivity approximately by 2.8 per cent. The results obtain go along with the results received by Weil (2001), which basically are that health factor is strongly significant for the explanation in the cross-country differences of the income level per worker. Bloom and Canning conclude that judging by the estimation results, there is a strong evidence of larger role for health than for education.

### **Empirical Papers**

Early *empirical research* of the impact of health on economic growth belongs to Malenbaum (1970). He investigated how the influence of health factor on output could be larger compared with other economic and social variables. To get the result he used a step wise regression equation with macroeconomic data of poor countries, where independent variable was agriculture output and dependent variables were social, economic and health data.

Mankiw et al. (1992) enlarged the Solow growth model by adding human capital as a determinant variable for economic growth. They showed that the augmented Solow model provides an excellent description of the cross-country data. Improved model explains 80% of the international variation in income per capita. The estimated influences of physical capital accumulation, population growth and human capital accumulation confirm the model’s prediction.

Following a Ramsey scheme, Barro (1996) developed a growth model, which included physical capital inputs determined by health capital, level of education and the number of worked hours. The result of the first order condition demonstrated the diminishing marginal returns to investment in health and found out that “increase in health indicators raises the incentives to invest in education and raise in health capital

lowers the rate of depreciation of health” (Aguayo-Rico et al., 2005). In particular, Barro received a significantly positive effect of health (measured by life expectancy) on economic growth, and the size of effect appeared to be bigger than the effect of education. But in this case he noted the problem of reverse causality. “Better health tends to enhance economic growth in various ways. At the same time, economic advance encourages further accumulation of health capital”

Based on the idea that people in rich countries are on average healthier than people in poor countries, Weil (2005) evaluates the extent to which these gaps in health can help explain the income gaps. The problem of endogeneity of health variable almost excludes the possibility of using aggregated data for estimation of structural effect of health on income. Besides, Weil applies a kind of novelty in estimation approach; basically he takes “microeconomics estimates of the health effect based on individual outcomes for constructing macroeconomic estimates of the proximate effect of health on GDP per capita” or by other words he uses microeconomic results for answering macroeconomic question of the magnitude in income variation among countries could be explained by health. The effect of health on income estimated via such methodology is quite large and significant. So, using the adult survival rate for man as one of possible measures for health, Weil found that 22.6% of log GDP variance per worker is explained by health, and which is more important that decreasing of health gaps among poor, middle and high developed countries would decrease the variance of log GDP by 36.6%. Such a result again verified the thought that health is one of the central determinants of income variation. The drawback of methodology is that it gives an opportunity to estimate only proximate effect of health. Moreover there exist a number of indirect channels through which health influences country-level output, that are not envisaged by the model (Weil, 2005).

The majorities of the authors investigating the problem base their research mostly on the data of poor African and high-developed European countries. For now there is relatively small number of the researches concerning the influence of health on and macro-economical level of countries in transition, despite there are some considering the micro-level.

### **Papers Including Transition Countries**

Ivaschenko et al. (2002) tried to investigate the returns to health in the Ukrainian labor market. For getting more precise estimation, the author tested three different models: influence of health on wages; impact of health on labor supply, dependence of health on economic and social factors. The estimation results showed that health status had a significant effect on earnings in a way that a 1 per cent improvement in individual's health on average increases the labor income by 1.1 and 1 percentage points for men and women respectively. Moreover, the authors found that the effect of health on labor income depends mostly on the type of job performed. The results of the paper are important not only for Ukraine but also for the countries of the former Soviet Union, as the labor market of these countries has very much in common with Ukrainian one.

Nazarova (2003) analyzed the individual behavior in respect of one's health. The results of the research showed that there is no strong dependency between income and self reported health level. Health is mostly affected by structural indicators of social and economic inequality. In a way that smoking, alcohol consumption, body mass and lifestyle on average are much less significant than job of a person, income and residence characteristics.

Tapilina (2004) conducts a quantitative and qualitative analysis of the dependence between health and income in Russia. The results obtained are quite controversial. She found both straight and inverse dependency between various health indicators and different economic statuses. The deviations on the following factors were investigated: objective economic status, age, number of years of education, frequency of alcohol and coffee consumption, overweight, environmental pollution. The strong evidence of relationship between health status and education level was not found.

As it can be concluded from the literature mentioned above, for the case of countries with transition economies there is quite much space to investigate. There are almost no researches that investigate the influence of health factor on aggregated macroeconomic level. That's why the main goal of this paper is to determine some

special features of the health factor construct a health index and then estimate the influence of health index on economic growth applying two different approaches. The next section will further proceed with data and methodology description.

## *Chapter 3*

### DATA DESCRIPTION

For the purpose of empirical estimation of health factor influence on economic growth I construct a panel of 135 countries observed yearly from 1988 to 2003. As both stages of estimation are based on the Cobb-Douglas function I will need data on nations' output, labor, physical capital and human capital consisting of health and education variables. Output data (GDP) are obtained from the WDI 2005 (World Development Indicators).by multiplying real per capita GDP measured in 2000 international PPP dollars by national total population.

Total population and labor force are taken from the database of International Labour Organization. Following the definition of International Labour Organization total labor force “comprises people who supply labor for the production of goods and services during a specified period. It includes both the employed and the unemployed. While national practices vary in the treatment of such groups as the armed forces and seasonal or part-time workers, in general the labor force includes the armed forces, the unemployed and first-time job-seekers, but excludes homemakers and other unpaid caregivers and workers in the informal sector”.

Proxy for capital stock for each time period is constructed applying the the perpetual inventory method <sup>1</sup>. The initial level of capital stock is calculated basing on the gross fixed capital formation, which is the same as gross domestic fixed investment in terms of SNA terminology of 1968. Gross fixed capital formation is taken as a proxy for the value of the first observed investment level. To calculate the initial level of capital stock, I apply the following formula:

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<sup>1</sup> Summers and Heston, (1991) methodology

$$K_0 = \frac{I_0}{(\varepsilon + \varphi)},$$

where

- $I_0$  is the value of the first observed investment level,
- $\xi$  is calculated as the average geometric growth rate of the investment series,
- $\varphi$  – the depreciation rate, which is assumed to be 0,07 following Summers and Heston (1991) methodology for all countries observed.

The average growth rate over  $n$  periods is calculated as  $r = \left[ \prod_{t=1}^n r_t \right]^{\frac{1}{n}} - 1$ , where

$r_t = \frac{I_t}{I_{t-1}}$  is calculated for each country. Similar to the exponential growth rate, it does not

take into account intermediate values of the series.

To calculate the stocks of capital in each following period the formula

$$K_T = (1 - \varphi)^T * K_0 + \sum_{t=0}^T I_t * (1 - \varphi)^{T-t}$$

is used for any  $t$  in the sample.

Human capital would be proxied in terms of education and health. The life expectancy, total fertility rate (births per woman), death rate crude (per 1000 people), birth rate crude(per 1000 people), immunization DPT (% of children under 12 months), immunization of measles (% of children under 12 months), physicians (per 1000 of people), CO<sub>2</sub> emissions (kt per 1000 people) variables are taken from the WDI 2005 and via application of principle component analysis will be used for constructing a health index, which in its own turn will be taken as the proxy for health. For education literacy

rate , adult total (% of population ages 15 and above) will be included. For quality of political institutions two variables will be considered, trade (% of GDP) and listed domestic companies, total. The intuition behind this variables is that the higher their value the better the quality of political institutions. So that if the country has good institutions it would definitely have more trade partnership. Listed domestic companies follow the same intuition.

All the data series mentioned would be used in the estimation of the health influence on economic growth of different groups of countries. Besides, as it was previously mentioned in my research I am going to pay special attention to the transition countries of the NIS group as the problem of health influence in this particular group has not been studied yet.

To estimate empirically the influence of health factor on economic growth in this particular group I am going to use the yearly data of 24 NIS countries from which 15 are former CIS countries (Belarus, Moldova, Russia, Ukraine, Armenia, Azerbaijan, Georgia, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan, Uzbekistan, Estonia, Latvia and Lithuania) and other 9 countries which belonged to the socialist camp (Czech Republic, Slovakia, Poland, Hungary, Slovenia, Croatia, Albania, Bulgaria, Romania) for the period 1988-2003. Considering the problems data on transition countries usually suffers from, I'll try to use along with WDI 2005 huge and publicly available databases like "Health for All" (HFA) from World Health Organization and TransMONEE database from UNISEF. The advantage of HFA is that it contains detailed data on different socioeconomic indicators for most countries in transition, but the drawback is that for some of the countries of post USSR the data especially on some macroeconomic indicators is evidently overestimated. To double-check the reliability of the source I'll use TransMONEE database, which contains quite reliable data for macroeconomic indicators. Some data like GDP per capita, and life expectancy as it was previously mentioned would be taken from the WDI 2005..

Specifically for Ukraine Derzhkomstat (State Committee of Statistics) and the Ministry of Health statistical yearbooks are very helpful source of information, and

inspite their reliability for some series is a bit questionable they can serve as a benchmark for double-checking. For some problems connected with the transition processes in countries mentioned there are some gaps in data for 1989-1991 years, which if not random could result in unbalanced panel and possible estimation biases. One of the solutions of that kind of a problem could be including smaller number of observations or trial of some other proxies.

The empirical analysis will involve different variables that will proxy determinants of economic growth with particular interest to health proxy determinants. The idea is to construct several health indexes that would help to find optimal proxy for health particularly and determine their influence on economic growth of the countries that belong to the different groups, with particular interest to those in transition.

In the Appendix to this paper there are tables, which are basically the gist of my empirical part of the paper. One table contains the variables I am going to use in my empirical part of paper with short description and links to the sources mentioned. The other includes summary statistics, basically mean and standard deviation on each of the variables that would be included in model estimation.

## *Chapter 4*

### METHODOLOGY

In this chapter I will try to analyze theoretical set up of the methods, which I use for the empirical estimation of the influence of health factor on economic growth. At the very first stage, I am going to construct a health index, which would consider for different factors that directly or indirectly influence the health on personal and overall country level. Constructing of such index could lead to the multicollinearity problem and as a result future inconsistent OLS estimators. To control for this problem I apply Principle Component Analysis (PCA), that allows concurrently considering for different factors and avoiding possible multicollinearity problem.

PCA is a non-parametric method of extracting relevant information from confusing datasets. In most cases it provides a roadmap for how to reduce a complex data set to a lower dimension one<sup>2</sup>. Basically, this method implies that “a set of correlated variables would be transformed into the set of uncorrelated variables, which are ordered by reducing variability. The uncorrelated variables are linear combinations of the original variables and the last of these variables can be deleted with the minimum loss of real data.” The other advantage of the method is that it reduces the dimensionality of a data set while retaining maximum possible information. The method implies that the first principle component is the combination of variables explains the greatest amount of variation. The second defines the next largest amount of information. Theoretically, it can be as many principle components as there are variables. For calculating the Principle Components several algorithms can be applied. As the purpose of my research is other than the PCA method investigation, I simply will apply the algorithm proposed by the statistical package STATA. 8.2.

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<sup>2</sup> Shlens, J. Tutorial on Principal Component Analysis: Derivation, Discussion and Singular Value Decomposition, Princeton, March 2003

Based on the health indexes obtained by PCA implication and on methodology proposed by Bloom (2001) I investigate the existence of the effect of health on labor productivity and measure its strength in a way of including health in a well-specified production function. In next steps of estimation I'll follow the method proposed by Bloom et al. (2001).

1) "Construct an aggregate production function, which will include a multidimensional human capital", or by other words the variable, which would be expressed in 2 dimensions: education and health, where health would be proxied by a constructed health index and schooling by literacy rate as a percentage of literate population aged above 15.

2) Estimate all the parameters of the production function using panel data for transition countries for a period from 1989 till 2003 and find measure of the relative contribution of each of the inputs to economic growth.

The interesting fact is that most of the studies connected with growth theory are mostly cross-sectional not panel studies, though in my research I am going to use panel data. This could be explained by 2 reasons:

One of the novelties of this research is that I am going to investigate health influence on economic growth of countries with economies in transition. The novelty is good, but the problem is in the number of time periods. For today it's about 16 or even 14, which is not enough for estimation long-run growth. The most optimistic number is 27, but this is also unreal number from the point of accessibility view. We have immediately to exclude Bosnia-Herzegovina, Macedonia and Yugoslavia from the sample as all these countries went through several years of civil war, so their health indicators would be very much disfigured.

The other problem, which may arise, is a lack of degrees of freedom. In this case again possible solution is a cross section for a huge sample of countries, where transition countries would be included via special dummy. In case data is available "panel data models at close to business cycle frequencies". 7-10 years panel datasets model can be

very good at solving the problems of endogeneity and omitted variables in case good instrumental variables would be found. So, considering for the previously mentioned reasons in this particular case panel data would produce more efficient estimators than the cross section model would do.

Assume world is a Cobb-Douglas, then the aggregate production function, which models output as the function of inputs will look like:

$$Y = AK^\alpha L^\beta e^{\varphi_1 * S + \varphi_2 * health\_index} \quad (1)$$

where, Y – Gross Domestic Product or output;

A – stands for TFP;

K – capital (to be calculated, method is still indefinite);

L – labor force, proxied by population from 18-59 years old;

The last component stands for complicated human capital expressed in terms of education, s – stands for years of schooling, health\_index stands for health index, including different health variables from 4 main determinants of health defined by European Commission of Public Health: socioeconomic determinants, lifestyles, physical environment ,health system . Considering for PCA applied for different health determinants along with applying it to the transition countries will be novelty to the methodology proposed by Bloom (2001).

To derive an equation for the log of output in country i at time t the next step would be taking logs of the aggregate production function:

$$\ln Y_{it} = \ln A + \alpha \ln L_{it} + \beta \ln K_{it} + \eta_1 S + \eta_2 Health\_index + \varepsilon_{it}, \quad (2)$$

where  $\ln Y_{it}$ ,  $\ln L_{it}$ ,  $\ln K_{it}$  are the logs of output, labor and capital respectively, health\_index and schooling would are not in log form because of assumed production function,  $\varepsilon_{it}$  - error term.

The regression obtained on equation (2) as it stands will be definitely suffering from reverse causality or endogeneity problem. While I am interested in measuring the contribution of health on output growth, output growth itself can cause the better health conditions and overall health improvement. For instance, the better the country performs in terms of growth, the larger investments can be done in improvement of people's health. In statistical terms, reverse causality would cause correlation between "health" (independent variables) and the error term  $\epsilon_{it}$ , which would result in the inconsistency of ordinary least square estimates of the coefficients.

For example, suppose the economy of some country  $i$  is influenced by some positive shock  $\epsilon_{it} > 0$ , that would increase the output, following the mechanism described above it will also influence health as an input variable. So observing increase in both parts of equation, the growth in output would be explained via growth in health input, when in reality the relationship could be exactly the opposite. To distinguish between the influence of health impact on economic growth or the effect of economic growth on health improvement the instrumental variable technique can be applied.

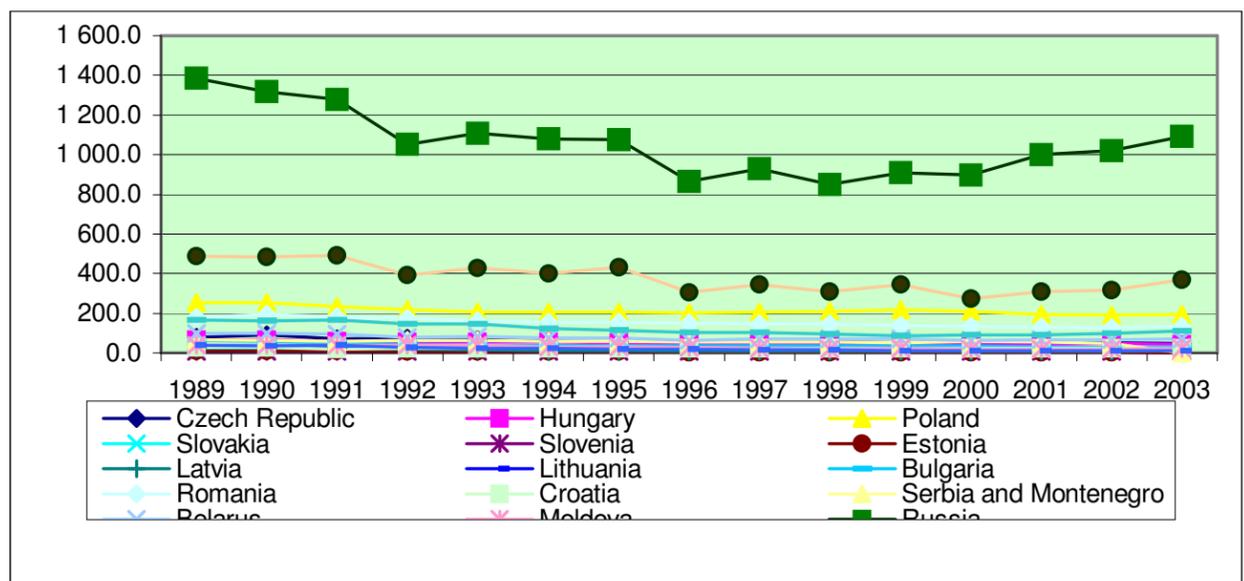
Based on the Wooldridge (2002) candidate for instrumental variable should satisfy two basic criteria. First, it should be correlated with the independent variables, in my case I am interested in health proxy index. Second, along with the previous restriction it should be uncorrelated with the error term  $\epsilon_{it}$ .

First restriction implies that in case of existence of such an IV variable, any fluctuations in it would lead to fluctuations in independent variables. The second, in its own turn, controls for causality problem in a way that it does not allow influence of the error term on these fluctuations. In such a way "correlation between changes in output and the induced changes in the endogenous inputs can be interpreted as the casual effect of input increase on output increase, disentangled from reverse causality problem" Bloom (2001).

For preventing reverse causality problem in this particular estimation, I tried “marriages” as instrumental variable (marital status and health are strongly correlated (Fuchs V.,1997,p.30) The idea is that married people usually are healthier than unmarried or separated ones and during the period of crises or economic instability the number of divorces usually increases, while the number of marriages decreases. Applying for the case of transition countries, at the beginning of transition process I would assume decrease in marriages and increase in divorces, which would indirectly influence on health factors in general. From the figure 1 we could see that starting from the years of transition number of marriages in most post socialist countries sharply declines, when number of divorces (could be seen on the figure 2) vice versa tends to grow. Taking in consideration all the above-mentioned facts, marriages as an IV variable should satisfy at least first restriction.

Figure 1

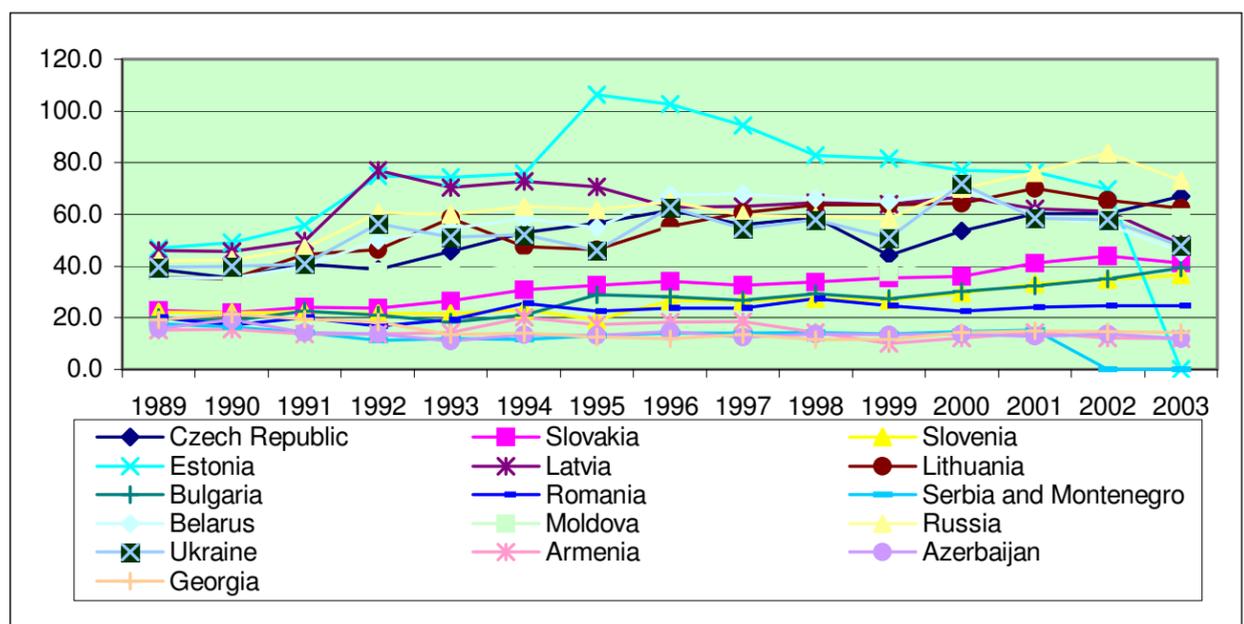
**Marriages in (1000s), 1989-2003**



Source: TransMonee 2005

Figure 2

**General Divorce Rate per 100 Marriages**



Source: TransMonee 2005

In reality the idea with marriages as an IV variable was found invalid in case of transition countries, similar to Bloom (2001) I use lagged levels of health as valid IVs.

The next approach is based on the Simar (2005) stochastic frontier model. Following his methodology I estimate inefficiencies in production frontier of each country and clarify how much of this inefficiency could be explained by health factors. This method allows checking the assumption about the importance of health factor in different groups of countries along with the transition ones.

To simplify the estimation I'll assume the same specification of the function as in the previous method.

For now in terms of method description, assume:

$$Y_{it} = A(L)^{\alpha} (K)^{\beta} e^{S+Health\_index}$$

Simar et al. (2005) applied the stochastic frontier estimation for the cross sectional data. Following their method I am going to use panel data, but hopefully there will be no much problems as STATA facilities gives opportunities to estimate frontier for panel data either.

For the ease of estimation we'll turn the model in the log form:

$$\ln Y_{it} = \ln A + \alpha \ln L_{it} + \beta \ln K_{it} + S_{it} + Health\_index_{it} + \varepsilon_{it}, \quad (2)$$

Based on Simar (2005) the error term is  $\varepsilon_i = v_i - u_i$ ,  $i=1, \dots, n$ , where  $v$  –white noise and  $u$  –technical inefficiency :

The two-sided error term  $v$  is invariably assumed to be normally distributed, and  $u$  is assumed to be distributed half normal on the non-negative part of the real number line:

$$v_i \xrightarrow{iid} N(0, \sigma_v^2) \quad (3)$$

$$u_i \xrightarrow{iid} |N(0, \sigma_u^2)| \quad (4)$$

Mean and variance of general residual term are:

$$E(\varepsilon_i) = E(\varepsilon) = E(-u_i) - E(u) = -\frac{\sqrt{2}}{\sqrt{\pi}} \sigma_u \quad (5)$$

$$V(u_i) = V(v_i - u_i) = V(v) + V(u) = \sigma_v^2 + \left(\frac{\pi - 2}{\pi}\right) \sigma_u^2 \quad (6)$$

Distribution of the error term assuming between u and v is:

$$f_\varepsilon(\varepsilon) = \frac{2}{\sigma} \phi\left(\frac{\varepsilon}{\sigma}\right) \left[1 - \Phi\left(\frac{\varepsilon\lambda}{\sigma}\right)\right] \quad -\infty \leq \varepsilon \leq +\infty. \quad (7)$$

These were general estimation steps, now we'll follow more applicable for this particular problem of investigation. Considering the distribution of an error term as in (10), we compose log-likelihood function, which will look like:

$$\begin{aligned} \ln L(\lambda, \sigma^2 \mid \varepsilon_1, \dots, \varepsilon_n) &= \frac{n}{2} \ln\left(\frac{2}{\pi}\right) - \frac{n}{2} \ln(\sigma^2) - \\ &- \frac{1}{2\sigma^2} \sum_{i=1}^n (\varepsilon_i)^2 + \sum_{i=1}^n \ln\left(1 - \Phi\left(\frac{\varepsilon_i \lambda}{\sigma}\right)\right) \end{aligned} \quad (8)$$

Changing factor parameters into the function in a way that

$$\varepsilon_i = y_i - g(x_i), \quad i=1, \dots, n \text{ will turn the function into}$$

$$\begin{aligned} \ln L(\beta, \lambda, \sigma^2 \mid x_1, \dots, x_n; y_1, \dots, y_n) &= \frac{n}{2} \ln\left(\frac{2}{\pi}\right) - \frac{n}{2} \ln(\sigma^2) - \\ &- \frac{1}{2\sigma^2} \sum_{i=1}^n (y_i - g(x_i))^2 + \sum_{i=1}^n \ln\left(1 - \Phi\left(\frac{y_i - g(x_i)\lambda}{\sigma}\right)\right) \end{aligned} \quad (9)$$

Then following the procedure we have to maximize (12) w.r.t. the function parameters  $\sigma^2, \lambda, \beta$ .

$$\begin{aligned} \frac{\partial}{\partial \sigma^2} \ln L(\beta, \lambda, \sigma^2 | \dots) &= -\frac{n}{2\sigma_{MLE}^2} + \frac{1}{2\sigma_{MLE}^4} \sum_{i=1}^n (y_i - g(x_i))^2 + \\ &+ \frac{\lambda}{2\sigma_{MLE}^3} \sum_{i=1}^n \frac{\phi((y_i - g(x_i))\lambda_{MLE}\sigma_{MLE}^{-1})}{(1 - \Phi((y_i - g(x_i))\lambda_{MLE}\sigma_{MLE}^{-1}))} (y_i - g(x_i)) = 0 \end{aligned} \quad (10)$$

$$\begin{aligned} \frac{\partial}{\partial \lambda} \ln L(\beta, \lambda, \sigma^2 | \dots) &= - \\ \frac{1}{\sigma_{MLE}} \sum_{i=1}^n \frac{\phi((y_i - g(x_i))\lambda_{MLE}\sigma_{MLE}^{-1})}{(1 - \Phi((y_i - g(x_i))\lambda_{MLE}\sigma_{MLE}^{-1}))} (y_i - g(x_i)) &= 0 \end{aligned} \quad (11)$$

$$\begin{aligned} \nabla_{\beta} \ln L(\beta, \lambda, \sigma^2 | \dots) &= \frac{1}{\sigma_{MLE}^2} \sum_{i=1}^n (y_i - g(x_i)) \cdot \nabla_{\beta} g(x_i) + \\ &+ \frac{\lambda_{MLE}}{\sigma_{MLE}} \sum_{i=1}^n \frac{\phi((y_i - g(x_i))\lambda_{MLE}\sigma_{MLE}^{-1})}{(1 - \Phi((y_i - g(x_i))\lambda_{MLE}\sigma_{MLE}^{-1}))} \nabla_{\beta} g(x_i) = 0 \end{aligned} \quad (12)$$

After solving the system of  $K+2$  equations (4 in the particular case) we'll get the MLE estimates  $(\beta_{MLE}, \lambda_{MLE}, \sigma_{MLE}^2)$

Then the expectation of expected individual inefficiency is

$$E(u_i | \varepsilon_i) \equiv \int_0^{\infty} f_{u|\varepsilon}(u | \varepsilon) du \quad (13)$$

$$\text{Where the distribution } f_{u|\varepsilon}(u | \varepsilon) \equiv \frac{f_{u,\varepsilon}(u, \varepsilon)}{f_{\varepsilon}(\varepsilon)} \quad (14)$$

is presented in a way:

$$f_{u|\varepsilon}(u|\varepsilon) \equiv \frac{1}{1-\Phi(-\mu_*/\sigma_*)} \phi\left(\frac{u-\mu_*}{\sigma_*}\right), \mu_* = \frac{-\sigma_u^2 \varepsilon}{\sigma^2}, \sigma_*^2 = \frac{\sigma_v^2 \sigma_u^2}{\sigma^2},$$

$$u \geq 0 \tag{15}$$

The mean of the individual expected inefficiency is

$$E(u|\varepsilon) \equiv \sigma_* \left[ -\frac{\varepsilon \lambda}{\sigma} + \frac{\phi(\varepsilon \lambda / \sigma)}{1-\Phi(\varepsilon \lambda / \sigma)} \right] \tag{16}$$

To measure efficiency we have to obtain:

$$E[\exp(-u_i)] \tag{17}$$

But because we obtain expectations of  $u$ , we can't directly receive the Afriat measure, that is the problem arises which can be reflected by Jensen's inequality that

$$\exp(E(u_i)) \neq E[\exp(-u_i)], \text{ actually } \exp(E(u_i)) \leq E[\exp(-u_i)]$$

But the problem is kind of solved by applying numerical methods – Taylor-expand the measure:

$$E[\exp(-u_i)] \cong 1 - \hat{\mu}, \tag{21}$$

In the next chapter will proceed with the empirical application of the method described above.

## *Chapter 5*

### EMPIRICAL ESTIMATIONS AND RESULTS

Based on methodology provided previously, in this chapter I will try empirically analyze the influence of health factors along with usual factors on the productivity of different countries proxied by real GDP. The estimated results will be based on the panel data for 135 countries representing different country groups for the period from 1988 till 2003.

Before starting the empirical testing of both previously described methods, I would like to stop on the health index construction, which was created by applying of the principle component analysis.

The main idea behind using PCA is to reduce the number of variables comprising the dataset while retaining the variability in the data. Simplifying, this method allows computing a compact and optimal description of the dataset while efficiently reducing multicollinearity.

The peculiarity of the health factor is that health itself cannot be exactly determined, for now there is no one unique definition of health. This fact creates the situation when it is difficult to find appropriate proxy for health factor. Based on the data available, I take the variables such as birth rate (per 1000 people), CO<sub>2</sub> emissions, death rate (per 1000 people), fertility rate (births per woman), immunization DPT (% of children under 12 months), immunization of measles (% of children under 12 months), life expectancy at birth (total years), number of physicians (per 1000 people), which all can be a proxy for health on the country level. Combining these variables I construct 4 different health indexes, based on the number of observations for each variable. The logic is to construct an index which would capture both the appropriate proxy for health and a maximum possible number of observations. The health indices are constructed in a way that each following index includes fewer observations than the previous one, but a larger amount

of proxies for health variable. Applying the PCA method in STATA I got the following linear combination of constructed health indexes.

$$\text{Health}_1 = 0.63920i\_DPT + 0.62806 i\_mzls + 0.44381CO_2$$

$$\text{Health}_2 = 0.54001i\_DPT + 0.50172 i\_mzls + 0.35678CO_2 - 0.49753b\_rate - 0.28606 d\_rate$$

$$\text{Health}_3 = 0.39667 i\_DPT + 0.34660 i\_mzls + 0.29689CO_2 - 0.43314b\_rate - 0.25598d\_rate - 0.43562 f\_rate + 0.43668 lf\_exp$$

$$\text{Health}_4 = 0.38443 i\_DPT + 0.30807i\_mzls + 0.28300CO_2 - 0.43885b\_rate - 0.09433d\_rate - 0.43768 f\_rate + 0.40750 lf\_exp + 0.34367phys$$

From the results obtained, it can be seen that the sign of the components of four constructed health indexes coincides. Thus the number of immunizations of both DPT and measles has positive influence on health, the higher is the immunization the healthier should be people. CO2 emissions per 1000 people also have the positive sign, the possible explanation of such sign is that the more developed countries have more developed industries and higher CO2 emission per thousand people, this allows for safer technologies and improved healthcare systems, birth rate and fertility rate both have negative influence on health, this can be explained by the fact that in poor countries the birth rate and fertility rate are high, but GDP per capita is very small, so that many people are not able to receive appropriate health care, death rate was found to have negative influence on health index, by other words the more people die in the country the worse is the health care system and health factor overall, life expectancy positively influence on health, so that healthier people usually live longer, physicians per 1000 of people also has positive influence, as more physicians per 1000 people correlates with appropriate health care treatment, the idea is that the more doctors the healthier people should be.

As health is quite an abstract notion, the obtained health indices are difficult to interpret from the economic point of view. In order to make it easier I turn the index into the percentage scale. First, I calculate the mean, minimum and maximum value for each health index, then using the ratio of difference between health index and its

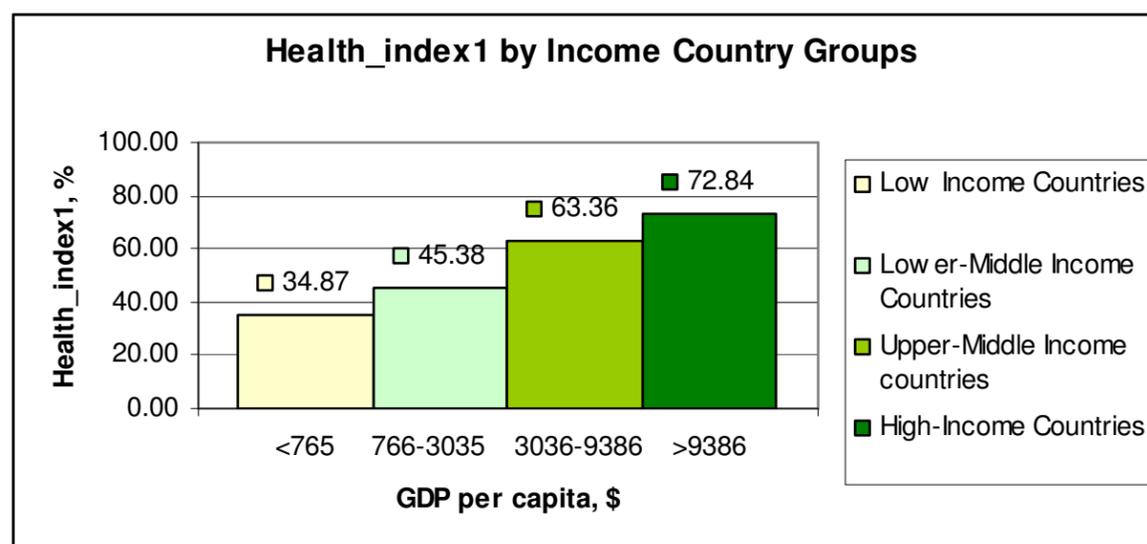
minimum value and difference between maximum and minimum value I calculate the health index for each country in percentage points.

$$Health\_index\_scaled(\%) = \frac{Health\_index_i - \min(Health\_index)}{\max(Health\_index) - \min(Health\_index)}$$

Now the country with the highest health index has 100% of health, and with minimum health index 0 %. Of course in reality it is impossible for a country to have absolute health or not to have health at all, but this scaling of health helps us to compare the relative health values in different countries.

At the next step I sort the countries of the sample according to the income groups divided by World Bank Atlas method (low income, \$765 or less GDP per capita; lower middle income, \$766- \$3,035 GDP per capita; upper middle income, \$3,036- \$9,385 GDP per capita; and high income, \$9,386 or more GDP per capita). Then I find the mean value of each health index for the low-income countries, lower middle income countries, upper middle income countries and high income countries. In the diagrams below we can see the relationship between health indices and different income level countries.

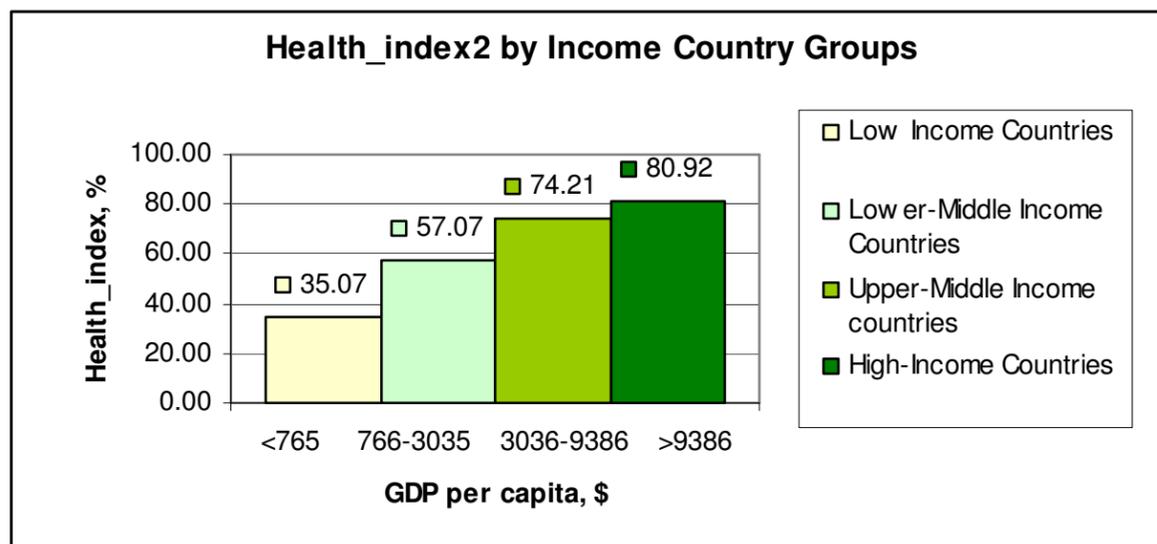
Figure 3.



From the results presented in the chart1, we can see that the countries that have the lowest GDP per capita on average have lower health index, the countries with higher

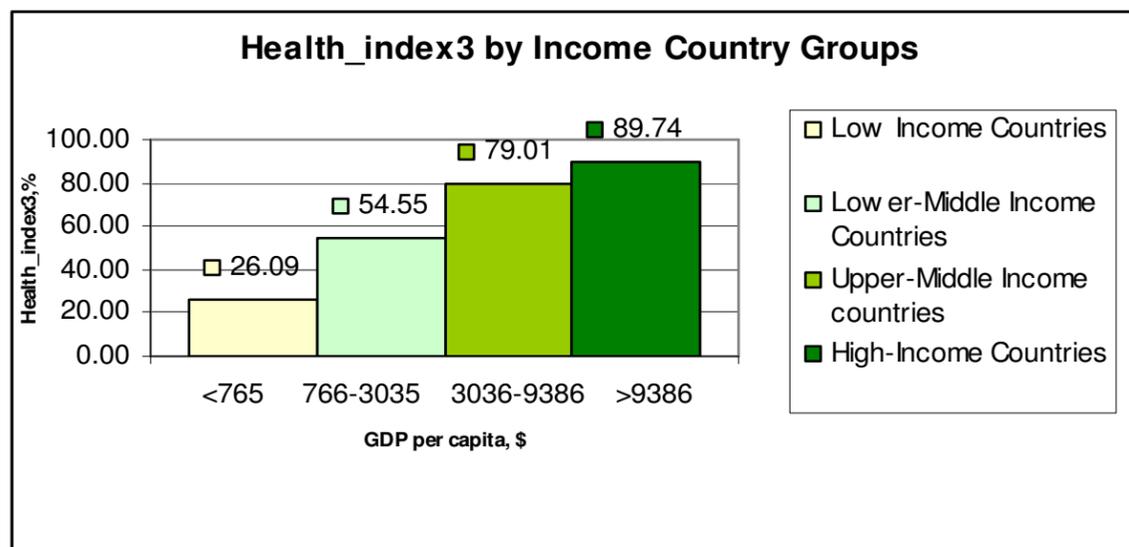
income have higher health index. Based on the results obtained I can conclude that high income countries have health index on 37.97% higher than the lower income countries.

Figure 4.



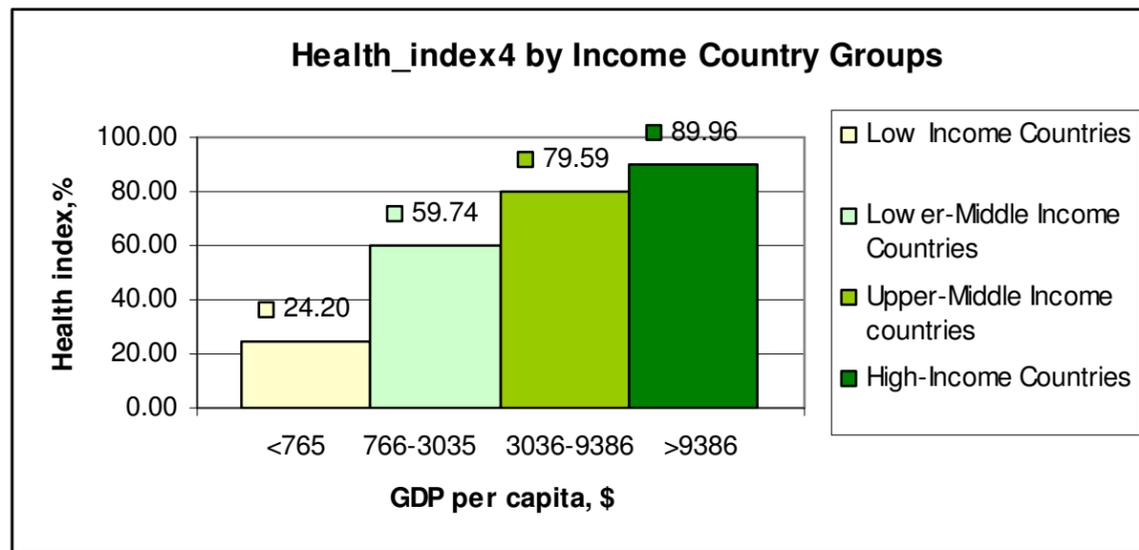
The health index2 presented in the chart2 shows the similar trend, so that it is higher in high income countries and lower in the lower income ones. The high income countries have health index2 45.85% higher than the low income ones. Comparing this gap with the previous result, we can see that the gap increases when more health factors are included in the index.

Figure5.



From the results obtained in chart 3, we can see that when we additionally consider for life expectancy and fertility rate the share of health between countries do not differ much. Health index3 follows the same trend as two previous health indices.

Figure6.



6

Health index4 includes 8 different factors that can proxy for health. Again, we can see that the richest countries are much better off in terms of health than the poorest ones. Consideration for more factors increases the gap between the high-income countries and lower-income countries up to 65.76 percentage points.

Of course, this procedure does not allow us to make any conclusions concerning the model estimation. Still, we can see the intuition behind the idea of relationship between the health indices and output. Really, the overall tendency is evident, wealthier countries on average are better off in terms of health than the poor ones. Then the question arises whether the countries which have better health on average are more productive, or rich countries are able to improve their health factor because of higher income. This is the question that in later estimations will arise as endogeneity problem, which would be considered in his chapter below.

On the further steps following Bloom(2001) methodology I will estimate the model, including all the indexes constructed, and then check which of them and under which assumptions performs better.

First of all, before starting the model estimation I have to check pooled least squares vs panel data estimation. The usual way to test this is F-test for common intercepts. The null hypothesis of the test is that the efficient estimators are obtained by

pooled least square estimation. If the p-value is zero and the hypothesis is rejected then unbiased estimators would be obtained with panel data estimation.

### **Fixed vs Random-Effects Estimation**

The following step will be to test whether the model is appropriately specified and chose which of the estimation methods would be more precise. Basically, on this stage I test fixed effects model vs random effects model. The main difference between two estimation procedures is in group specific effects, we have to determine whether  $\alpha$ 's represent N fixed unknown parameters or they are drawn from the population of randomly distributed intercepts and in this case can be treated as the part of the error term. This procedure is usually tested by Hausman test. If the null hypothesis is rejected then the fixed effect estimation should be used. (Wooldridge, 2002)

In some cases when applying Hausman test the differences between random effects and fixed effect estimates can be particularly small and it is possible to get statistical rejection of the random effect. The opposite case is when the differences between the fixed effects and random effects are large due to large standard errors, in this case the Hausman statistic fails to reject. Following the Wooldridge we should consider for random effect estimates. Unfortunately these particular cases can suffer from Type II error. While estimating different specifications of my empirical model, I chose fixed versus random effect estimations based on the criteria described above. Most of the estimated specifications were found to be under fixed effect estimation assumption.

After estimating either fixed or random effects model, the results obtained cannot be very much trusted unless the model is tested for the autocorrelation and heteroskedasticity. Only after implementation of these both tests the results of the model can be interpreted.

### **Checking for the autocorrelation problems:**

In case of autocorrelation problems the estimators remain unbiased and consistent despite no longer efficient. The inefficiency of estimators means that t statistics and F statistics tests cannot be trusted any more. To check for autocorrelation I

used usual for panel data `xtregar` operator, which offers a within estimator for a fixed effect model and the Baltagi-Wu GLS estimator of the random effects model. The advantage of this operator is that it can accommodate unbalanced panel whose observations are unequally spaced over time. Both of the approaches offer Durbin-Watson estimator of  $\rho$  by default. Using this estimator I calculated d-statistics for each specification of the model using the formula  $d = 2(1 - \hat{\rho})$ , then from the Durbin-Watson d-statistic table took the critical values of  $d_L$  and  $d_U$ . Then following the decision rule given in Table 12.5 (Gujarati, D. 1995, p. 423) checked for the autocorrelation problem. In majority of the estimation of the different model specifications the hypothesis of “no positive autocorrelation” was rejected, which means both that received coefficients, despite consistent and unbiased, cannot be considered efficient, and standard errors cannot be trusted.

#### **Checking for the heteroskedasticity problems:**

As the analysis is based on the panel data, which includes small, medium and large-sized countries sampled together the heteroskedasticity problem can be intuitively expected. Heteroscedasticity means that estimators are no longer of minimum variance or inefficient, however it does not destroy the unbiasedness and consistency properties. To test for the heteroskedasticity problem I use standard Breusch-Pagan test, where zero hypothesis is constant variance or homoscedastic residuals. In majority cases the  $H_0$  was rejected, which means that most specifications suffer from the heteroskedasticity problem. As a remedy for the problem, robust operator estimation was applied. The finally obtained estimation output after the robust operator procedure can be interpreted as the most efficient, unbiased and consistent.

The results obtained are presented in four different tables each including four different estimations of Cobb-Douglas function specifications considering for human capital presented in methodology part in equation (1). Each regression is estimated with the help of statistical package STATA 8.2. The estimation output is obtained based on the 3-step procedure described above by adding a new variable for each specification. I consider for different specifications in order to compare the difference in model

estimation in both cases including and excluding health variable along with some other variables such as trade (% of GDP) and listed domestic companies which could capture for good governance and institutional quality. To compare the influence of education and health factors on productivity in transition countries versus other countries time dummies for literacy rate and health index for transition countries were included .

Table 1

**Health index1 estimation results:**

<b>RHS variables</b>	<b>(1.1)</b>	<b>robust</b>	<b>(1.2)</b>	<b>robust</b>	<b>(1.3)</b>	<b>robust</b>	<b>(1.4)</b>	<b>robust</b>	<b>(1.5)</b>	<b>robust</b>
Capital	.6797*** (0.000)	0.7516 (0.000)	.2683*** (0.000)	.2683 (0.000)	.2239*** (0.000)	.2239 (0.000)	.1723*** (0.000)	.1622 (0.000)	.1789*** (0.000)	.1680 (0.000)
Labor	.4555*** (0.000)	0.2422 (0.091)	.7763*** (0.000)	.7763 (0.000)	.8091*** (0.000)	.8091 (0.000)	.7036*** (0.000)	0.8019 (0.000)	.6783*** (0.000)	.8100 (0.000)
Schooling	-.0083** (0.035)	-0.0135 (0.001)	-.0036*** (0.036)	-.0036 (0.097)	-.0050*** (0.002)	-.0050 (0.012)	.0023* (0.159)	-.0011 (0.691)	.0034*** (0.034)	-.0011 (0.589)
Dummy_Schooling transition countries									-.0039*** (0.020)	.1489 (0.005)
Health_index1			.0137*** (0.022)	.0137 (0.034)	.0119 (0.028)***	.0119 (0.052)	.0181*** (0.007)	.0157 (0.020)	.0174*** (0.012)	.0145 (0.033)
Dummy_Health_index1 in transition countries									.0561 (0.237)	.0178 (0.674)
Trade(% of GDP)					6.07e- 13*** (0.000)	6.07e- 13 (0.000)	5.32e- 13*** (0.000)	5.37e- 13 (0.000)	5.28e- 13*** (0.000)	5.55e- 13 (0.000)
List of registered domestic companies							.0002*** (0.000)	0.0002 (0.001)	.0001*** (0.000)	0.0000 (0.010)
constant	.8291*** (0.000)	2.5762 (.144)	.01367*** (0.000)	5.5285 (0.000)	6.3932*** (0.000)	6.2162 (0.000)	8.9351*** (0.000)	6.8753 (0.000)	9.138*** (0.000)	-6.732 (0.217)
N	1269	1368	1162	1162	1145	1145	647	647	647	647
R <sup>2</sup> coefficient	0.8827	0.9813	0.8122	0.9973	0.7967	0.9978	0.8468	0.9985	0.8582	0.998
Test on CRS:										
Fixed vs Random:	f.e		f.e(r.e)		f.e		r.e		r.e	
<b>Autocorrelation test:</b>										
rho_dw	.6607		.81896318		.78651835		.81950116		.82033262	
d_calculated	.6785		0.362074		0.426963		0.360998		0.359335	
d_lower	1.643		1.633		1.623		1.613		1.592	
d_upper	1.704		1.715		1.725		1.735		1.757	
<b>Decision:</b>	<b>+autocorr</b>		<b>+autocorr</b>		<b>+autocorr</b>		<b>+autocorr</b>		<b>+autocorr</b>	
<b>Heteroscedasticity test:</b>	Yes	No	Yes	No	Yes	No	Yes	No	No	No

Model specification presented in column (1.1) of table (4.1) includes only capital, labor and literacy rate (a proxy for schooling) as inputs. The estimated coefficients are 0.68 for capital, 0.46 for labor and -0.008 for literacy rate. Despite the sum of labor and capital coefficients is close to one, which is appropriate under constant returns to scales technology assumption, the shares of capital and labor are not consistent with theory, as

shares of capital and labor in national income according to (Mankiw,1994) should be one-third and two-thirds respectively. The estimate of literacy rate coefficient was found negative, which contradicts the results obtained in previous studies, as mostly it was found positive and significant, so that Barro and Lee found it 9.1 percent, Bloom et al. (2001) as 8.5 percent. This can be explained by not a very good proxy used for schooling.- in most papers which consider the influence of human capital on economic growth schooling is taken from Barro and Lee (2000). I didn't use their data for schooling because it was available only up to 1995, when I am interested in data up to 2003. In terms of goodness of fit I obtained  $R^2 = 0.8592$ , which means that the model fits the data well, moreover as the estimates obtained are based on fixed effect procedure  $R^2$  within can be considered as an ordinary  $R^2$ .

The F statistic is a test that the coefficients near the regressors are all jointly zero, in all the models specification we rejected this hypothesis, so (1.1) model specification along with the rest ones is a significant model.

Adding health\_index1 in column (1.2) improves results in terms of shares between capital and labor, so that under this specification capital is 0.27 and labor is 0.78. In sum they add approximately to one which is good, as it satisfies CRS assumption. The estimated schooling coefficient again is found to be negative and significant at 5% level. Health index1 was found to be positive and significant under 5% significance level, so that improvement in one unit of health index would increase the output by 1.4 percentage points. The  $R^2$  obtained is equal to 0.8112, which is a bit less than in previous regression, but still is reasonably high.

In the next columns (1.3) and (1.4) the trade as a percentage of GDP and listed domestic companies variables are added. These variables were included in order to capture some other effects which could possibly influence the results of health\_index estimation when omitted. Both variables included could be treated as a proxy for quality of political institutions. I would stop on the (1.4) specification model, as it included both added variables trade and listed domestic companies, when (1.3) considers only trade. Under this specification I received literacy rate positive and statistically insignificant,

while all the rest of the estimated coefficients are positive and statistically significant. As it was already mentioned `health_index1` has positive and significant influence on productivity, so that one unit improvement in health index would increase the output by 1.8%. This result is a bit larger than the result we got under previous specification. The influence of trade and listed domestic companies despite is statistically significant with p-value (0.000), is very negligible in terms of coefficients values, so are not worth interpreting from the economic standpoint. Under (1.4) model specification the number of observations decreased almost twice, this could bring negative results in terms of degrees of freedom decrease. Such sharp decrease in observations can be explained by the poor data availability on included new variables trade and listed domestic companies. The  $R^2$  of the model is 0.8468, which is quite high.

In model specification (1.5) along with all the factors included in (1.4) dummy variable for literacy rate and dummy variable for health index in transition countries are estimated. I included dummy variables for transition countries in order to see whether the influence of health and schooling differs in transition countries vs the other countries groups. Both literacy rate and dummy for literacy rate are statistically significant. The coefficient near the literacy rate dummy is negative -0.004, when the coefficient near the literacy rate variable, which stands for the rest countries groups is positive and is estimated to be nearly 0.003. Overall the influence of literacy rate on transition countries can be interpreted as with 1 per cent increase in literacy rate decreases the productivity growth by 0.001 per cent. This result may seem a bit strange at the first glance, but after considering the peculiarities of transition countries where for many years education was free of charge and many people with higher education are unemployed now, the estimated result could be taken as quite reasonable. As for the `health_index1` it was found positive for transition and rest non-transition countries, but in case of transition it was found to be statistically insignificant. This result can be interpreted in a way that health factor influence on productivity growth in transition countries do not differ from the health influence on productivity of the other countries groups. Capital and labor under this model specification are 0.18 and 0.68 respectively, this result does not coincide with the stylized shares of these inputs, but again their sum tends to 1, which is good in terms of CRS assumption. The other variables included in regression, such as trade and listed

domestic companies are also found to be positive and statistically significant. The  $R^2$  coefficient of the model is 0.8582, which is good, in terms that model fits the data well.

Based on the LR test the most appropriate model specification is (1.4). In terms of output growth interpretation, if we increase the Health\_index1 by one unit, the output will increase by 1.81 per cent, which in money equivalent is equal to 3746700.00 of current international \$. This was calculated in terms of average GDP and Health index1 of the overall country sample.

In the next table 4.2 similar results with the Health\_index2 are presented.

Table 2

**Health Index2 Estimation Results:**

<b>RHS variables</b>	<b>(2.1)</b>	<b>robust</b>	<b>(2.2)</b>	<b>robust</b>	<b>(2.3)</b>	<b>robust</b>	<b>(2.4)</b>	<b>robust</b>
Capital	.3311*** (0.000)	.3062 (0.000)	.2461*** (0.000)	.2461 (0.000)	.4607*** (0.000)	.1848 (0.000)	.5434 *** (0.000)	.1969 (0.000)
Labor	.6178*** (0.000)	.8652 (0.000)	.8952*** (0.000)	.8952 (0.000)	.4207*** (0.000)	1.0843 (0.000)	.3812*** (0.000)	1.1272 (0.000)
Schooling	.0046*** (0.026)	-.0042 (0.352)	-.0064** (0.057)	-.0064 (0.128)	-.0001 (0.986)	-.0058 (0.225)	.0048** (0.060)	-0.0073 (0.121)
Dummy_for_Schooling in transition countries							- .01123*** (0.000)	0.1881 (0.002)
Health_index2	.0279*** (0.004)	.0176 (0.060)	.0142 (0.120)	.0142 (0.093)	.0779*** (0.048)	0.0084 (0.458)	.1059*** (0.002)	0.0021 (0.858)
Dummy_for_Health_index2 in transition countries							.3872** (0.055)	0.0478 (0.301)
Trade(% of GDP)			5.72e-13 *** (0.000)	5.72e-13 (0.000)	4.69e-13*** (0.046)	4.78e-13 (0.000)	2.62e-13*** (0.193)	5.07e-13 (0.000)
List of registered domestic companies					.0006773*** (0.000)	.0001 (0.158)	.0002*** (0.201)	.00001 (0.798)
constant	6.0235*** (0.000)	3.3911 (0.020)	4.551*** (0.000)	4.5581 (0.001)	6.287062*** (0.000)	5.224 (0.000)	4.6185*** (0.000)	4.5571 (0.002)
N	589	589	572	572	377	377	377	377
R2coefficient	0.8592	0.9972	0.9978	.9978	0.8793	.9985	0.9162	0.9985
Test on CRS								
Fixed vs Random:	r.e		f.e		f.e		r.e	
<b>Autocorrelation test:</b>								
rho_dw	.8736		0.8568		.86328357		.86303329	
d_calculated	0.2527		0.2862		0.273433		0.273933	
d_lower	1.633		1.623		1.613		1.592	
d_upper	1.715		1.725		1.735		1.757	
<b>Decision:</b>	<b>+autocorr</b>		<b>+autocorr</b>		<b>+autocorr</b>		<b>+autocorr</b>	
<b>Heteroscedasticity test:</b>	Yes		Yes		Yes		Yes	

As it was previously mentioned Health\_index2 was constructed via application of principal component analysis. The main difference between Health index1 and Health index2 is that the last one considers along with Health index1 variables also for the birth rate crude (per 1000 people) and death rate crude (per 1000 people). I didn't include all the possible proxies for health at once in one index, as the data was sorted in a way that each following variable that I include in the index contains fewer observations than the previous one, so that the Health index1 contains the least number of proxies, but the largest number in terms of observations, the health index4 vice versa includes the largest amount of proxies, but the number of observation for it drops significantly. This could be easily seen from the results presented in the following tables.

In all four columns of table 4.2 the coefficients near Health\_index2 are positive, and in all but (2.2) specification model are statistically significant. In (2.2) specification model, when trade variable is additionally considered Health\_index2 is statistically significant only at 12% level.

Overall the estimation output we got in table 4.2 doesn't differ much from the results we obtained in previous table. In model specification (2.1) the capital is 0.33 labor is 0.62, which is good result from the both sides as stylized facts of capital and labor shares as of one third to two thirds, and from the other side that the coefficients sum very close to 1 which is good according to the CRS assumption. Both literacy rate and Health\_index2 are statistically significant, however their influence on productivity is opposite. If literacy rate would increase by 1 percentage point the output will decrease by 0.6 percentage points, which means that influence of literacy rate on output growth is not very much economically significant. In case of health\_index2, if it increases by one unit, the output will increase by 2,8 percentage points. The estimated result is quite reasonable comparably to other papers which estimated health just by life expectancy; they got the coefficient 0.04 or 4 percentage points. The  $R^2$  coefficient is 0.8592, which is reasonably high.

In (2.2) (2.3) columns we by turns estimate at first model including trade and then including both trade and listed domestic companies variables. I would stop on the

model specification (2.3) as it considers for both added variables. So the results in column (2.3) along with capital, labor, literacy rate and Health\_index2 include trade and listed domestic companies. The coefficients close to 0.5 were found for both capital and labor, theoretically under condition that the technology exhibits CRS and perfectly competitive input markets, such case is possible. The coefficient of literacy rate is negative and strongly insignificant, when Health index2 is positive at 5 % significance level, and its value is quite big 0.079. In terms of interpretation it means that if the health\_index2 would increase by one unit, the output would increase by 7.9 percentage point. This result is quite different in comparance to the 4% found in Bloom, Canning, Graham and Sevilla (2000), but this I quite logical as in my model health is different from the one they used as a proxy. Trade and listed domestic companies which are proxies for the quality of political institutions are both statistically significant. The  $R^2$  of the model is rather high 0.8793.

Adding the dummy variables for literacy rate and Health\_index3 for transition countries changes the results. Two variables standing for the quality of political institutions are statistically insignificant. As for the literacy rate the estimated results show that it has negative influence in transition countries as for the other countries it is positive. It means that overall the influence of literacy on output in transition countries would be less than in the rest country groups. Health\_index2 vice versa is positive and significant both for index itself and for its dummy, so that for transition countries the coefficient would be equal to the sum of 0.11 and 0.39, which is 0.5. This result looks unrealistically large for the transition countries and cannot be unambiguously interpreted. Despite the high  $R^2$  (0.9258) the (2.4) model specification to my mind cannot be considered a good one, as most of its estimates despite statistical significance do not contain much economic reasoning.

Based on the LR test model specification (2.1) should be chosen. Health\_index2 under such model specification is equal 0.0279, which can be interpreted as if we change health\_index1 by one unit the output will increase by 2.8 percentage points, in money equivalent it means that the output will grow by 5775300 current international \$.

In the next table similar model specifications are considered, the only difference is in the health index, which for that particular case would consider for two more proxies that could influence health index such as fertility rate and life expectancy.

Table 3

**Health Index3 Estimation Results:**

<b>RHS variables</b>	<b>(3.1)</b>	<b>robust</b>	<b>(3.2)</b>	<b>robust</b>	<b>(3.3)</b>	<b>robust</b>	<b>(3.4)</b>	<b>robust</b>
Capital	.2831*** (0.000)	.2611 (0.000)	.2425*** (0.000)	.2164 (0.000)	.3075*** (0.000)	.1284 (0.000)	.4107*** (0.000)	.143185 (0.000)
Labor	.6967*** (0.000)	.8537 (0.000)	.6401*** (0.000)	.8275 (0.000)	.5654*** (0.000)	.9001 (0.000)	.5204*** (0.000)	.938087 (0.000)
Schooling	-.0057** (0.035)	-.0065 (0.244)	-.0052*** (0.050)	-.006 (0.267)	-.0036 (0.327)	.0009 (0.894)	.0038 (0.223)	.0004935 (0.946)
Dummy_for_Schooling in transition countries							-.0167*** (0.000)	.0004935 (0.120)
Health_index3	.2578*** (0.000)	.0268 (0.073)	.2217*** (0.000)	.0227 (0.113)	.1556*** (0.000)	.0252084 (0.174)	.1511*** (0.000)	.0086232 (0.624)
Dummy_for_Health_index3 in transition countries							.8631*** (0.000)	.1467713 (0.121)
Trade(% of GDP)			1.88e-12 *** (0.000)	6.21e-13 (0.000)	1.30e-12*** (0.000)	5.73e-13 (0.000)	7.79e-13 *** (0.008)	6.14e-13 (0.000)
List of registered domestic companies					.0006*** (0.005)	.0000392 (0.461)	.0001 (0.492)	-5.08e-06 (0.928)
constant	7.066*** (0.000)	4.8257 (0.021)	8.744*** (0.000)	6.211 (0.002)	8.192*** (0.000)	5.720745 (0.178)	5.929*** (0.000)	6.598416 (0.450)
N	425	425	414	414	250		250	
R2coefficient	0.8813	0.9972	0.8962	0.9977	0.8852		0.9258	
Test on CRS								
Fixed vs Random:	f.e		r.e		r.e		f.e	
<b>Autocorrelation test:</b>								
rho_dw	.67916066		.62485496		0.740045		.78361656	
d_calculated	0.641679		0.75029		0.519909		0.432767	
d_lower	1.633		1.623		1.613		1.592	
d_upper	1.715		1.725		1.735		1.757	
<b>Decision:</b>	<b>+autocorr</b>		<b>+autocorr</b>		<b>+autocorr</b>		<b>+autocorr</b>	
<b>Heteroscedasticity test:</b>	Yes		Yes		Yes		Yes	

The results in column (3.1) of table 4.3 include capital, labor, literacy rate and Health\_index3 as inputs. All the coefficients obtained under this model specification are statistically significant. The coefficient on capital is 0.28 and on labor 0.7, their shares sum to 1. Moreover they take the values that are close to their stylized factor shares of one third for capital and two thirds for labor. The schooling coefficient is significant only at 5 per cent significance level and its value is negative, Health\_index3 vice versa is

positive and significant. Its influence on output under this model specification can be interpreted as very high, so that one unit increase in Health\_index3 will increase output by 25.8 percentage points. The  $R^2$  of the model is 0.8813, which is good result in terms of fitting the model.

Adding the trade for the column (3.2) and both trade and listed domestic companies in column (3.3) changes the results. Under model specification (3.3) the capital has larger influence than under (3.2) and labor reciprocally has less, both this variable in sum are very close to one which is good in terms of CRS assumption. The capital is 0.31 and labor 0.57. The literacy rate coefficient is negative and statistically insignificant, such results contradicts to the results obtained in other empirical papers. This again evidence the fact that literacy rate as a proxy for schooling is not very much good. Health index3 is statistically significant with the value of 0.1556, which means that one unit increase in health index would lead to an output increase of 15.56 per cent. The trade and listed domestic companies, which stand for the quality of political institutions are both positive and statistically significant but their influence on the output growth is comparatively small.

Adding the dummy variables for literacy rate and Health\_index3 for transition countries influences the results. The literacy rate coefficient changes the sign from negative to positive, but as under (3.4) specification model it is still statistically insignificant, we should consider for the coefficient near dummy, which negative, so overall literacy would be negative and insignificant just as under the previous (3.3) specification model. The shares of the capital and labor are 0.41 and 0.52 correspondingly, they do not respond to the stylized shares but still their sum is approximately equal to 1. Health\_index3 vice versa is positive and significant both for index itself and for its dummy, so that for transition countries the coefficient would be equal to the sum of 0.86 and 0.15, which is 1.01. This result is unrealistically large and economically doesn't have much sense. The list of domestic companies is also statistically insignificant under this model specification. The  $R^2$  is very high 0.9258, which is good in terms fitting the data by the model.

Applying LR test we should choose (3.1) model specification. Under (3.1) specification model if we increase health\_index3 by one unit, the productivity will grow by 15.56 percentage points, which in money equivalent means 32209200.00 current international \$.

The next table considers for the Health\_index4, which includes all previous proxies plus the variable physicians (per 1000 people). The estimation output with Health\_index4 is presented in the next table 4.4.

Table 4.

**Health Index4 Estimation Results:**

<b>RHS variables</b>	<b>(4.1)</b>	<b>robust</b>	<b>(4.2)</b>	<b>robust</b>	<b>(4.3)</b>	<b>robust</b>	<b>(4.4)</b>	<b>robust</b>
Capital	.1963*** (0.001)	.3790 (0.000)	.1854*** (0.001)	.2991 (0.000)	.1615** (0.053)	.0777 (0.136)	.2171*** (0.001)	.1047 (0.038)
Labor	.7996*** (0.000)	.5529 (0.026)	.7114*** (0.000)	.6128 (0.006)	.7197*** (0.000)	.7329 (0.018)	.7133*** (0.000)	.8890516 (0.003)
Schooling	-.0063** (0.129)	.0083 (0.368)	-.0026 (0.529)	.0046 (0.593)	.0025 (0.635)	.0235 (0.059)	.0083 (0.047)	.0211319 (0.079)
Dummy_for_Schooling in transition countries							-.01216*** (0.000)	.0964052 (0.238)
Health_index4	.2394*** (0.000)	.0229 (0.329)	.1849*** (0.000)	.0224 (0.322)	.1143** (0.018)	.0081 (0.685)	.1935*** (0.000)	-.0200019 (0.249)
Dummy_for_Health_index4 in transition countries							.2665 (0.147)	.1465359 (0.110)
Trade(% of GDP)			1.64e-12 *** (0.000)	4.74e-13 (0.000)	1.13e-12*** (0.006)	5.22e-13 (0.000)	4.04e-13 (0.213)	5.59e-13 (0.000)
List of registered domestic companies					.0008*** (0.003)	-7.81e-06 (0.875)	.0002 (0.343)	-.0000528 (0.322)
constant	7.791*** (0.000)	5.166 (0.057)	8.942*** (0.000)	6.4888 (0.013)	9.041*** (0.000)	9.1962 (0.018)	7.691*** (0.000)	6.530816 (0.077)
N	301	301	293	293	185	185	185	185
R2coefficient	0.8539	0.9974	0.8691	0.9979	0.8668	0.9989	0.9212	
Test on CRS								
Fixed vs Random:	f.e		f.e		r.e		r.e	
<b>Autocorrelation test:</b>								
rho_dw	.81735215		.79357178		.85315724		.90421987	
d_calculated	0.365296		0.412856		0.293686		0.19156	
d_lower	1.633		1.623		1.613		1.592	
d_upper	1.715		1.725		1.735		1.757	
<b>Decision:</b>								
<b>Heteroscedasticity test:</b>	Yes		Yes		Yes		Yes	

The results of column (4.1) include capital, labor, literacy rate and Health\_index4 as inputs. As in previous regressions all the obtained coefficients except for literacy rate are statistically significant. The coefficients of capital and labor are 0.2 and 0.8 correspondingly. The sum of the coefficients is 1, exactly what we expect under CRS technology. The shares of capital and labor do not take values that are close to their stylized factor shares. Health\_index4 has positive and significant value, if the health index3 changes by one unit the output would increase by 23.9 percentage points. The results obtained under this specification can be judged as good in terms of  $R^2$ -coefficient, despite the number of observation in comparison with the similar model in previous table significantly decreased.

The model specifications (4.2) and (4.3) consider for quality of political institutions factors, which accordingly with the previous tables are proxied by trade and listed domestic companies. As (4.3) specification considers for both factors I would stop on the interpretation of this particular model. The coefficient of literacy rate is positive and statistically insignificant, the health index4 can be considered significant only at 5 per cent significance level. The value of health\_index4 is quite big, so that one unit increase in health index4 would increase the output by 11.4 percentage points. The coefficient of capital is significant at 10 per cent significance level. The capital and labour coefficients under (4.3) specification of the model also approximately sum to one, but as under the majority specifications their shares do not coincide with the stylized factor shares. Trade and listed domestic companies are both statistically significant and positively influence on productivity. The  $R^2$  square of the model is rather high 0.8668.

Adding dummy for literacy rate in transition countries changes its sign from the positive to negative one, but overall effect of literacy rate on other country groups would be negative after summation, as the coefficient near dummy is much higher than the coefficient near literacy rate itself. Overall our proxy for schooling in terms of literacy rates would have negative influence on productivity growth. Dummy for Health\_index4 for transition countries is both positive and significant, which after summation will give the result that health is more important in terms of economic growth for the transition countries vs rest country groups. Thus I obtained that one unit of health\_index4

improvement would benefit in output increase by 46 percentage points. As for the quality of political institutions both the trade variable and listed domestic companies were found to be insignificant under this model specification. The  $R^2$  coefficient of the model is extremely high 0.9212, which means that given specification of the model fits the data well.

Overall the picture that emerges from the all above analysed tables is that in the majority of specifications health variables were found to be positive and significant. The coefficients of capital and labour summed to one, though their shares were not very much close to the stylized fact. The institutional variables that were taken as a proxy for the quality of institutional environment were found statistically significant, though in majority their value is extremely small. Possibly, this problem can be explained in terms of scale, so that the difference in listed domestic companies in big countries versus small can be rather large. All the specifications proved to have autocorrelation and heteroskedasticity problems, which make the estimated results inefficient and standard errors not reliable. To control for the heteroskedasticity problem the robust regressions were run. The results obtained in robustness check in some specifications were significantly different from those obtained in fixed/random effect estimations. This fact can be partially explained with the endogeneity problem.

Statistically speaking, endogeneity creates a correlation between the independent variables and the error term that makes the coefficients in equation inconsistent. To control for this problem I assume lagged variables of health indices and literacy rate as valid IVs. I decided not to include the results on the IV estimation for all the specifications, only those that consider all the variables of interest. The estimated results are presented in the table 4.5

Table 5. **Instrumental Variables Estimations Output**

<b>RHS variables</b>	<b>(1.5)</b>	<b>(IV_1.5)</b>	<b>(2.4)</b>	<b>(IV_2.4)</b>	<b>(3.4)</b>	<b>(IV_3.4)</b>	<b>(4.4)</b>	<b>(IV_4.4)</b>
Capital	.1789*** (0.000)	<b>.1591</b> <b>(0.000)</b>	.4107*** (0.000)	<b>.2267</b> <b>(0.000)</b>	.4107*** (0.000)	<b>.0806</b> <b>(0.348)</b>	.2171*** (0.001)	<b>.0778</b> <b>(0.488)</b>
Labor	.6783*** (0.000)	<b>.8412</b> <b>(0.000)</b>	.5204*** (0.000)	<b>1.3361</b> <b>(0.000)</b>	.5204*** (0.000)	<b>1.491</b> <b>(0.000)</b>	.7133*** (0.000)	<b>1.6257</b> <b>(0.657)</b>
Schooling	.0034***	<b>-.0029</b>	.0038	<b>-.0022</b>	.0038	<b>.0125</b>	.0083	<b>.0125</b>

	(0.034)	<b>(0.238)</b>	(0.223)	<b>(0.727)</b>	(0.223)	<b>(0.415)</b>	(0.047)	<b>(0.598)</b>
	-	<b>.1598</b>		<b>.2067</b>	-	<b>.0288</b>	-	<b>.0273</b>
Dummy_for_Schooling in transition countries	.0039*** (0.020)	<b>(0.005)</b>	-.0167*** (0.000)	<b>(0.004)</b>	.0167*** (0.000)	<b>(0.810)</b>	.01216*** (0.000)	<b>(0.845)</b>
Health_index4	.0174*** (0.012)	<b>.0288</b> <b>(0.049)</b>	.1511*** (0.000)	<b>-.0405</b> <b>(0.463)</b>	.1511*** (0.000)	<b>-.1139</b> <b>(0.468)</b>	.1935*** (0.000)	<b>-.2202</b> <b>(0.804)</b>
Dummy_for_Health_index4 in transition countries	.0561 (0.237)	<b>.2220</b> <b>(0.093)</b>	.8631*** (0.000)	<b>.4301</b> <b>(0.002)</b>	.8631*** (0.000)	<b>.6263</b> <b>(0.001)</b>	.2665 (0.147)	<b>.6009</b> <b>(0.522)</b>
Trade(% of GDP)	5.28e-13*** (0.000)	<b>5.01e-13</b> <b>(0.000)</b>	7.79e-13*** (0.008)	<b>3.76e-13</b> <b>(0.001)</b>	7.79e-13*** (0.008)	<b>7.90e-13</b> <b>(0.043)</b>	4.04e-13 (0.213)	<b>1.12e-12</b> <b>(0.459)</b>
List of registered domestic companies	.0001*** (0.000)	<b>.0001</b> <b>(0.021)</b>	.0001 (0.492)	<b>-.0001</b> <b>(0.126)</b>	.0001 (0.492)	<b>.0001</b> <b>(0.086)</b>	.0002 (0.343)	<b>-.0001</b> <b>(0.188)</b>
constant	9.138*** (0.000)	<b>5.4379</b> <b>(0.000)</b>	5.929*** (0.000)	<b>-7.463</b> <b>(0.056)</b>	5.929*** (0.000)	<b>-2.8559</b> <b>(0.690)</b>	7.691*** (0.000)	<b>-5.2034</b> <b>(0.924)</b>
N	647	<b>613</b>	250	<b>275</b>	250	<b>133</b>	185	<b>108</b>
R2coefficient	0.8582	<b>0.0254</b>	0.9258	<b>0.0007</b>	0.9258	<b>0.3327</b>	0.9212	<b>0.3675</b>

From the results presented in the table above I can conclude that taking lagged variables of health indices as instrumental variables change the coefficients. Under the (IV\_2.4), (IV\_3.4) and (IV\_4.4) the coefficients near health variable turned to negative, just opposite to the expected. In IV specifications the R<sup>2</sup> is very low, which means that the model fits the data not appropriately and the obtained results cannot be very much trusted. On this step, the evident thing is that model needs further check for the robustness.

In the second part of my empirical investigation I will estimate the stochastic frontier, considering for health as a explanatory variable for the efficiency terms.

The second approach is based on estimation of the stochastic frontier, considering for health as an explanatory variable of the inefficiency terms. As it was previously mentioned in methodology part the disturbance term in a stochastic frontier model is assumed to have two components. One component is assumed to have a symmetric distribution, the other is assumed to have strictly non-negative distribution. Non-negative component is known also as inefficiency term. A fundamental assumption of our country analysis is that potentially each country produces less than it might due to a degree of inefficiency.

Assume the country has the production function as in (6):

$$y_{it} = K^\alpha L^\beta H S \varepsilon_{it},$$

where  $\varepsilon_{it}$  is the level of efficiency for country  $i$  at time  $t$ .  $\varepsilon_{it}$  can be in the range (0,1]. If  $\varepsilon_{it}=1$ , the country produces its optimal output appropriately using all its factors,  $\varepsilon_{it} < 1$  means that the country is not appropriately using most of its inputs. As we assume that output is strictly positive, the term  $\varepsilon_{it}$  of technical efficiency has also to be strictly positive. Generally, technical efficiency term shows the difference between actual and potential output values.

At first I estimate the model given in without health and schooling indicators

$$\ln Y_{it} = \ln A + \alpha \ln L_{it} + \beta \ln K_{it} + \varepsilon_{it}, \alpha + \beta = 1$$

(basically production frontier, excluding human capital):

where  $\alpha + \beta = 1$ , restriction implied for having constant returns to scales.

At the next step I estimate the same model including previously constructed health indices. This will be “stochastic frontier function” considering for health variable;

$$\ln Y_{it} = \ln A + \alpha \ln L_{it} + \beta \ln K_{it} + H_{it} + S_{it} + \varepsilon_{it}, \alpha + \beta = 1$$

Then, based on the output of these two specifications I estimate technical efficiency for each health index separately. Such approach will help to determine the influence of health factor on output in terms of efficiency.

Table 6. **Technical Efficiency Estimation Output**

<b>RHS variables</b>	<b>(0)</b>	<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>
Capital	.7526 (0.000)	.2796 (0.000)	.4486 (0.000)	.2854 (0.000)	.4238 (0.000)
Labor	.1607 (0.000)	.6801 (0.000)	.6443 (0.000)	.6682 (0.000)	.5409 (0.000)
Literacy Rate	-.0011 (0.424)	.0007 (0.671)	-.0238 (0.000)	.0049 (0.032)	.0033 (0.308)
Health_index1		.0176 (0.003)			
Health_index2			-.0682 (0.000)		
Health_index3				.0568 (0.000)	
Health_index4					.0567 (0.012)
constant	3.6017 (0.000)	8.0429 (0.000)	5.4879 (0.000)	7.6353 (0.000)	6.0194 (0.000)
N	1368	1162	589	425	301
<b>Technical efficiency</b>	<b>.6131</b>	<b>.2952</b>	<b>.4888</b>	<b>.3664</b>	<b>.4391</b>

From the results presented in the table 4.6 follows that in the model specifications (1-4), when we consider for four different health indices the technical efficiency is lower than in the (0) specification model which excludes health variable, moreover, in each model technical efficiency varies. Based on such results we cannot predict the influence of health on output in terms of efficiency, the only possible conclusion we can make is that health factor influences the efficiency. In case the estimated technical efficiencies were all approximately equal when including other variables would witness the fact that these variables do not influence the efficiency or by other words are not an omitted variables.

The estimated variety in technical efficiencies could be partially explained by a significant gap between minimum and maximum values of health indices, and also possible correlation between output and health actor.

In terms of coefficients this method also proved that in 3 out of 4 model specifications health has positive and significant influence on output growth. As a result of estimation I got that the change of the health index by one unit will increase the output by 1.57 percentage points  $(0.0176-0.0682+0.0568+0.0567)*0.25$ . Such result does not differ much from the results got in the previous methods. The capital and labor coefficients in (1) and (3) specifications have the shares close to their stylized facts, and under all the considered specifications their sum is approximately equal to 1, which is good under assumption of constant returns to scales. Overall, based on the results got from the stochastic frontier estimation it is inappropriate to judge about the influence of health on the technical efficiencies, from the other side the results in terms of coefficients can be interpreted so that health indexes proved to have positive and significant value on output growth.

## *Chapter 6*

### CONCLUSIONS

The main purpose of this study has been to investigate the empirical evidence of health factor influence on economic growth. A specific question guiding the research was to find the peculiarities of health impact on transition economies countries.

Based on the Principle Component Analysis I constructed four different health indices including different health factors that could proxy for health. To make the estimated result more comprehensive the estimated output was scaled to the percentage equivalent, so that it would be possible to receive relative estimates of health. Sorting the countries by income, showed the result that wealthier countries along with high income present high values of health indices, when the countries whose income is low also do not perform very well in terms of health. Such result indicates correlation and gives the intuition on understanding health-wealth nexus between different countries groups.

Following Bloom et al (2001) I examined the influence of constructed health indices on the real output. The main finding is that under majority of specifications health indices were found to be positive and significant, so that on average one unit improvement in health index would increase the output by 1.8%. In case of transition countries versus the rest countries groups the coefficient near literacy rate was found negative, when the coefficient near the literacy rate variable, which stands for the rest countries groups was found positive. As for the health index its influence on productivity growth in transition countries do not differ from the health influence on productivity of the other countries groups. The negative influence of education of the literacy rate on productivity in case of transition countries can be explained by the fact that in post-Soviet countries secondary education was compulsory and free of charge, so that in these group of countries unlike in the rest countries group education doesn't necessarily mean better job or higher standard of living. The institutional variables that

were taken as a proxy for the quality of institutional environment were found statistically significant, though they are not easy to interpret economically as for both variables the proxies were taken in the absolute values, so that listed domestic companies are the number of listed domestic companies in the country, and trade was taken just as absolute trade.

To control for the endogeneity problem I use lagged variables of health indices and literacy rate as valid IVs. The results obtained via IV estimation approach, except for the health\_index1, were found opposite to the expected. At this point the conclusion is that the only results we can trust in terms of robustness are obtained with the health\_index1 model specifications.

Under stochastic frontier estimation approach, in terms of coefficients the health influence on output (except for the health\_index2) was also found to be positive and significant. In terms of efficiency the change in technical efficiency varied in all specifications when health\_index was considered. It means that though we cannot make definite conclusion whether considering for health decrease or increase the efficiency, the overall conclusion is that it influences the efficiency and health indexes cannot be considered as omitted variables of the model.

In my model under different specifications I considered the health influence on output only through labor productivity, but improvements of health may increase output also through capital accumulation. In further research it would be appropriate to consider this approach also. The other interesting question for further research can be not only how health influences output, but also how health itself can be determined. In my research I assumed that for different country groups it is influenced by the same set of channels, the peculiarities of different countries health factor formation would be interesting to consider.

Based on results obtained I think that the following policy implications would be appropriate. At first, it is necessary for the governments to consider for the nexus between the health factor and output growth, so that the policies geared to increasing expenditures for health care will be in the long-run effective in terms of increasing

productivity, income and wealth. It follows that government policies aimed directly at improving health should be emphasized and funded. The other important issue is that just an increase in health expenditures will not necessarily result in higher levels of population health. As it was previously mentioned health has a multifaceted nature and itself can be influenced by different factors. This suggest the demand for a complex approach from different policies traditionally considered outside the borders of health policy that indirectly can influence the population health. For example, labour market policy, education policy, parentel and child-care policy. In case of transition countries labor market policy can have a remarkable effect on the productivity growth, which based on Becker (2004) can be explained by the fact that in the transition countries work-related injuries and illnesses are a major source of productivity losses.

## BIBLIOGRAPHY

- “WHO on Health and Economic Productivity”, (1999) Population and Development Review, Vol. 25, No.2., pp. 396-401.
- Aguayo-Rico, A., Guerra-Turubiates, Iris A. et al (2005) “Empirical Evidence of the Impact of Health on Economic Growth”, Issues in Political Economy, Vol. 14.
- Barro, Robert (1996) *Three Models of Health and Economic Growth*. Unpublished manuscript. Cambridge, MA: Harvard University.
- Barro, R. and Sala-i-Martin X.(1995) *Economic Growth*, New York: McGraw-Hill
- Bhargava, A., Jamison, Dean T., Lau, L (2001) “Modelling the Effects of Health on Economic Growth”, GPE Discussion Paper Series: No.33, Evidence and Information for Policy (WHO).
- Bloom, David E., Canning, David (2001) “Economic Growth and the Demographic Transition”, National Bureau of Economic Research (NBER), Working Paper 8685
- Bloom, David E. and David Canning (2005), “Health and Economic Growth: Reconciling the Micro and Macro Evidence”, Harvard School of Public Health.
- Bloom, David E., David Canning, and Jaypee Sevilla (2004), “The Effect of Health on Economic Growth: A Production Function Approach”, World Development 32:1, pp. 1-13.
- Chirikos, Thomas N., Nestel, Gilbert (1985) “Further Evidence on the Economic Effects of Poor Health”, The Review of Economics and Statistics, Vol.67, No.1, pp.61-69.
- Cole, Mathew A., Neumayer, E. (2005) “The Impact of Poor Health on Total Factor Productivity”, Working Paper, university of Birmingham, UK
- Easterly W. and Levine R.(1997) “Africa’s Growth Tragedy: Policies and Ethnic Divisions”, Quarterly Journal of Economics #112, Vol.4, pp. 1203-1250
- Fogel R.W. (1994) “Economic Growth, Population Theory and Physiology: the Bearing of Long-term Process on the Making of Economic Policy”, The American Economic Review, 84(3): 369-395
- Gallup J., Sachs J. and Mellinger A. (1999) “Geography an Economic Development”, International Regional Science Review, pp 179-232
- Grossman, Michael (1972) “On the Concept of Health Capital and the Demand for Health”, Journal of Political Economy, pp.223-255
- Gwatkin, Davidson R. *Health Inequalities and the Health of the Poor:*

- What Do We Know? What can We Do?* Bulletin of the WHO, vol. 78, No 1 (January 2000), pp. 3-17.
- Hall R. and Jones C. (1999) “*Why Do Some Countries Produce So Much More Output per Worker than Others?*”, Quarterly Journal of Economics, pp. 83-116
- Hamoudi, Amar A.. and Jeffrey Sachs (1999), “*Economic Consequences of Health Status: A Review of the Evidence*”, CID Working Papers Series No.30
- Howitt, Peter (2005) “*Health, Human Capital and Economic Growth: a Schumpeterian Perspective*”, Pan American Health Organization
- Ivaschenko O. (2002) “*Adult Health and Earnings in the Ukrainian Labor Market*”, The 16<sup>th</sup> Annual Congress ESPE, Bilbao, Spain, June 13-15, 2002.  
<http://www.eco.rug.nl/~espe2002/Ivaschenko.pdf>
- Jamison, Dean T., Law Laurence J., Wang, Jia (2003) “*Health’s Contribution to Economic Growth in an Environment of Partially Endogenous Technical Growth*”, Disease Control Priorities Project, Working Paper #10, pp.32.
- Knack S. and Keefer P. (1995) “*Institutions and Economic Performance: Cross-Country Tests Using Alternative Institutions Measures*”, Economics and Politics, No 7, Vol. 3, pp. 207-227.
- Macroeconomic and health: Investing in health for economic development.
- Report of the Commission on Macroeconomics and Health. Geneva: World health organization; 2001*
- Malenbaum, Wilfred. (1970) “*Health and Productivity in Poor Areas*”, Empirical Studies in Health Economics. Baltimor, MD: The Johns Hopkins University Press
- Mankiw N., Romer D. and Weil D. (1992) “*A Contribution to the Empirics of Economic Growth*”, Quarterly Journal of Economics, pp. 407-437
- Mayer-Foulkes, D. (2004) “*The Intergenerational Impact of Health on Economic Growth*”, Written for the Global Forum for Health Research, Forum 8, Mexico City.
- Meer, Jonathan, Miller, Douglas L., Rosen, Harvey S. (2003) “*Exploring the Health Wealth Nexus*”, National Bureau of Economic Research (NBER), Working Paper 9554, pp.32.
- Nazarova I.. (2003) “*Health of Russian Population: Factors and Characteristics*”, Sociologicheskie Issledovaniya, # 11
- Roshchin S.Y., Kuzmich O.S.(2005) “*Is It Really Better to be Healthy? The Economic Returns to Health in Russia*”, Interim report (EERC)
- Ross, Catherine E., Mirowsky, John (1995) “*Does Employment Effect Health?*”, Journal of Health and Social Behavior, Vol.36, No.3, pp. 230-243.
- Sachs J. and Warner A. (1995) “*Economic Reform and the Process of*

*Global Integration*”, Brooking Papers on Economic Activities, pp. 111-118

Simar L., Wilson P.W. (2005) *“Estimation and Inference in Cross-Sectional, Stochastic Frontier Models”*, Discussion paper 0524, Institute de Statistique, Universite Catholique de Louvanain, [http:// www.stat.ucl.ac.be](http://www.stat.ucl.ac.be)

Sorkin, Alan L. (1977) *“Health Economics in Developing Countries”*, Lexington, MA: Lexington Books

Tapilina V. (2004) *“Economic Status and Health of the Individual”*, Rossia Kotoruyu My Obretayem, Novossibirsk. Nauka, pp. 474-490

Thomas D., Frankenberg E. (2002) *“Health, Nutrition and Prosperity: a*

*Microeconomic Perspective”*, Bulletin of the World Health Organization, pp. 106-113.

Tompa, Emile (2002) *“The Impact of Health on Productivity: Empirical Evidence and Policy Implications”*, The Review of Economic Performance and Social Progress, pp.181-201.

Weil, David N.(2001) *“Accounting for the Effect of Health on Economic Growth”*, Brown University, Providence, RI

Weil, David N.(2005) *“Accounting for the Effect of Health on Economic Growth”*, National Bureau of Economic Research (NBER), Working Paper 1145

## APPENDIX A

### Variables List

Variable Name	Short Description	STATA coding
Country Name	country name	c_name
Year	year	year
GDP	Gross Domestic Product, PPP (current international \$)	Y
Real Capital	capital calculated by perpetual method	K
Labour Force	comprises people who supply labor for the production of goods and services during a specified period, includes both the employed and the unemployed	L
Birth Rate	birth rate, crude( per 1000 people)	b_rate
CO <sub>2</sub> emissions	CO <sub>2</sub> emissions (kt) per 1000 people	CO_2
Death Rate	death rate, crude ( per 1000 people)	d_rate
Fertility Rate	fertility rate, total (births per woman)	f_rate
Health Expenditure	health expenditure, total (% of GDP)	h_exp
Hospital Beds per 1000 People	hospital beds per 1000 people	h_bed
Immunizations DPT	Immunizations from diphtheria, pertussis, tetanus (% of children under 12 months)	i_DPT
Immunizations measles	Immunizations from measles (% of children under 1 months)	i_mzls
Life Expectancy	theoretical number of years a newborn will live if the age specific mortality rates in the year of birth are taken as constant	lf_exp
Physicians per 1000 of people	physicians per 1000 of people	phys
Population Total	Population total	pop
Literacy Rate	literacy rate, adult total (% of people aged 15 and above)	lit_rate
Marriages (in 1000's)	marriages in 1000s of people	marr
Dummy for Transition Countries		dummy_t
Exports of Goods and Services	exports of goods and services (% of GDP)	exp_good
Listed Domestic Companies	listed domestic companies, total	listed_dom_comp
Trade	trade (% of GDP)	trade_n
Real GDP	GDP divided by deflator	Y_real
Real Capital	capital divided by deflator	K_real
Real Trade	trade considered for deflator	trade_n_real
Specifications of variables are not enlisted to the table		

## APPENDIX B

### Estimation Output

#### 1. SUMMARY STATISTICS

Variable	Obs	Mean	Std. Dev.	Min	Max
c_name	0				
year	2161	1995.497	4.612595	1988	2003
Y	2121	2.64e+11	8.47e+11	2.14e+08	1.09e+13
K	2160	6.09e+11	1.73e+12	7.46e+08	1.77e+13
L	2112	1.96e+07	7.28e+07	55853.07	7.73e+08
<b>b_rate</b>	1370	20.20587	10.62477	7.07	55.5
<b>CO_2</b>	1651	154892.7	547106.5	14.66	5601509
<b>d_rate</b>	1370	9.532438	4.018515	2.9	29.8
<b>f_rate</b>	1279	2.70147	1.540523	.93	7.64
h_exp	670	6.009403	2.066955	1.9	14.6
<b>i_DPT</b>	2046	80.40176	19.59791	9	99
<b>i_mzls</b>	2045	79.33301	18.43211	10	100
<b>lf_exp</b>	1155	68.46969	10.43534	34.22	81.68
<b>phys</b>	1094	2.069397	1.385743	.01	6.06
pop	2161	3.97e+07	1.34e+08	40130	1.29e+09
lit_rate	1391	75.80007	22.45945	10.67	99.8
logY	2121	24.35582	2.016771	19.17946	30.02193
logK	2160	25.12613	2.127348	20.43087	30.5041
logL	2112	15.30101	1.583468	10.93048	20.46571
health1	1620	-1.56e-09	1.38382	-4.781328	2.784246
health2	939	4.17e-10	1.587433	-7.751433	1.701697
health3	815	-3.20e-09	1.820504	-1.852499	7.842896
health4	723	-7.11e-10	2.046553	-8.012486	2.192096
health5	536	-2.63e-09	2.067121	-9.639101	2.317766
marr	359	110.9389	218.8816	5.43	1384.31
dummy_t	2395	.1803758	.3845804	0	1
logmarr	359	3.795182	1.215978	1.691939	7.232957
exp_good	2078	35.50513	22.2595	3.95	170
listed_dom~p	1112	200.6214	213.8431	1	998
export	2078	35.50513	22.2595	3.95	170
trade_n	2063	1.23e+11	2.88e+11	1.67e+08	4.26e+12

#### 2. HEALTH INDEX CONSTRUCTION, PCA METHOD

```
. pca i_mzls i_DPT CO2_per_1000, factors(1)
(obs=1623)
```

(principal components; 1 component retained)				
Component	Eigenvalue	Difference	Proportion	Cumulative
1	2.17738	1.46410	0.7258	0.7258
2	0.71328	0.60393	0.2378	0.9636
3	0.10934	.	0.0364	1.0000

Eigenvectors	
Variable	1
i_mzls	0.62806
i_DPT	0.63920

```
CO2_per_1000 | 0.44381
```

```
. score Health1
```

```
(based on unrotated principal components)
```

```
Scoring Coefficients
```

```
Variable | 1  
-----+-----  
i_mzls | 0.62806  
i_DPT | 0.63920  
CO2_per_1000 | 0.44381
```

```
. gen logHealth1=log(Health1)  
(1184 missing values generated)
```

```
. pca i_mzls i_DPT CO2_per_1000 d_rate b_rate, factors(1)  
(obs=941)
```

```
(principal components; 1 component retained)
```

Component	Eigenvalue	Difference	Proportion	Cumulative
1	2.77082	1.81543	0.5542	0.5542
2	0.95538	0.25001	0.1911	0.7452
3	0.70537	0.32327	0.1411	0.8863
4	0.38210	0.19577	0.0764	0.9627
5	0.18633	.	0.0373	1.0000

```
Eigenvectors
```

```
Variable | 1  
-----+-----  
i_mzls | 0.50172  
i_DPT | 0.54001  
CO2_per_1000 | 0.35678  
d_rate | -0.28606  
b_rate | -0.49753
```

```
. score Health2
```

```
(based on unrotated principal components)
```

```
Scoring Coefficients
```

```
Variable | 1  
-----+-----  
i_mzls | 0.50172  
i_DPT | 0.54001  
CO2_per_1000 | 0.35678  
d_rate | -0.28606  
b_rate | -0.49753
```

```
. gen logHealth2=log(Health2)  
(1525 missing values generated)
```

```
. pca i_mzls i_DPT CO2_per_1000 d_rate b_rate f_rate, factors(1)  
(obs=811)
```

```
(principal components; 1 component retained)
```

Component	Eigenvalue	Difference	Proportion	Cumulative
1	3.60776	2.67489	0.6013	0.6013
2	0.93287	0.22185	0.1555	0.7568
3	0.71102	0.16879	0.1185	0.8753
4	0.54224	0.34790	0.0904	0.9656
5	0.19433	0.18255	0.0324	0.9980
6	0.01178	.	0.0020	1.0000

```
Eigenvectors
```

```

Variable |      1
-----+-----
i_mzls | -0.40740
i_DPT | -0.45453
CO2_per_1000 | -0.32203
d_rate |  0.25264
b_rate |  0.47779
f_rate |  0.48126

```

**. score Health3**

(based on unrotated principal components)  
Scoring Coefficients

```

Variable |      1
-----+-----
i_mzls | -0.40740
i_DPT | -0.45453
CO2_per_1000 | -0.32203
d_rate |  0.25264
b_rate |  0.47779
f_rate |  0.48126

```

. gen logHealth3=log(Health3)  
(1929 missing values generated)

. pca i\_mzls i\_DPT CO2\_per\_1000 d\_rate b\_rate f\_rate lf\_exp, factors(1)  
(obs=720)

(principal components; 1 component retained)

Component	Eigenvalue	Difference	Proportion	Cumulative
1	4.51541	3.59088	0.6451	0.6451
2	0.92453	0.12855	0.1321	0.7771
3	0.79598	0.29633	0.1137	0.8908
4	0.49965	0.31407	0.0714	0.9622
5	0.18558	0.11709	0.0265	0.9887
6	0.06849	0.05813	0.0098	0.9985
7	0.01036	.	0.0015	1.0000

Eigenvectors

```

Variable |      1
-----+-----
i_mzls |  0.34660
i_DPT |  0.39667
CO2_per_1000 |  0.29689
d_rate | -0.25598
b_rate | -0.43314
f_rate | -0.43652
lf_exp |  0.43668

```

**. score Health4**

(based on unrotated principal components)  
Scoring Coefficients

```

Variable |      1
-----+-----
i_mzls |  0.34660
i_DPT |  0.39667
CO2_per_1000 |  0.29689
d_rate | -0.25598
b_rate | -0.43314
f_rate | -0.43652
lf_exp |  0.43668

```

. gen logHealth4=log(Health4)

(1670 missing values generated)

```
. pca i_mzls i_DPT CO2_per_1000 d_rate b_rate f_rate lf_exp phys, factors(1)
(obs=536)
```

(principal components; 1 component retained)

Component	Eigenvalue	Difference	Proportion	Cumulative
1	4.58063	3.25979	0.5726	0.5726
2	1.32084	0.46435	0.1651	0.7377
3	0.85650	0.22482	0.1071	0.8447
4	0.63168	0.34697	0.0790	0.9237
5	0.28471	0.06738	0.0356	0.9593
6	0.21732	0.11903	0.0272	0.9865
7	0.09829	0.08825	0.0123	0.9987
8	0.01004	.	0.0013	1.0000

Eigenvectors

Variable	1
i_mzls	0.30807
i_DPT	0.38443
CO2_per_1000	0.28300
d_rate	-0.09433
b_rate	-0.43885
f_rate	-0.43768
lf_exp	0.40750
phys	0.34367

```
. score Health5
```

(based on unrotated principal components)

Scoring Coefficients

Variable	1
i_mzls	0.30807
i_DPT	0.38443
CO2_per_1000	0.28300
d_rate	-0.09433
b_rate	-0.43885
f_rate	-0.43768
lf_exp	0.40750
phys	0.34367

```
. gen logHealth5=log(Health5)
(1814 missing values generated)
```

## HEALTH 1

**FIXED vs RANDOM effects:**

```
xtreg logY_real logK_real logL, fe
```

Fixed-effects (within) regression	Number of obs	=	2072
Group variable (i): country	Number of groups	=	132
R-sq: within	=	0.7126	
between	=	0.8511	
overall	=	<b>0.8465</b>	
	Obs per group: min	=	11
	avg	=	15.7
	max	=	16
	F(2,1938)	=	2402.42



```

FE (within) regression with AR(1) disturbances   Number of obs   =   1940
Group variable (i): country                     Number of groups =   132

R-sq:  within = 0.8918                          Obs per group: min =   10
        between = 0.8815                          avg =   14.7
        overall = 0.8779                          max =   15

corr(u_i, Xb) = -0.1784                          F(2,1806)       =   7445.71
                                                Prob > F        =   0.0000

```

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
logK_real	.6604048	.0104293	63.32	0.000	.63995	.6808596
logL	.4309295	.0238498	18.07	0.000	.3841535	.4777056
_cons	1.128342	.0799618	14.11	0.000	.9715148	1.28517
rho_ar	.66126595					
sigma_u	.67610203					
sigma_e	.15226695					
rho_fov	.95172754	(fraction of variance due to u_i)				

```

F test that all u_i=0:      F(131,1806) =   35.62          Prob > F = 0.0000

```

Checking for heteroskedasticity:

```

. xi: reg logY_real logK_real logL i(country)
i: operator invalid
r(198);

```

```

. xi: reg logY_real logK_real logL i.country
i.country          _Icountry_1-135      (naturally coded; _Icountry_1 omitted)

```

Source	SS	df	MS	Number of obs =	2072
Model	7536.92228	133	56.6685886	F(133, 1938) =	957.56
Residual	114.691246	1938	.059180209	Prob > F =	0.0000
Total	7651.61353	2071	3.6946468	R-squared =	0.9850
				Adj R-squared =	0.9840
				Root MSE =	.24327

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
logK_real	.7358576	.0110376	66.67	0.000	.7142107	.7575044
logL	.0069996	.0533055	0.13	0.896	-.0975426	.1115418
_cons	5.234003	.7358705	7.11	0.000	3.790822	6.677184

```

. hettest

```

Breusch-Pagan / Cook-Weisberg test for heteroskedasticity

Ho: Constant variance

Variables: fitted values of logY\_real

```

chi2(1) = 13.02

```

```

Prob > chi2 = 0.0003

```

**Specification (2)**

```

. xtreg logY_real logK_real logL lit_rate ,fe

```

```

Fixed-effects (within) regression
Group variable (i): country
Number of obs      =      1368
Number of groups   =        99

R-sq:  within = 0.7424
       between = 0.8819
       overall = 0.8744
Obs per group: min =         1
               avg  =       13.8
               max  =        15

corr(u_i, Xb) = -0.0744
F(3,1266)      =    1216.36
Prob > F       =         0.0000

```

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
logK_real	.7515716	.0128937	58.29	0.000	.7262763	.7768669
logL	.2422081	.1122245	2.16	0.031	.0220416	.4623747
lit_rate	-.0135044	.0036083	-3.74	0.000	-.0205833	-.0064255
_cons	2.71966	1.486045	1.83	0.067	-.195722	5.635042
sigma_u	.58246822					
sigma_e	.24991197					
rho	.84453057	(fraction of variance due to u_i)				

```

F test that all u_i=0:      F(98, 1266) =    63.05      Prob > F = 0.0000

```

```
. est store fixed
```

```
. xtreg logY_real logK_real logL lit_rate ,re
```

```

Random-effects GLS regression
Group variable (i): country
Number of obs      =      1368
Number of groups   =        99

R-sq:  within = 0.7420
       between = 0.8904
       overall = 0.8832
Obs per group: min =         1
               avg  =       13.8
               max  =        15

Random effects u_i ~ Gaussian
corr(u_i, X)      = 0 (assumed)
Wald chi2(3)     =    4469.78
Prob > chi2      =         0.0000

```

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
logK_real	.7487218	.0126701	59.09	0.000	.7238888	.7735547
logL	.2036281	.0332821	6.12	0.000	.1383963	.2688598
lit_rate	-.0094102	.001675	-5.62	0.000	-.012693	-.0061274
_cons	3.054944	.4824019	6.33	0.000	2.109453	4.000434
sigma_u	.53645245					
sigma_e	.24991197					
rho	.82167517	(fraction of variance due to u_i)				

```
. est store random
```

```
. hausman fixed random
```

---- Coefficients ----				
	(b)	(B)	(b-B)	sqrt(diag(V_b-V_B))
	fixed	random	Difference	S.E.
logK_real	.7515716	.7487218	.0028498	.0023907
logL	.2422081	.2036281	.03858	.1071758
lit_rate	-.0135044	-.0094102	-.0040942	.003196





. hausman fixed random

---- Coefficients ----				
	(b)	(B)	(b-B)	sqrt(diag(V_b-V_B))
	fixed	random	Difference	S.E.
logK_real	.2683264	.2843884	-.016062	.0011648
logL	.7763202	.6439886	.1323316	.0454167
lit_rate	-.0036434	.0006423	-.0042857	.0012251
Health1	.0136713	.018646	-.0049748	.001306

b = consistent under Ho and Ha; obtained from xtreg  
 B = inconsistent under Ha, efficient under Ho; obtained from xtreg

Test: Ho: difference in coefficients not systematic

chi2(4) = (b-B)'[(V\_b-V\_B)^(-1)](b-B)  
 = -81.01 chi2<0 ==> model fitted on these  
 data fails to meet the asymptotic  
 assumptions of the Hausman test;  
 see suest for a generalized test

. xtregar logY\_real logK\_real logL lit\_rate Health1,fe

FE (within) regression with AR(1) disturbances Number of obs = 1064  
 Group variable (i): country Number of groups = 96

R-sq: within = 0.0993 Obs per group: min = 7  
 between = 0.7585 avg = 11.1  
 overall = 0.7572 max = 12

corr(u\_i, Xb) = 0.3371 F(4,964) = 26.57  
 Prob > F = 0.0000

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
logK_real	.0295936	.0122531	2.42	0.016	.0055477	.0536394
logL	.7322884	.0883338	8.29	0.000	.5589397	.905637
lit_rate	.0039703	.002239	1.77	0.077	-.0004236	.0083642
Health1	-.0068943	.0041013	-1.68	0.093	-.0149428	.0011541
_cons	11.78203	.2384719	49.41	0.000	11.31404	12.25001
rho_ar	.81896318					
sigma_u	.90831395					
sigma_e	.05471386					
rho_fov	.99638465	(fraction of variance due to u_i)				

F test that all u\_i=0: F(95,964) = 51.38 Prob > F = 0.0000

. xi: reg logY\_real logK\_real logL lit\_rate Health1 i.country  
 i.country \_Icountry\_1-135 (naturally coded; \_Icountry\_1 omitted)

Source	SS	df	MS	Number of obs =	1162
Model	3544.06466	101	35.0897491	F(101, 1060) =	3826.17
Residual	9.72124957	1060	.00917099	Prob > F =	0.0000
				R-squared =	0.9973
				Adj R-squared =	0.9970
Total	3553.78591	1161	3.06096978	Root MSE =	.09577

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]





logL		.7741337	.0826125	9.37	0.000	.6120092	.9362583
lit_rate		.0031016	.0021849	1.42	0.156	-.0011861	.0073894
Health1		-.0069951	.0041424	-1.69	0.092	-.0151245	.0011343
trade_n_real		2.74e-13	7.22e-14	3.80	0.000	1.33e-13	4.16e-13
_cons		11.0888	.2591606	42.79	0.000	10.58021	11.5974

---

rho_ar		.78651835					
sigma_u		.88393311					
sigma_e		.05432152					
rho_fov		.99623757	(fraction of variance due to u_i)				

---

F test that all u\_i=0: F(94,948) = 60.79 Prob > F = 0.0000

. xi: reg logY\_real logK\_real logL lit\_rate Health1 trade\_n\_real i.country  
i.country \_Icountry\_1-135 (naturally coded; \_Icountry\_1 omitted)

Source	SS	df	MS	Number of obs	=	1145
Model	3528.48681	101	34.935513	F(101, 1043)	=	4612.29
Residual	7.90013417	1043	.007574434	Prob > F	=	0.0000
Total	3536.38695	1144	3.09124733	R-squared	=	0.9978
				Adj R-squared	=	0.9975
				Root MSE	=	.08703

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]
logK_real	.2239215	.0135064	16.58	0.000	.1974186 .2504243
logL	.8091172	.0511833	15.81	0.000	.7086831 .9095512
lit_rate	-.0050015	.0015843	-3.16	0.002	-.0081102 -.0018928
Health1	.0119521	.005448	2.19	0.028	.0012618 .0226423
trade_n_real	6.07e-13	5.01e-14	12.12	0.000	5.09e-13 7.05e-13
.....	.....	.....	.....	.....	.....
_cons	6.216219	.6169232	10.08	0.000	5.005667 7.426771

. hettest

Breusch-Pagan / Cook-Weisberg test for heteroskedasticity  
Ho: Constant variance  
Variables: fitted values of logY\_real

chi2(1) = 52.04  
Prob > chi2 = 0.0000

**SPEIFICATION (1.5)**

xtreg logY\_real logK\_real logL lit\_rate Health1 trade\_n\_real listed\_dom\_comp  
,fe

Fixed-effects (within) regression	Number of obs	=	647
Group variable (i): country	Number of groups	=	69

R-sq: within	=	0.7689	Obs per group: min	=	1
between	=	0.8009	avg	=	9.4
overall	=	0.8246	max	=	13

corr(u_i, Xb)	=	-0.1998	F(6, 572)	=	317.26
			Prob > F	=	0.0000

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]
logK_real	.1622399	.0154071	10.53	0.000	.1319786 .1925012
logL	.8018812	.0611808	13.11	0.000	.6817148 .9220476

lit_rate		-.0011158	.002387	-0.47	0.640	-.0058042	.0035727
Health1		.0156904	.0067908	2.31	0.021	.0023525	.0290283
trade_n_real		5.37e-13	6.10e-14	8.80	0.000	4.17e-13	6.57e-13
listed_dom~p		.0001602	.0000359	4.46	0.000	.0000896	.0002308
_cons		8.040665	.808252	9.95	0.000	6.453161	9.628168

sigma_u		.7103779					
sigma_e		.06479186					
rho		.99174981	(fraction of variance due to u_i)				

F test that all u\_i=0: F(68, 572) = 511.58 Prob > F = 0.0000

. est store fixed

. xtreg logY\_real logK\_real logL lit\_rate Health1 trade\_n\_real listed\_dom\_comp, re

Random-effects GLS regression		Number of obs	=	647	
Group variable (i): country		Number of groups	=	69	
R-sq: within	=	0.7677	Obs per group: min	=	1
between	=	0.8195	avg	=	9.4
overall	=	0.8468	max	=	13

Random effects u_i ~ Gaussian		Wald chi2(6)	=	1539.38
corr(u_i, X) = 0 (assumed)		Prob > chi2	=	0.0000

logY_real		Coef.	Std. Err.	z	P> z	[95% Conf. Interval]
logK_real		<b>.1722696</b>	.0154109	11.18	0.000	.1420649 .2024743
logL		.7036196	.0369412	19.05	0.000	.6312161 .7760231
lit_rate		.0023344	.0016591	1.41	0.159	-.0009173 .0055861
Health1		.018124	.0067267	2.69	0.007	.0049399 .031308
trade_n_real		5.32e-13	6.16e-14	8.64	0.000	4.11e-13 6.53e-13
listed_dom~p		.0001575	.0000362	4.35	0.000	.0000865 .0002285
_cons		8.935066	.5067289	17.63	0.000	7.941896 9.928236

sigma_u		.60189262				
sigma_e		.06479186				
rho		.98854489	(fraction of variance due to u_i)			

. est store random

. hausman fixed random

Note: the rank of the differenced variance matrix (5) does not equal the number of coefficients being tested (6); be sure this is what you expect, or there may be problems computing the test. Examine the output of your estimators for anything unexpected and possibly consider scaling your variables so that the coefficients are on a similar scale.

	(b)	(B)	(b-B)	sqrt(diag(V_b-V_B))
	fixed	random	Difference	S.E.
logK_real	.1622399	.1722696	-.0100297	.
logL	.8018812	.7036196	.0982616	.0487692
lit_rate	-.0011158	.0023344	-.0034502	.0017162

```

Health1 | .0156904 .018124 -.0024335 .0009309
trade_n_real | 5.37e-13 5.32e-13 5.01e-15 .
listed_dom~p | .0001602 .0001575 2.71e-06 .

```

-----  
b = consistent under Ho and Ha; obtained from xtreg  
B = inconsistent under Ha, efficient under Ho; obtained from xtreg

Test: Ho: difference in coefficients not systematic

chi2(5) = (b-B)'[(V\_b-V\_B)^(-1)](b-B)  
= -59.52 chi2<0 ==> model fitted on these  
data fails to meet the asymptotic  
assumptions of the Hausman test;  
see suest for a generalized test

```

. xtregar logY_real logK_real logL lit_rate Health1 trade_n_real
listed_dom_comp ,f
> e

```

FE (within) regression with AR(1) disturbances Number of obs = 578  
Group variable (i): country Number of groups = 67

R-sq: within = 0.9366 Obs per group: min = 1  
between = 0.7163 avg = 8.6  
overall = 0.7152 max = 12

corr(u\_i, Xb) = -0.8390 F(6,505) = 1243.25  
Prob > F = 0.0000

```

-----+-----
logY_real |      Coef.   Std. Err.      t    P>|t|     [95% Conf. Interval]
-----+-----
logK_real |   .0038857   .0115398     0.34   0.736   -0.0187861   .0265576
logL      |   1.614434   .0346747    46.56   0.000   1.54631     1.682559
lit_rate  |  -.012675   .0041957    -3.02   0.003   -0.0209183  -.0044318
Health1   |   .0054984   .0049927     1.10   0.271   -0.0043105   .0153074
trade_n_real | 8.33e-14   6.21e-14     1.34   0.180   -3.86e-14    2.05e-13
listed_dom~p | -9.82e-07   .0000287    -0.03   0.973   -0.0000574   .0000554
_cons     |   .3989831   .0517626     7.71   0.000   .2972866     .5006797
-----+-----

```

```

rho_ar | .81950116
sigma_u | 1.5103919
sigma_e | .03626104
rho_fov | .99942396 (fraction of variance due to u_i)
-----+-----

```

F test that all u\_i=0: F(66,505) = 65.95 Prob > F = 0.0000

```

. xi: reg logY_real logK_real logL lit_rate Health1 trade_n_real
listed_dom_comp i.
> country
i.country      _Icountry_1-135 (naturally coded; _Icountry_1 omitted)

```

```

Source |      SS       df       MS              Number of obs =    647
-----+-----
Model | 1567.19781     74  21.1783488          F( 74, 572) = 5044.88
Residual | 2.40124767    572  .004197985          Prob > F      = 0.0000
-----+-----
Total | 1569.59906    646  2.42971991          R-squared     = 0.9985
                                           Adj R-squared = 0.9983
                                           Root MSE     = .06479
-----+-----

```

```

-----+-----
logY_real |      Coef.   Std. Err.      t    P>|t|     [95% Conf. Interval]
-----+-----
logK_real |   .1622399   .0154071    10.53   0.000   .1319786     .1925012

```

```

      logL |   .8018812   .0611808   13.11   0.000   .6817148   .9220476
    lit_rate |  -.0011158   .002387   -0.47   0.640  -.0058042   .0035727
    Health1 |   .0156904   .0067908    2.31   0.021   .0023525   .0290283
 trade_n_real |  5.37e-13   6.10e-14    8.80   0.000   4.17e-13   6.57e-13
 listed_dom~p |  .0001602   .0000359    4.46   0.000   .0000896   .0002308
-----+-----
      _cons |  6.875375   1.084197    6.34   0.000   4.745882   9.004867
-----+-----

```

```
. hetttest
```

```
Breusch-Pagan / Cook-Weisberg test for heteroskedasticity
```

```
Ho: Constant variance
```

```
Variables: fitted values of logY_real
```

```
chi2(1)      =    3.72
Prob > chi2   =    0.0537
```

**SPECIFICATION (1.6)**

```
. xtreg logY_real logK_real logL lit_rate Health1 Health1_t trade_n_real
listed_dom
> _comp ,fe
```

```
Fixed-effects (within) regression           Number of obs   =    647
Group variable (i): country                 Number of groups =    69

R-sq:  within = 0.7694                      Obs per group:  min =    1
        between = 0.7998                      avg           =    9.4
        overall = 0.8239                      max           =   13

corr(u_i, Xb) = -0.2039                      F(7, 571)       =   272.11
                                                Prob > F         =    0.0000
```

```
-----+-----
      logY_real |      Coef.   Std. Err.      t    P>|t|     [95% Conf. Interval]
-----+-----
      logK_real |   .1630863   .0154287    10.57  0.000   .1327824   .1933902
        logL   |   .8029305   .061187    13.12  0.000   .6827514   .9231097
      lit_rate |  -.001124    .002387    -0.47  0.638  -.0058123   .0035643
      Health1 |   .0146725   .0068632    2.14  0.033   .0011923   .0281526
 Health1_t    |   .0469597   .0459503    1.02  0.307  -.0432926   .137212
 trade_n_real |  5.37e-13   6.10e-14    8.81  0.000   4.18e-13   6.57e-13
 listed_dom~p |  .0001583    .000036    4.40  0.000   .0000877   .000229
      _cons   |  7.996807   .8093592    9.88  0.000   6.407123   9.586492
-----+-----
      sigma_u |   .71300856
      sigma_e |   .06478935
        rho   |   .99181071   (fraction of variance due to u_i)
-----+-----
```

```
F test that all u_i=0:      F(68, 571) =   413.05          Prob > F = 0.0000
```

```
. est store fixed
```

```
. xtreg logY_real logK_real logL lit_rate Health1 Health1_t trade_n_real
listed_dom
> _comp ,re
```

```
Random-effects GLS regression           Number of obs   =    647
Group variable (i): country                 Number of groups =    69

R-sq:  within = 0.7678                      Obs per group:  min =    1
        between = 0.8199                      avg           =    9.4
                                                max           =
```

```

overall = 0.8478                                max = 13
Random effects u_i ~ Gaussian                    Wald chi2(7) = 1557.98
corr(u_i, X) = 0 (assumed)                      Prob > chi2 = 0.0000

```

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
logK_real	.1745446	.0155823	11.20	0.000	.1440039	.2050852
logL	.6980776	.0354743	19.68	0.000	.6285493	.767606
lit_rate	.002521	.0016249	1.55	0.121	-.0006637	.0057058
Health1	.0177655	.006873	2.58	0.010	.0042947	.0312363
Health1_t	.0226519	.0446691	0.51	0.612	-.064898	.1102017
trade_n_real	5.32e-13	6.24e-14	8.52	0.000	4.09e-13	6.54e-13
listed_dom~p	.0001563	.0000367	4.26	0.000	.0000843	.0002282
_cons	8.942408	.4906085	18.23	0.000	7.980833	9.903983
sigma_u	.54812598					
sigma_e	.06478935					
rho	.98622091	(fraction of variance due to u_i)				

```
. est store random
```

```
. hausman fixed random
```

Note: the rank of the differenced variance matrix (6) does not equal the number of coefficients being tested (7); be sure this is what you expect, or there may be problems computing the test. Examine the output of your estimators for anything unexpected and possibly consider scaling your variables so that the coefficients are on a similar scale.

	---- Coefficients ----			
	(b)	(B)	(b-B)	sqrt(diag(V_b-V_B))
	fixed	random	Difference	S.E.
logK_real	.1630863	.1745446	-.0114583	.
logL	.8029305	.6980776	.1048529	.0498541
lit_rate	-.001124	.002521	-.0036451	.0017485
Health1	.0146725	.0177655	-.003093	.
Health1_t	.0469597	.0226519	.0243078	.010775
trade_n_real	5.37e-13	5.32e-13	5.82e-15	.
listed_dom~p	.0001583	.0001563	2.07e-06	.

b = consistent under Ho and Ha; obtained from xtreg  
B = inconsistent under Ha, efficient under Ho; obtained from xtreg

Test: Ho: difference in coefficients not systematic

```

chi2(6) = (b-B)'[(V_b-V_B)^(-1)](b-B)
= -89.82 chi2<0 ==> model fitted on these
data fails to meet the asymptotic
assumptions of the Hausman test;
see suest for a generalized test

```

```

. xtregar logY_real logK_real logL lit_rate Health1 Health1_t trade_n_real
listed_d
> om_comp ,re

```

```
RE GLS regression with AR(1) disturbances      Number of obs      =      647
```



chi2(1) = 3.19  
 Prob > chi2 = 0.0743

**SPECIFICATION (1.7)**

```
. xtreg logY_real logK_real logL lit_rate lit_rate_t Health1 Health1_t
trade_n_real
> listed_dom_comp ,fe
```

Fixed-effects (within) regression  
 Group variable (i): country

Number of obs = 647  
 Number of groups = 69

R-sq: within = 0.7730  
 between = 0.0165  
 overall = 0.0339

Obs per group: min = 1  
 avg = 9.4  
 max = 13

F(8,570) = 242.61  
 Prob > F = 0.0000

corr(u\_i, Xb) = -0.9544

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
logK_real	.1680286	.0154077	10.91	0.000	.1377659	.1982914
logL	.8100157	.0608027	13.32	0.000	.690591	.9294405
lit_rate	-.0015189	.0023738	-0.64	0.523	-.0061814	.0031436
lit_rate_t	.1488788	.0493403	3.02	0.003	.0519679	.2457898
Health1	.0144996	.0068152	2.13	0.034	.0011136	.0278856
Health1_t	.0177999	.0466398	0.38	0.703	-.073807	.1094068
trade_n_real	5.55e-13	6.09e-14	9.12	0.000	4.35e-13	6.74e-13
listed_dom~p	.0001293	.000037	3.49	0.001	.0000566	.000202
_cons	5.81968	1.080044	5.39	0.000	3.698327	7.941033
sigma_u	6.254724					
sigma_e	.06433438					
rho	.99989422	(fraction of variance due to u_i)				

F test that all u\_i=0: F(68, 570) = 368.38 Prob > F = 0.0000

. est store fixed

```
. xtreg logY_real logK_real logL lit_rate lit_rate_t Health1 Health1_t
trade_n_real
> listed_dom_comp ,re
```

Random-effects GLS regression  
 Group variable (i): country

Number of obs = 647  
 Number of groups = 69

R-sq: within = 0.7669  
 between = 0.8340  
 overall = 0.8582

Obs per group: min = 1  
 avg = 9.4  
 max = 13

Random effects u\_i ~ Gaussian  
 corr(u\_i, X) = 0 (assumed)

Wald chi2(8) = 1590.78  
 Prob > chi2 = 0.0000

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
logK_real	<b>.1789263</b>	<b>.0157012</b>	<b>11.40</b>	<b>0.000</b>	<b>.1481526</b>	<b>.2097</b>
logL	<b>.6783337</b>	<b>.034886</b>	<b>19.44</b>	<b>0.000</b>	<b>.6099583</b>	<b>.7467091</b>
lit_rate	<b>.0034472</b>	<b>.001629</b>	<b>2.12</b>	<b>0.034</b>	<b>.0002544</b>	<b>.0066401</b>
lit_rate_t	<b>-.0039863</b>	<b>.001712</b>	<b>-2.33</b>	<b>0.020</b>	<b>-.0073418</b>	<b>-.0006308</b>
Health1	<b>.0174644</b>	<b>.0069154</b>	<b>2.53</b>	<b>0.012</b>	<b>.0039106</b>	<b>.0310183</b>
Health1_t	<b>.056111</b>	<b>.0474014</b>	<b>1.18</b>	<b>0.237</b>	<b>-.036794</b>	<b>.149016</b>
trade_n_real	<b>5.28e-13</b>	<b>6.28e-14</b>	<b>8.40</b>	<b>0.000</b>	<b>4.05e-13</b>	<b>6.51e-13</b>

```

listed_dom~p | .0001524 .000037 4.12 0.000 .0000799 .0002249
  _cons | 9.138083 .4821851 18.95 0.000 8.193018 10.08315
-----+-----
sigma_u | .50813053
sigma_e | .06433438
rho | .98422283 (fraction of variance due to u_i)
-----+-----

```

```
. est store random
```

```
. hausman fixed random
```

Note: the rank of the differenced variance matrix (7) does not equal the number of coefficients being tested (8); be sure this is what you expect, or there may be problems computing the test. Examine the output of your estimators for anything unexpected and possibly consider scaling your variables so that the coefficients are on a similar scale.

```

-----+-----
          Coefficients
          | (b) (B) (b-B) sqrt(diag(V_b-V_B))
          | fixed random Difference S.E.
-----+-----
logK_real | .1680286 .1789263 -.0108977 .
logL | .8100157 .6783337 .131682 .0497989
lit_rate | -.0015189 .0034472 -.0049662 .0017266
lit_rate_t | .1488788 -.0039863 .1528652 .0493106
Health1 | .0144996 .0174644 -.0029648 .
Health1_t | .0177999 .056111 -.0383112 .
trade_n_real | 5.55e-13 5.28e-13 2.69e-14 .
listed_dom~p | .0001293 .0001524 -.0000231 1.38e-06
-----+-----

```

b = consistent under Ho and Ha; obtained from xtreg  
B = inconsistent under Ha, efficient under Ho; obtained from xtreg

Test: Ho: difference in coefficients not systematic

```

chi2(7) = (b-B)'[(V_b-V_B)^(-1)](b-B)
        = -79.69 chi2<0 ==> model fitted on these
                    data fails to meet the asymptotic
                    assumptions of the Hausman test;
                    see suest for a generalized test

```

```
. xtregar logY_real logK_real logL lit_rate lit_rate_t Health1 Health1_t
trade_n_re
> al listed_dom_comp ,fe
```

```

FE (within) regression with AR(1) disturbances Number of obs = 578
Group variable (i): country Number of groups = 67

R-sq: within = 0.9369 Obs per group: min = 1
      between = 0.6996 avg = 8.6
      overall = 0.6986 max = 12

corr(u_i, Xb) = -0.8582 F(8,503) = 933.83
Prob > F = 0.0000

```

```

-----+-----
logY_real | Coef. Std. Err. t P>|t| [95% Conf. Interval]
-----+-----
logK_real | .0048309 .0114879 0.42 0.674 -.0177393 .0274011

```

```

      logL |   1.648992   .037755   43.68   0.000   1.574815   1.723169
    lit_rate |  -.0118656   .0042001   -2.83   0.005   -.0201175   -.0036136
  lit_rate_t |  -.0131715   .0057007   -2.31   0.021   -.0243716   -.0019713
    Health1 |   .0039815   .0050489    0.79   0.431   -.005938    .0139011
  Health1_t |   .0348253   .0290692    1.20   0.231   -.0222866   .0919373
 trade_n_real |  6.94e-14   6.24e-14    1.11   0.267   -5.32e-14   1.92e-13
 listed_dom~p | -5.44e-06   .0000287   -0.19   0.850   -.0000619   .000051
      _cons |  -.0789885   .0632479   -1.25   0.212   -.2032512   .0452742
-----+-----

```

```

      rho_ar | .82033262
    sigma_u | 1.6773732
    sigma_e | .03608793
    rho_fov | .99953734 (fraction of variance due to u_i)
-----+-----

```

F test that all u\_i=0: F(66,503) = 60.44 Prob > F = 0.0000

```

. xi: reg logY_real logK_real logL lit_rate lit_rate_t Health1 Health1_t
trade_n_re
> al listed_dom_comp i.country
i.country      _Icountry_1-135 (naturally coded; _Icountry_1 omitted)

```

Source	SS	df	MS	Number of obs =	647
Model	1567.23988	76	20.6215774	F( 76, 570) =	4982.37
Residual	2.35918029	570	.004138913	Prob > F =	0.0000
Total	1569.59906	646	2.42971991	R-squared =	0.9985
				Adj R-squared =	0.9983
				Root MSE =	.06433

	logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]
	logK_real	.1680286	.0154077	10.91	0.000	.1377659 .1982914
	logL	.8100157	.0608027	13.32	0.000	.690591 .9294405
	lit_rate	-.0015189	.0023738	-0.64	0.523	-.0061814 .0031436
	lit_rate_t	.1488788	.0493403	3.02	0.003	.0519678 .2457898
	Health1	.0144996	.0068152	2.13	0.034	.0011136 .0278856
	Health1_t	.0177999	.0466398	0.38	0.703	-.073807 .1094068
	trade_n_real	5.55e-13	6.09e-14	9.12	0.000	4.35e-13 6.74e-13
	listed_dom~p	.0001293	.000037	3.49	0.001	.0000566 .000202
	_cons	-6.732624	5.014772	-1.34	0.180	-16.58231 3.117062

. hetttest

Breusch-Pagan / Cook-Weisberg test for heteroskedasticity

Ho: Constant variance  
 Variables: fitted values of logY\_real

chi2(1) = 1.85  
 Prob > chi2 = 0.1743

## HEALTH 2

### SPECIFICATION (2.1)

```
. xtreg logY_real logK_real logL lit_rate Health2, fe
```

Fixed-effects (within) regression	Number of obs =	589
Group variable (i): country	Number of groups =	97

R-sq: within = 0.6057	Obs per group: min =	1
between = 0.8195	avg =	6.1

```

overall = 0.8167                                max = 13
corr(u_i, Xb) = -0.3892                        F(4, 488) = 187.43
                                                Prob > F = 0.0000

```

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
logK_real	.3062068	.0237507	12.89	0.000	.2595406	.352873
logL	.8651951	.1067183	8.11	0.000	.6555111	1.074879
lit_rate	-.0041665	.0036828	-1.13	0.258	-.0114026	.0030695
Health2	.0176358	.0101306	1.74	0.082	-.0022693	.0375408
_cons	3.665579	1.348147	2.72	0.007	1.01669	6.314468
sigma_u	.79776541					
sigma_e	.10064747					
rho	.98433259	(fraction of variance due to u_i)				

```

F test that all u_i=0:      F(96, 488) = 233.20      Prob > F = 0.0000

```

```

. est store fixed
. xtreg logY_real logK_real logL lit_rate Health2, re

```

```

Random-effects GLS regression                Number of obs   =   589
Group variable (i): country                 Number of groups =   97

R-sq:  within = 0.5998                      Obs per group:  min =    1
        between = 0.8795                      avg           =   6.1
        overall = 0.8592                      max           =   13

```

```

Random effects u_i ~ Gaussian                Wald chi2(4)    = 1455.36
corr(u_i, X) = 0 (assumed)                  Prob > chi2     = 0.0000

```

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
logK_real	<b>.331103</b>	.0228867	14.47	<b>0.000</b>	.286246	.37596
logL	<b>.6177891</b>	.0401131	15.40	<b>0.000</b>	.5391688	.6964093
lit_rate	<b>.0045556</b>	.0020497	2.22	<b>0.026</b>	.0005383	.008573
Health2	<b>.0279658</b>	.00973	2.87	<b>0.004</b>	.0088954	.0470361
_cons	<b>6.023489</b>	.5305623	11.35	<b>0.000</b>	4.983606	7.063372
sigma_u	.57963087					
sigma_e	.10064747					
rho	.97073141	(fraction of variance due to u_i)				

```

. est store random
. hausman fixed random

```

	---- Coefficients ----			
	(b)	(B)	(b-B)	sqrt(diag(V_b-V_B))
	fixed	random	Difference	S.E.
logK_real	.3062068	.331103	-.0248962	.0063478
logL	.8651951	.6177891	.2474061	.0988925
lit_rate	-.0041665	.0045556	-.0087222	.0030597
Health2	.0176358	.0279658	-.01033	.0028209

```

b = consistent under Ho and Ha; obtained from xtreg
B = inconsistent under Ha, efficient under Ho; obtained from xtreg

```

Test: Ho: difference in coefficients not systematic

chi2(4) = (b-B)'[(V\_b-V\_B)^(-1)](b-B)  
 = 8.76  
 Prob>chi2 = 0.0674  
 (V\_b-V\_B is not positive definite)

. xtregar logY\_real logK\_real logL lit\_rate Health2, fe

FE (within) regression with AR(1) disturbances Number of obs = 492  
 Group variable (i): country Number of groups = 95  
 R-sq: within = 0.9928 Obs per group: min = 1  
 between = 0.8251 avg = 5.2  
 overall = 0.8232 max = 12  
 F(4,393) = 13597.07  
 corr(u\_i, Xb) = -0.6327 Prob > F = 0.0000

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
logK_real	.0471319	.0216086	2.18	0.030	.004649	.0896149
logL	1.286217	.0388606	33.10	0.000	1.209816	1.362618
lit_rate	.0344647	.0048545	7.10	0.000	.0249207	.0440087
Health2	.0173389	.0086169	2.01	0.045	.0003979	.0342799
_cons	.4703239	.0172344	27.29	0.000	.4364407	.5042072
rho_ar	.8736307					
sigma_u	.94788993					
sigma_e	.05877118					
rho_fov	.99617046	(fraction of variance due to u_i)				

F test that all u\_i=0: F(94,393) = 18.98 Prob > F = 0.0000

. xi: reg logY\_real logK\_real logL lit\_rate Health2 i.country  
 i.country \_Icountry\_1-135 (naturally coded; \_Icountry\_1 omitted)

Source	SS	df	MS	Number of obs =	589
Model	1763.131	100	17.63131	F(100, 488) =	1740.52
Residual	4.94339722	488	.010129912	Prob > F =	0.0000
				R-squared =	0.9972
				Adj R-squared =	0.9966
Total	1768.0744	588	3.00692924	Root MSE =	.10065

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
logK_real	.3062068	.0237507	12.89	0.000	.2595406	.352873
logL	.8651951	.1067183	8.11	0.000	.6555111	1.074879
lit_rate	-.0041665	.0036828	-1.13	0.258	-.0114026	.0030695
Health2	.0176358	.0101306	1.74	0.082	-.0022693	.0375408
.....						
.....						
_cons	3.391146	1.239671	2.74	0.006	.9553935	5.826898

. hettest

Breusch-Pagan / Cook-Weisberg test for heteroskedasticity  
 Ho: Constant variance  
 Variables: fitted values of logY\_real

chi2(1) = 17.54  
 Prob > chi2 = 0.0000

**SPECIFICATION (2.2)**

**. xtreg logY\_real logK\_real logL lit\_rate Health2 trade\_n\_real, fe**

Fixed-effects (within) regression  
 Group variable (i): year

Number of obs = 572  
 Number of groups = 14

R-sq: within = 0.8784  
 between = 0.8179  
 overall = 0.8793

Obs per group: min = 9  
 avg = 40.9  
 max = 93

F(5,553) = 798.92  
 Prob > F = 0.0000

corr(u\_i, Xb) = -0.1642

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
logK_real	.3764023	.0362381	10.39	0.000	.3052212	.4475834
logL	.5309345	.0408864	12.99	0.000	.4506228	.6112461
lit_rate	-.0002319	.0024198	-0.10	0.924	-.0049851	.0045213
Health2	.1444168	.0270738	5.33	0.000	.0912367	.1975969
trade_n_real	1.07e-12	2.27e-13	4.69	0.000	6.19e-13	1.51e-12
_cons	6.675983	.4901596	13.62	0.000	5.713181	7.638785
sigma_u	.18013086					
sigma_e	.60248121					
rho	.08205515	(fraction of variance due to u_i)				

F test that all u\_i=0: F(13, 553) = 1.94 Prob > F = 0.0233

. est store fixed

**. xtreg logY\_real logK\_real logL lit\_rate Health2 trade\_n\_real, re**

Random-effects GLS regression  
 Group variable (i): year

Number of obs = 572  
 Number of groups = 14

R-sq: within = 0.8782  
 between = 0.8202  
 overall = 0.8798

Obs per group: min = 9  
 avg = 40.9  
 max = 93

Random effects u\_i ~ Gaussian  
 Wald chi2(5) = 1868.28  
 corr(u\_i, X) = 0 (assumed)  
 Prob > chi2 = 0.0000

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
logK_real	.3722195	.0360722	10.32	0.000	.3015193	.4429196
logL	.5343432	.040952	13.05	0.000	.4540789	.6146076
lit_rate	-.0005812	.0024105	-0.24	0.809	-.0053057	.0041433
Health2	.1317087	.0268551	4.90	0.000	.0790737	.1843438
trade_n_real	1.01e-12	2.28e-13	4.41	0.000	5.59e-13	1.45e-12
_cons	6.757474	.4858808	13.91	0.000	5.805165	7.709783
sigma_u	.05189548					
sigma_e	.60248121					
rho	.00736481	(fraction of variance due to u_i)				

. est store random

. hausman fixed random

Note: the rank of the differenced variance matrix (4) does not equal the number of coefficients being tested (5); be sure this is what you expect, or there may be problems computing the test. Examine the output of your estimators for anything unexpected and possibly consider scaling your variables so that the coefficients are on a similar scale.

---- Coefficients ----				
	(b)	(B)	(b-B)	sqrt(diag(V_b-V_B))
	fixed	random	Difference	S.E.
logK_real	.3764023	.3722195	.0041828	.0034635
logL	.5309345	.5343432	-.0034088	.
lit_rate	-.0002319	-.0005812	.0003493	.0002123
Health2	.1444168	.1317087	.012708	.0034344
trade_n_real	1.07e-12	1.01e-12	5.92e-14	.

b = consistent under Ho and Ha; obtained from xtreg  
 B = inconsistent under Ha, efficient under Ho; obtained from xtreg

Test: Ho: difference in coefficients not systematic

chi2(4) = (b-B)'[(V\_b-V\_B)^(-1)](b-B)  
 = -9.74 chi2<0 ==> model fitted on these data fails to meet the asymptotic assumptions of the Hausman test; see suest for a generalized test

. xtregar logY\_real logK\_real logL lit\_rate Health2 trade\_n\_real, fe

FE (within) regression with AR(1) disturbances Number of obs = 558  
 Group variable (i): year Number of groups = 14  
 R-sq: within = 0.9618 Obs per group: min = 8  
 between = 0.9347 avg = 39.9  
 overall = 0.8583 max = 92  
 F(5,539) = 2710.75  
 corr(u\_i, Xb) = -0.2612 Prob > F = 0.0000

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
logK_real	.6700915	.0313507	21.37	0.000	.608507	.731676
logL	.4847788	.0435895	11.12	0.000	.3991526	.5704051
lit_rate	.0049798	.0025578	1.95	0.052	-.0000447	.0100043
Health2	.0353893	.0277155	1.28	0.202	-.0190542	.0898329
trade_n_real	-6.04e-13	2.09e-13	-2.89	0.004	-1.01e-12	-1.94e-13
_cons	-.559797	.1495513	-3.74	0.000	-.8535719	-.2660221
rho_ar	.4743161					
sigma_u	.21931357					
sigma_e	.67877575					
rho_fov	.0945266	(fraction of variance due to u_i)				

F test that all u\_i=0: F(13,539) = -6.17 Prob > F = 1.0000

. xi: reg logY\_real logK\_real logL lit\_rate Health2 trade\_n\_real i.country

```

i.country      _Icountry_1-135      (naturally coded; _Icountry_1 omitted)

Source |           SS          df           MS                Number of obs =      572
-----+-----
Model |    1742.63305        100    17.4263305          F(100, 471) = 2137.84
Residual |    3.8392939         471     .008151367          Prob > F      = 0.0000
-----+-----
Total |    1746.47235        571    3.05862057          R-squared     = 0.9978
                                           Adj R-squared = 0.9973
                                           Root MSE     = .09028

```

```

-----+-----
logY_real |           Coef.      Std. Err.      t    P>|t|      [95% Conf. Interval]
-----+-----
logK_real |    .2460528      .0222765     11.05  0.000     .2022791     .2898265
logL      |    .8952442      .0985404     9.09   0.000     .7016109     1.088877
lit_rate  |   -.0063832      .003346     -1.91  0.057    -.0129581     .0001918
Health2   |    .0142215      .0091208     1.56   0.120    -.0037011     .0321441
trade_n_real |  5.72e-13      7.66e-14     7.48   0.000     4.22e-13     7.23e-13
-----+-----
_cons    |    4.55814      1.145817     3.98   0.000     2.306594     6.809686
-----+-----

```

```
. hetttest
```

```
Breusch-Pagan / Cook-Weisberg test for heteroskedasticity
```

```
Ho: Constant variance
```

```
Variables: fitted values of logY_real
```

```
chi2(1)      =    26.41
```

```
Prob > chi2  =    0.0000
```

### SPECIFICATION (2.3)

```
. xtreg logY_real logK_real logL lit_rate Health2 trade_n_real listed_dom_comp, fe
```

```
Fixed-effects (within) regression
```

```
Group variable (i): year
```

```
Number of obs      =    377
```

```
Number of groups   =    14
```

```
R-sq:  within = 0.8886
```

```
between = 0.2271
```

```
overall = 0.8793
```

```
Obs per group:  min =    5
```

```
avg =   26.9
```

```
max =    64
```

```
corr(u_i, Xb) = -0.0412
```

```
F(6, 357)      =   474.78
```

```
Prob > F      =    0.0000
```

```
-----+-----
logY_real |           Coef.      Std. Err.      t    P>|t|      [95% Conf. Interval]
-----+-----
logK_real |    .4606687      .0438145    10.51  0.000     .3745017     .5468357
logL      |    .420689       .0512827     8.20   0.000     .3198347     .5215432
lit_rate  |   -.0000517      .0029676    -0.02  0.986    -.0058879     .0057845
Health2   |    .0778933      .0392242     1.99   0.048     .0007537     .1550329
trade_n_real |  4.69e-13      2.34e-13     2.01   0.046     9.33e-15     9.28e-13
listed_dom~p | .0006773      .0001678     4.04   0.000     .0003473     .0010073
_cons    |    6.287062      .604789     10.40  0.000     5.097665     7.476459
-----+-----
sigma_u   |    .20982949
sigma_e   |    .53158974
rho       |    .13480174      (fraction of variance due to u_i)
-----+-----

```

```
F test that all u_i=0:      F(13, 357) =    2.58
```

```
Prob > F = 0.0020
```

```
. est store fixed
```

```
. xtreg logY_real logK_real logL lit_rate Health2 trade_n_real listed_dom_comp,
re
```

```
Random-effects GLS regression           Number of obs   =       377
Group variable (i): year                Number of groups =        14

R-sq:  within = 0.8880                  Obs per group:  min =         5
      between = 0.2664                      avg =       26.9
      overall = 0.8801                      max =        64

Random effects u_i ~ Gaussian           Wald chi2(6)     =    1169.14
corr(u_i, X) = 0 (assumed)              Prob > chi2      =     0.0000
```

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
logK_real	.4510351	.0443609	10.17	0.000	.3640893	.5379809
logL	.427025	.0522	8.18	0.000	.324715	.5293351
lit_rate	.0007375	.0030132	0.24	0.807	-.0051682	.0066433
Health2	.0327033	.0377143	0.87	0.386	-.0412155	.106622
trade_n_real	4.63e-13	2.38e-13	1.95	0.052	-3.11e-15	9.29e-13
listed_dom~p	.0006654	.0001707	3.90	0.000	.0003309	.001
_cons	6.373408	.6133378	10.39	0.000	5.171288	7.575528
sigma_u	0					
sigma_e	.53158974					
rho	0	(fraction of variance due to u_i)				

```
. est store random
```

```
. hausman fixed random
```

Note: the rank of the differenced variance matrix (5) does not equal the number of coefficients being tested (6); be sure this is what you expect, or there may be problems computing the test. Examine the output of your estimators for anything unexpected and possibly consider scaling your variables so that the coefficients are on a similar scale.

	(b)	(B)	(b-B)	sqrt(diag(V_b-V_B))
	fixed	random	Difference	S.E.
logK_real	.4606687	.4510351	.0096336	.
logL	.420689	.427025	-.0063361	.
lit_rate	-.0000517	.0007375	-.0007892	.
Health2	.0778933	.0327033	.04519	.0107782
trade_n_real	4.69e-13	4.63e-13	5.62e-15	.
listed_dom~p	.0006773	.0006654	.0000119	.

b = consistent under Ho and Ha; obtained from xtreg  
B = inconsistent under Ha, efficient under Ho; obtained from xtreg

Test: Ho: difference in coefficients not systematic

```
chi2(5) = (b-B)'[(V_b-V_B)^(-1)](b-B)
= -8.30 chi2<0 ==> model fitted on these
data fails to meet the asymptotic
assumptions of the Hausman test;
see suest for a generalized test
```

```
. xtregar logY_real logK_real logL lit_rate Health2 trade_n_real
listed_dom_comp, f
> e
```

```
FE (within) regression with AR(1) disturbances      Number of obs      =      363
Group variable (i): year                          Number of groups   =      14

R-sq:  within = 0.9801                            Obs per group: min =      4
        between = 0.3856                            avg =      25.9
        overall = 0.8612                            max =      63

corr(u_i, Xb) = -0.0715                            F(6,343)           =      2821.09
                                                Prob > F           =      0.0000
```

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
logK_real	.7210841	.0388063	18.58	0.000	.6447559	.7974123
logL	.4264152	.0551969	7.73	0.000	.3178482	.5349822
lit_rate	.0049811	.0032192	1.55	0.123	-.0013508	.011313
Health2	.0458596	.0421118	1.09	0.277	-.0369703	.1286895
trade_n_real	-8.11e-13	1.99e-13	-4.07	0.000	-1.20e-12	-4.19e-13
listed_dom~p	.0001514	.0001919	0.79	0.431	-.000226	.0005289
_cons	-1.076761	.1412118	-7.63	0.000	-1.354511	-.799011
rho_ar	.52127343					
sigma_u	.23967882					
sigma_e	.57199006					
rho_fov	.14935821	(fraction of variance due to u_i)				

```
F test that all u_i=0:      F(13,343) =      -2.31          Prob > F = 1.0000
```

```
. xtregar logY_real logK_real logL lit_rate Health2 trade_n_real
listed_dom_comp, r
> e
```

```
RE GLS regression with AR(1) disturbances      Number of obs      =      377
Group variable (i): year                          Number of groups   =      14

R-sq:  within = 0.8876                            Obs per group: min =      5
        between = 0.2539                            avg =      26.9
        overall = 0.8790                            max =      64

corr(u_i, Xb) = 0 (assumed)                        Wald chi2(7)       =      1344.07
                                                Prob > chi2        =      0.0000
```

theta				
min	5%	median	95%	max
0.0133	0.0269	0.0626	0.0890	0.0890

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
logK_real	.510248	.0425951	11.98	0.000	.4267632	.5937328
logL	.4244051	.0508198	8.35	0.000	.3248001	.5240101
lit_rate	.0009832	.0029864	0.33	0.742	-.00487	.0068364
Health2	.046926	.0379726	1.24	0.217	-.027499	.1213509
trade_n_real	2.25e-13	2.24e-13	1.01	0.313	-2.13e-13	6.64e-13
listed_dom~p	.0005702	.0001745	3.27	0.001	.0002282	.0009122
_cons	4.915761	.5971431	8.23	0.000	3.745382	6.08614
rho_ar	.52127343	(estimated autocorrelation coefficient)				

```

sigma_u | .04964459
sigma_e | .53187481
rho_fov | .0086369 (fraction of variance due to u_i)

```

```

-----
. xi: reg logY_real logK_real logL lit_rate Health2 trade_n_real
listed_dom_comp i.
> country
i.country          _Icountry_1-135      (naturally coded; _Icountry_1 omitted)

      Source |           SS          df           MS              Number of obs =       377
-----+-----+-----+-----+-----+-----+-----
      Model |    919.311169         72    12.7682107          F( 72,  304) = 2734.85
      Residual |    1.41928642        304     .004668705          Prob > F      = 0.0000
-----+-----+-----+-----+-----+-----
      Total |    920.730455        376     2.44875121          R-squared      = 0.9985
                                          Adj R-squared = 0.9981
                                          Root MSE      = .06833

```

```

-----
      logY_real |           Coef.      Std. Err.      t    P>|t|      [95% Conf. Interval]
-----+-----+-----+-----+-----+-----
      logK_real |     .1848404      .0236473       7.82   0.000     .1383074     .2313735
           logL |     1.084335      .1013791      10.70   0.000     .884842     1.283829
           lit_rate |    -.0057686      .0043047      -1.34   0.181    -.0142393     .0027021
           Health2 |     .0084105      .0120871       0.70   0.487    -.0153744     .0321955
trade_n_real |    4.78e-13      7.48e-14       6.39   0.000     3.31e-13     6.25e-13
listed_dom~p |     .0000602      .0000416       1.45   0.149    -.0000216     .000142
-----+-----+-----+-----+-----+-----
      _cons |     5.224042      1.011626       5.16   0.000     3.233366     7.214719
-----

```

```
. hetttest
```

```

Breusch-Pagan / Cook-Weisberg test for heteroskedasticity
Ho: Constant variance
Variables: fitted values of logY_real

      chi2(1)      =      8.64
      Prob > chi2   =     0.0033

```

**SPECIFICATION (2.4)**

```

xtreg logY_real logK_real logL lit_rate lit_rate_t Health2 Health2_t
trade_n_rea
> l listed_dom_comp, fe

```

```

Fixed-effects (within) regression              Number of obs   =       377
Group variable (i): year                       Number of groups =       14

R-sq:  within = 0.9193                          Obs per group:  min =        5
        between = 0.6342                          avg =       26.9
        overall = 0.9162                          max =       64

corr(u_i, Xb) = -0.0011                          F(8, 355)       =       505.70
                                                Prob > F        =       0.0000

```

```

-----
      logY_real |           Coef.      Std. Err.      t    P>|t|      [95% Conf. Interval]
-----+-----+-----+-----+-----+-----
      logK_real |     .5433558      .0380795     14.27   0.000     .4684661     .6182456
           logL |     .3812284      .043912     8.68    0.000     .294868     .4675888
           lit_rate |     .0048449      .0025681     1.89    0.060    -.0002057     .0098954
      lit_rate_t |    -.0112317      .0018149    -6.19   0.000    -.0148011    -.0076623
           Health2 |     .105868      .0338899     3.12    0.002     .0392177     .1725182
-----

```

```

Health2_t | .387154 .2012147 1.92 0.055 -.0085688 .7828768
trade_n_real | 2.62e-13 2.01e-13 1.31 0.193 -1.33e-13 6.57e-13
listed_dom~p | .0001917 .0001497 1.28 0.201 -.0001028 .0004861
_cons | 4.61846 .5365894 8.61 0.000 3.563167 5.673754

```

```

-----
sigma_u | .12202986
sigma_e | .45371265
rho | .06745878 (fraction of variance due to u_i)
-----

```

```

F test that all u_i=0: F(13, 355) = 1.34 Prob > F = 0.1865

```

```
. est store fixed
```

```
. xtreg logY_real logK_real logL lit_rate lit_rate_t Health2 Health2_t
trade_n_rea
> l listed_dom_comp, re
```

```

Random-effects GLS regression           Number of obs   =       377
Group variable (i): year                 Number of groups =        14

R-sq:  within = 0.9189                   Obs per group:  min =         5
      between = 0.7058                               avg =       26.9
      overall  = 0.9167                               max =        64

```

```

Random effects u_i ~ Gaussian           Wald chi2(8)     =    1835.73
corr(u_i, X) = 0 (assumed)             Prob > chi2      =         0.0000

```

```

-----
logY_real |      Coef.   Std. Err.    z    P>|z|    [95% Conf. Interval]
-----+-----
logK_real |   .5415512   .0377629   14.34  0.000    .4675372   .6155651
logL      |   .3851469   .0437592    8.80  0.000    .2993804   .4709134
lit_rate  |   .005531    .0025486    2.17  0.030    .0005358   .0105262
lit_rate_t | -.0110062   .0017875   -6.16  0.000   -.0145097  -.0075027
Health2   |   .0880268   .032282    2.73  0.006    .0247553   .1512984
Health2_t |   .2894135   .1969039    1.47  0.142   -.096511   .675338
trade_n_real | 2.44e-13 2.00e-13 1.22 0.223 -1.49e-13 6.37e-13
listed_dom~p | .0001414 .0001487 0.95 0.342 -.0001501 .0004329
_cons    | 4.568822   .5324632    8.58  0.000    3.525214   5.612431

```

```

-----
sigma_u |      0
sigma_e | .45371265
rho |      0 (fraction of variance due to u_i)
-----

```

```
. est store random
```

```
. hausman fixed random
```

Note: the rank of the differenced variance matrix (7) does not equal the number of

coefficients being tested (8); be sure this is what you expect, or there may be problems computing the test. Examine the output of your estimators for anything unexpected and possibly consider scaling your variables so that the coefficients are on a similar scale.

```

----- Coefficients -----
|      (b)      (B)      (b-B)      sqrt(diag(V_b-V_B))
|      fixed    random    Difference      S.E.
-----+-----
logK_real |   .5433558   .5415512   .0018047   .0049001

```

```

      logL |      .3812284      .3851469      -.0039185      .0036599
      lit_rate |      .0048449      .005531      -.0006861      .0003157
      lit_rate_t |     -.0112317     -.0110062     -.0002255      .0003143
      Health2 |      .105868      .0880268      .0178411      .0103151
      Health2_t |      .387154      .2894135      .0977405      .0414275
      trade_n_real |     2.62e-13     2.44e-13     1.83e-14     1.63e-14
      listed_dom~p |     .0001917     .0001414     .0000503     .0000174

```

-----  
b = consistent under Ho and Ha; obtained from xtreg  
B = inconsistent under Ha, efficient under Ho; obtained from xtreg

Test: Ho: difference in coefficients not systematic

chi2(7) = (b-B)'[(V\_b-V\_B)^(-1)](b-B)  
= 14.18  
Prob>chi2 = 0.0481  
(V\_b-V\_B is not positive definite)

```

xtregar logY_real logK_real logL lit_rate lit_rate_t Health2 Health2_t
trade_n_r
> eal listed_dom_comp, fe

```

FE (within) regression with AR(1) disturbances Number of obs = 363  
Group variable (i): year Number of groups = 14

R-sq: within = 0.9891 Obs per group: min = 4  
between = 0.7611 avg = 25.9  
overall = 0.9050 max = 63

corr(u\_i, Xb) = -0.0371 F(8,341) = 3874.13  
Prob > F = 0.0000

```

-----+-----
      logY_real |      Coef.   Std. Err.   t   P>|t|   [95% Conf. Interval]
-----+-----
      logK_real |     .7095302   .0297211   23.87  0.000   .6510704   .76799
      logL |     .4427138   .0420214   10.54  0.000   .3600601   .5253675
      lit_rate |     .0102592   .0025215    4.07  0.000   .0052995   .0152189
      lit_rate_t |    -.0117067   .0018139   -6.45  0.000   -.0152745  -.0081388
      Health2 |     .1299957   .0327665    3.97  0.000   .0655458   .1944455
      Health2_t |     .1178829   .2048449    0.58  0.565   -.2850358   .5208015
      trade_n_real |    -6.61e-13   1.50e-13   -4.41  0.000   -9.56e-13  -3.66e-13
      listed_dom~p |    -.0004998   .0001553   -3.22  0.001   -.0008053  -.0001944
      _cons |    -1.367242   .0843699  -16.21  0.000   -1.533193  -1.201291
-----+-----

```

```

      rho_ar |     .65897364
      sigma_u |     .13233433
      sigma_e |     .43984682
      rho_fov |     .08300585   (fraction of variance due to u_i)

```

F test that all u\_i=0: F(13,341) = -0.10 Prob > F = 1.0000

```

. xi: reg logY_real logK_real logL lit_rate lit_rate_t Health2 Health2_t
trade_n_r
> eal listed_dom_comp i.country, robust
i.country      _Icountry_1-135   (naturally coded; _Icountry_1 omitted)

```

Regression with robust standard errors Number of obs = 377  
F( 68, 302) = .  
Prob > F = .  
R-squared = 0.9985  
Root MSE = .06691



```

Health4 | .0268595 .0162315 1.65 0.099 -.0050726 .0587916
_cons | 5.141076 1.909609 2.69 0.007 1.38432 8.897831
-----+-----
sigma_u | .8079611
sigma_e | .10452416
rho | .98353945 (fraction of variance due to u_i)
-----+-----
F test that all u_i=0: F(95, 325) = 140.09 Prob > F = 0.0000

```

```
. est store fixed
```

```
. xtreg logY_real logK_real logL lit_rate Health4, re
```

```

Random-effects GLS regression           Number of obs   =       425
Group variable (i): year                Number of groups =        14

R-sq:  within = 0.8847                  Obs per group: min =         3
      between = 0.8567                  avg =              30.4
      overall  = 0.8826                  max =              93

Random effects u_i ~ Gaussian           Wald chi2(4)    =    3156.70
corr(u_i, X) = 0 (assumed)              Prob > chi2     =     0.0000

```

```

-----+-----
logY_real |      Coef.   Std. Err.      z    P>|z|     [95% Conf. Interval]
-----+-----
logK_real |   .252017   .0420023     6.00   0.000    .1696939   .3343401
logL      |   .7291325  .0459474    15.87   0.000    .6390773   .8191877
lit_rate  |  -.0066364  .002744     -2.42   0.016   -.0120145  -.0012583
Health4   |   .2532776  .0286512     8.84   0.000    .1971223   .309433
_cons     |   7.420308  .5185111    14.31   0.000    6.404045   8.436571
-----+-----
sigma_u   |           0
sigma_e   |   .58283272
rho       |           0 (fraction of variance due to u_i)
-----+-----

```

```
. est store random
```

```
. hausman fixed random
```

```

-----+-----
---- Coefficients ----
      |      (b)      (B)      (b-B)      sqrt(diag(V_b-V_B))
      |      fixed    random    Difference      S.E.
-----+-----
logK_real |   .2830601   .252017   .0310431   .0086929
logL      |   .696687   .7291325  -.0324455   .0077473
lit_rate  |  -.0057209  -.0066364   .0009155   .
Health4   |   .2578014   .2532776   .0045238   .
-----+-----

```

b = consistent under Ho and Ha; obtained from xtreg  
B = inconsistent under Ha, efficient under Ho; obtained from xtreg

Test: Ho: difference in coefficients not systematic

```

chi2(4) = (b-B)'[(V_b-V_B)^(-1)](b-B)
        = 9.03
Prob>chi2 = 0.0603
(V_b-V_B is not positive definite)

```

```
. xtregar logY_real logK_real logL lit_rate Health4, fe
```

```
FE (within) regression with AR(1) disturbances Number of obs = 411
```



```

overall = 0.8952                                max = 92
corr(u_i, Xb) = -0.1582                        F(5,395) = 703.82
                                                Prob > F = 0.0000

```

```

-----+-----
logY_real |      Coef.   Std. Err.    t    P>|t|    [95% Conf. Interval]
-----+-----
logK_real |   .2594821   .041462    6.26  0.000    .1779682   .3409959
logL      |   .6226619   .0457576   13.61  0.000    .5327029   .7126208
lit_rate  |  -.0045919   .0026169   -1.75  0.080   -.0097367   .000553
Health4   |   .2267043   .0278141    8.15  0.000    .1720221   .2813865
trade_n_real |  1.87e-12   3.01e-13    6.20  0.000    1.28e-12   2.46e-12
_cons     |   8.555457   .5780096   14.80  0.000    7.419097   9.691817
-----+-----
sigma_u   |   .21431999
sigma_e   |   .5524853
rho       |   .13079892   (fraction of variance due to u_i)
-----+-----

```

```

F test that all u_i=0:      F(13, 395) = 2.46      Prob > F = 0.0032

```

```
. est store fixed
```

```
. xtreg logY_real logK_real logL lit_rate Health4 trade_n_real, re
```

```

Random-effects GLS regression                Number of obs   = 414
Group variable (i): year                    Number of groups = 14

```

```

R-sq:  within = 0.8987                      Obs per group: min = 3
        between = 0.8574                      avg = 29.6
        overall = 0.8962                      max = 92

```

```

Random effects u_i ~ Gaussian                Wald chi2(5)    = 1523.11
corr(u_i, X) = 0 (assumed)                  Prob > chi2     = 0.0000

```

```

-----+-----
logY_real |      Coef.   Std. Err.    z    P>|z|    [95% Conf. Interval]
-----+-----
logK_real |   .2425085   .0408336    5.94  0.000    .1624762   .3225408
logL      |   .6401031   .0453314   14.12  0.000    .5512552   .728951
lit_rate  |  -.0051527   .0026337   -1.96  0.050   -.0103146   9.23e-06
Health4   |   .2217366   .0278361    7.97  0.000    .1671789   .2762943
trade_n_real |  1.88e-12   3.03e-13    6.20  0.000    1.28e-12   2.47e-12
_cons     |   8.743644   .5763236   15.17  0.000    7.614071   9.873218
-----+-----
sigma_u   |   .06275033
sigma_e   |   .5524853
rho       |   .01273573   (fraction of variance due to u_i)
-----+-----

```

```
. est store random
```

```
. hausman fixed random
```

Note: the rank of the differenced variance matrix (4) does not equal the number of

coefficients being tested (5); be sure this is what you expect, or there

may be problems computing the test. Examine the output of your estimators

for anything unexpected and possibly consider scaling your variables so that the coefficients are on a similar scale.



logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
logK_real	.2164128	.0285638	7.58	0.000	.1602121	.2726134
logL	.8275381	.1389414	5.96	0.000	.5541642	1.100912
lit_rate	-.0059909	.0042749	-1.40	0.162	-.0144019	.00242
Health4	.0227176	.0149117	1.52	0.129	-.0066218	.052057
trade_n_real	6.21e-13	1.08e-13	5.75	0.000	4.09e-13	8.34e-13
_cons	6.210222	1.651116	3.76	0.000	2.961572	9.458872

**SPECIFICATION (3.3)**

```
. xtreg logY_real logK_real logL lit_rate Health4 trade_n_real listed_dom_comp,
fe
```

```
Fixed-effects (within) regression      Number of obs      =      250
Group variable (i): year              Number of groups   =      14

R-sq:  within = 0.8939                 Obs per group: min =      1
      between = 0.9519                 avg               =     17.9
      overall  = 0.8844                 max               =     63

corr(u_i, Xb) = 0.0588                 F(6, 230)          =     322.90
                                         Prob > F            =     0.0000
```

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
logK_real	.3039242	.0596471	5.10	0.000	.1863997	.4214488
logL	.559021	.0664425	8.41	0.000	.4281073	.6899347
lit_rate	-.0036707	.0036053	-1.02	0.310	-.0107744	.003433
Health4	.1869534	.0438602	4.26	0.000	.1005342	.2733726
trade_n_real	1.28e-12	3.43e-13	3.75	0.000	6.09e-13	1.96e-12
listed_dom~p	.0006186	.0002187	2.83	0.005	.0001877	.0010495
_cons	8.386773	.8391087	9.99	0.000	6.733451	10.0401
sigma_u	.32312436					
sigma_e	.52900128					
rho	.27172124	(fraction of variance due to u_i)				

```
F test that all u_i=0:      F(13, 230) =      2.35      Prob > F = 0.0058
```

```
. est store fixed
```

```
. xtreg logY_real logK_real logL lit_rate Health4 trade_n_real listed_dom_comp,
re
```

```
Random-effects GLS regression      Number of obs      =      250
Group variable (i): year              Number of groups   =      14

R-sq:  within = 0.8933                 Obs per group: min =      1
      between = 0.9571                 avg               =     17.9
      overall  = 0.8852                 max               =     63

Random effects u_i ~ Gaussian        Wald chi2(6)       =     725.71
corr(u_i, X) = 0 (assumed)           Prob > chi2        =     0.0000
```

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
logK_real	<b>.3075167</b>	.0590409	5.21	0.000	.1917986	.4232348

```

      logL |   .5654373   .0665772   8.49   0.000   .4349484   .6959262
    lit_rate |  -.0036252   .0036973  -0.98   0.327  -.0108718   .0036213
    Health4 |   .1556393   .0434301   3.58   0.000   .0705179   .2407608
 trade_n_real |  1.30e-12   3.48e-13   3.74   0.000   6.21e-13   1.98e-12
 listed_dom~p |  .0006163   .0002211   2.79   0.005   .0001829   .0010497
      _cons |  8.192264   .8415011   9.74   0.000   6.542952   9.841576
-----+-----
      sigma_u |           0
      sigma_e |   .52900128
      rho |           0   (fraction of variance due to u_i)
-----+-----

```

```
. est store random
```

```
. hausman fixed random
```

Note: the rank of the differenced variance matrix (5) does not equal the number of coefficients being tested (6); be sure this is what you expect, or there may be problems computing the test. Examine the output of your estimators for anything unexpected and possibly consider scaling your variables so that the coefficients are on a similar scale.

```

      ---- Coefficients ----
      |      (b)      (B)      (b-B)      sqrt(diag(V_b-V_B))
      |      fixed      random      Difference      S.E.
-----+-----
    logK_real |   .3039242   .3075167   -.0035924   .0084819
      logL |   .559021   .5654373   -.0064163   .
    lit_rate |  -.0036707  -.0036252   -.0000454   .
    Health4 |   .1869534   .1556393   .0313141   .0061275
 trade_n_real |  1.28e-12   1.30e-12  -1.90e-14   .
 listed_dom~p |   .0006186   .0006163   2.24e-06   .
-----+-----

```

b = consistent under Ho and Ha; obtained from xtreg  
B = inconsistent under Ha, efficient under Ho; obtained from xtreg

Test: Ho: difference in coefficients not systematic

```

chi2(5) = (b-B)'[(V_b-V_B)^(-1)](b-B)
        =  -89.89   chi2<0 ==> model fitted on these
                        data fails to meet the asymptotic
                        assumptions of the Hausman test;
                        see suest for a generalized test

```

Random will be more preferable at this point.

```
. xtregar logY_real logK_real logL lit_rate Health4 trade_n_real
listed_dom_comp, r
> e
```

```

RE GLS regression with AR(1) disturbances      Number of obs      =      250
Group variable (i): year                      Number of groups   =      14

```

```

R-sq:  within = 0.8898      Obs per group: min =      1
       between = 0.9503      avg =      17.9
       overall = 0.8811     max =      63

```

```

corr(u_i, Xb) = 0 (assumed)      Wald chi2(7)      =      875.31
                                   Prob > chi2      =      0.0000

```

```
-----+----- theta -----+-----
```

```

min      5%      median      95%      max
0.0000  0.0000  0.0000  0.0000  0.0000

```

```

-----+-----
logY_real |      Coef.  Std. Err.      z    P>|z|      [95% Conf. Interval]
-----+-----
logK_real |   .4205688   .0531809    7.91   0.000    .3163361   .5248015
logL      |   .4583808   .0612376    7.49   0.000    .3383573   .5784042
lit_rate  |  -.0022302   .0032599   -0.68   0.494   -.0086194   .004159
Health4   |   .1115769   .0388434    2.87   0.004    .0354451   .1877087
trade_n_real |  6.09e-13  3.01e-13    2.02   0.043    1.89e-14   1.20e-12
listed_dom~p | .0006923   .0002208    3.14   0.002    .0002596   .0011251
_cons     |   6.893492   .7686585    8.97   0.000    5.386949   8.400035
-----+-----
rho_ar    |   .74004531  (estimated autocorrelation coefficient)
sigma_u   |           0
sigma_e   |   .4784402
rho_fov   |           0  (fraction of variance due to u_i)
-----+-----

```

Checking for heteroskedasticity:

```

. xi: reg logY_real logK_real logL lit_rate Health4 trade_n_real
listed_dom_comp i.
> country
i.country      _Icountry_1-135      (naturally coded; _Icountry_1 omitted)

```

```

-----+-----
Source |      SS      df      MS      Number of obs =      250
-----+-----
Model |  634.414145    71  8.93541049  F( 71, 178) = 1830.98
Residual | .868662771   178  .004880128  Prob > F      = 0.0000
-----+-----
Total |  635.282808   249  2.55133658  R-squared     = 0.9986
Adj R-squared = 0.9981
Root MSE     = .06986

```

```

-----+-----
logY_real |      Coef.  Std. Err.      t    P>|t|      [95% Conf. Interval]
-----+-----
logK_real |   .1284241   .0321456    4.00   0.000    .0649886   .1918597
logL      |   .9003557   .1563332    5.76   0.000    .5918506   1.208861
lit_rate  |   .000965    .0060476    0.16   0.873   -.0109691   .0128991
Health4   |   .0252084   .0200474    1.26   0.210   -.0143527   .0647694
trade_n_real |  5.73e-13  9.52e-14    6.02   0.000    3.85e-13   7.61e-13
listed_dom~p | .0000392   .0000492    0.80   0.426   -.0000578   .0001363
_cons     |   7.415001   1.797256    4.13   0.000    3.86833    10.96167
-----+-----

```

```
. hettest
```

Breusch-Pagan / Cook-Weisberg test for heteroskedasticity

Ho: Constant variance  
Variables: fitted values of logY\_real

```

chi2(1)      =      6.81
Prob > chi2  =      0.0091

```

**SPECIFICATION (3.4)**

```

xtreg logY_real logK_real logL lit_rate lit_rate_t Health4 Health4_t
trade_n_real
> listed_dom_comp, fe

```

```

Fixed-effects (within) regression      Number of obs      =      250
Group variable (i): year                Number of groups   =      14
R-sq:  within = 0.9278                  Obs per group:    min =      1

```

```

        between = 0.9858          avg =      17.9
        overall = 0.9258          max =       63

corr(u_i, Xb) = 0.0889          F(8, 228)      =      366.43
                                Prob > F        =      0.0000

```

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
logK_real	<b>.4107209</b>	.0504807	8.14	0.000	.3112526	.5101892
logL	<b>.5203793</b>	.0551585	9.43	0.000	.4116938	.6290649
lit_rate	.0037558	.0030736	1.22	0.223	-.0023005	.0098121
lit_rate_t	-.0166738	.0024314	-6.86	0.000	-.0214647	-.0118829
Health4	.151061	.0366823	4.12	0.000	.0787813	.2233408
Health4_t	.863144	.2258249	3.82	0.000	.4181734	1.308115
trade_n_real	7.79e-13	2.91e-13	2.68	0.008	2.06e-13	1.35e-12
listed_dom~p	.0001289	.0001872	0.69	0.492	-.0002399	.0004978
_cons	5.928442	.7353055	8.06	0.000	4.479579	7.377305
sigma_u	.17408118					
sigma_e	.43814733					
rho	.13633534	(fraction of variance due to u_i)				

```

F test that all u_i=0:      F(13, 228) =      1.28          Prob > F = 0.2263

```

```
. est store fixed
```

```
. xtreg logY_real logK_real logL lit_rate lit_rate_t Health4 Health4_t
trade_n_real
> listed_dom_comp, re
```

```

Random-effects GLS regression          Number of obs      =      250
Group variable (i): year              Number of groups   =      14

R-sq:  within = 0.9276                Obs per group: min =      1
      between = 0.9880                  avg =      17.9
      overall = 0.9261                  max =      63

```

```

Random effects u_i ~ Gaussian          Wald chi2(8)       =      1250.66
corr(u_i, X) = 0 (assumed)            Prob > chi2        =      0.0000

```

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
logK_real	.4271656	.0487016	8.77	0.000	.3317123	.5226189
logL	.5085159	.0539056	9.43	0.000	.4028629	.6141688
lit_rate	.0038158	.0030485	1.25	0.211	-.0021592	.0097907
lit_rate_t	-.016208	.0023852	-6.80	0.000	-.0208829	-.0115331
Health4	.1517899	.0353824	4.29	0.000	.0824417	.2211382
Health4_t	.7561535	.2191975	3.45	0.001	.3265344	1.185773
trade_n_real	7.73e-13	2.86e-13	2.70	0.007	2.12e-13	1.33e-12
listed_dom~p	.0000633	.0001848	0.34	0.732	-.0002989	.0004254
_cons	5.712739	.7134001	8.01	0.000	4.314501	7.110978
sigma_u	0					
sigma_e	.43814733					
rho	0	(fraction of variance due to u_i)				

```
. est store random
```

```
. hausman fixed random
```

Note: the rank of the differenced variance matrix (7) does not equal the number of coefficients being tested (8); be sure this is what you expect, or there may be problems computing the test. Examine the output of your estimators for anything unexpected and possibly consider scaling your variables so that the coefficients are on a similar scale.

---- Coefficients ----				
	(b)	(B)	(b-B)	sqrt(diag(V_b-V_B))
	fixed	random	Difference	S.E.
logK_real	.4107209	.4271656	-.0164446	.0132837
logL	.5203793	.5085159	.0118635	.0116896
lit_rate	.0037558	.0038158	-.00006	.0003921
lit_rate_t	-.0166738	-.016208	-.0004658	.0004718
Health4	.151061	.1517899	-.0007289	.0096787
Health4_t	.863144	.7561535	.1069905	.0543081
trade_n_real	7.79e-13	7.73e-13	5.88e-15	5.18e-14
listed_dom~p	.0001289	.0000633	.0000656	.0000301

b = consistent under Ho and Ha; obtained from xtreg  
 B = inconsistent under Ha, efficient under Ho; obtained from xtreg

Test: Ho: difference in coefficients not systematic

$$\begin{aligned} \text{chi2}(7) &= (b-B)'[(V_b-V_B)^{-1}](b-B) \\ &= 11.07 \\ \text{Prob}>\text{chi2} &= \mathbf{0.1355} \end{aligned}$$

(V\_b-V\_B is not positive definite)

Fixed effect could not be rejected at 15 % s.l., along with the better results in probabilities, so fixed effect would be chosen in this model specification.

```
. xtregar logY_real logK_real logL lit_rate lit_rate_t Health4 Health4_t
trade_n_re
> al listed_dom_comp, fe
```

FE (within) regression with AR(1) disturbances Number of obs = 236  
 Group variable (i): year Number of groups = 13

R-sq: within = 0.9817 Obs per group: min = 1  
 between = 0.8828 avg = 18.2  
 overall = 0.9090 max = 62

corr(u\_i, Xb) = 0.0092 F(8,215) = 1437.80  
 Prob > F = 0.0000

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
logK_real	.7061512	.0392012	18.01	0.000	.6288832	.7834191
logL	.4212892	.0559008	7.54	0.000	.3111055	.531473
lit_rate	.0092481	.0029708	3.11	0.002	.0033924	.0151038
lit_rate_t	-.0166857	.0024912	-6.70	0.000	-.021596	-.0117753
Health4	.0649358	.034316	1.89	0.060	-.002703	.1325746
Health4_t	.6531804	.2363879	2.76	0.006	.1872459	1.119115
trade_n_real	-8.19e-13	2.40e-13	-3.41	0.001	-1.29e-12	-3.46e-13
listed_dom~p	-.0005634	.0002089	-2.70	0.008	-.0009751	-.0001517
_cons	-.5871646	.1030652	-5.70	0.000	-.7903121	-.3840171
rho_ar	.78361656					
sigma_u	.11580581					

```

sigma_e | .43679663
rho_fov | .065675 (fraction of variance due to u_i)
-----
F test that all u_i=0: F(12,215) = -3.70 Prob > F = 1.0000

. xi: reg logY_real logK_real logL lit_rate lit_rate_t Health4 Health4_t
trade_n_re
> al listed_dom_comp i.country
i.country _Icountry_1-135 (naturally coded; _Icountry_1 omitted)

Source | SS df MS Number of obs = 250
-----+-----+-----+-----
Model | 634.455765 73 8.69117486 F( 73, 176) = 1849.54
Residual | .827042807 176 .004699107 Prob > F = 0.0000
-----+-----+-----+-----
Total | 635.282808 249 2.55133658 R-squared = 0.9987
Adj R-squared = 0.9982
Root MSE = .06855

logY_real | Coef. Std. Err. t P>|t| [95% Conf. Interval]
-----+-----+-----+-----+-----
logK_real | .143185 .0320496 4.47 0.000 .0799341 .2064359
logL | .938087 .1539332 6.09 0.000 .6342945 1.24188
lit_rate | .0004935 .0059497 0.08 0.934 -.0112484 .0122354
lit_rate_t | .1195136 .0804151 1.49 0.139 -.0391883 .2782155
Health4 | .0086232 .020718 0.42 0.678 -.0322644 .0495108
Health4_t | .1467713 .0706718 2.08 0.039 .0072982 .2862444
trade_n_real | 6.14e-13 9.44e-14 6.50 0.000 4.28e-13 8.00e-13
listed_dom~p | -5.08e-06 .0000525 -0.10 0.923 -.0001087 .0000986
-----+-----+-----+-----+-----
_cons | 6.597763 1.78492 3.70 0.000 3.075162 10.12036
-----+-----+-----+-----+-----

```

```
. hettest
```

```

Breusch-Pagan / Cook-Weisberg test for heteroskedasticity
Ho: Constant variance
Variables: fitted values of logY_real

chi2(1) = 2.33
Prob > chi2 = 0.1269

```

#### SPECIFICATION (4.1)

```
. xtreg logY_real logK_real logL lit_rate Health5, fe
```

```

Fixed-effects (within) regression          Number of obs   =   301
Group variable (i): year                  Number of groups =   14

R-sq:  within = 0.8610                    Obs per group:  min =    1
      between = 0.7548                      avg   =   21.5
      overall  = 0.8539                      max   =    64

                                           F(4,283)       =   438.24
corr(u_i, Xb) = -0.1549                   Prob > F        =   0.0000

```

```

logY_real | Coef. Std. Err. t P>|t| [95% Conf. Interval]
-----+-----+-----+-----+-----
logK_real | .196325 .0569319 3.45 0.001 .0842614 .3083886
logL | .7995843 .0617437 12.95 0.000 .6780491 .9211195
lit_rate | -.0062873 .0041278 -1.52 0.129 -.0144125 .0018378
Health5 | .2393755 .0372869 6.42 0.000 .1659807 .3127703

```

```

      _cons | 7.790743 .7398063 10.53 0.000 6.334522 9.246964
-----+-----
      sigma_u | .2233667
      sigma_e | .64073495
      rho | .10836013 (fraction of variance due to u_i)

```

```

F test that all u_i=0:      F(13, 283) = 1.58      Prob > F = 0.0895

```

```
. est store fixed
```

```
. xtreg logY_real logK_real logL lit_rate Health5, re
```

```

Random-effects GLS regression      Number of obs      =      301
Group variable (i): year           Number of groups   =      14

R-sq:  within = 0.8593              Obs per group: min =      1
      between = 0.8036              avg =      21.5
      overall = 0.8564              max =      64

```

```

Random effects u_i ~ Gaussian      Wald chi2(4)      =      1764.67
corr(u_i, X) = 0 (assumed)         Prob > chi2       =      0.0000

```

```

-----+-----
logY_real |      Coef.   Std. Err.    z    P>|z|    [95% Conf. Interval]
-----+-----
logK_real |   .1664136   .0562134    2.96  0.003    .0562375   .2765898
logL      |   .8340141    .0607     13.74  0.000    .7150443   .9529838
lit_rate  |  -.0056543   .0041385   -1.37  0.172   -.0137657   .002457
Health5   |   .2101373   .0357127    5.88  0.000    .1401416   .280133
_cons     |   7.949893   .7414878   10.72  0.000    6.496603   9.403182
-----+-----
sigma_u   |           0
sigma_e   |   .64073495
rho       |           0 (fraction of variance due to u_i)

```

```
. est store random
```

```
. hausman fixed random
```

```

-----+-----
---- Coefficients ----
      |      (b)      (B)      (b-B)      sqrt(diag(V_b-V_B))
      |      fixed    random    Difference    S.E.
-----+-----
logK_real |   .196325   .1664136   .0299114   .0090164
logL      |   .7995843   .8340141  -.0344297   .0113049
lit_rate  |  -.0062873  -.0056543  -.000633    .
Health5   |   .2393755   .2101373   .0292382   .0107197

```

```

      b = consistent under Ho and Ha; obtained from xtreg
      B = inconsistent under Ha, efficient under Ho; obtained from xtreg

```

```
Test: Ho: difference in coefficients not systematic
```

```

      chi2(4) = (b-B)'[(V_b-V_B)^(-1)](b-B)
      = 10.07
      Prob>chi2 = 0.0392
      (V_b-V_B is not positive definite)

```

```
. xtregar logY_real logK_real logL lit_rate Health5, fe
```

```

FE (within) regression with AR(1) disturbances      Number of obs      =      287
Group variable (i): year                           Number of groups   =      12

```



```

overall = 0.8691                                max = 63
corr(u_i, Xb) = -0.1555                        F(5,274) = 380.64
                                                Prob > F = 0.0000

```

```

-----+-----
logY_real |      Coef.   Std. Err.    t    P>|t|    [95% Conf. Interval]
-----+-----
logK_real |   .1854205   .0556104    3.33  0.001    .0759425   .2948985
logL      |   .7114467   .0628737   11.32  0.000    .5876699   .8352235
lit_rate  |  -.0025597   .0040646   -0.63  0.529   -.0105615   .005442
Health5   |   .1848557   .0375616    4.92  0.000    .1109097   .2588018
trade_n_real | 1.64e-12   3.63e-13    4.53  0.000    9.27e-13   2.36e-12
_cons     |   8.942101   .8027652   11.14  0.000    7.361729   10.52247
-----+-----
sigma_u   |   .19526175
sigma_e   |   .6147578
rho       |   .09163985   (fraction of variance due to u_i)
-----+-----

```

```

F test that all u_i=0:      F(13, 274) = 1.35      Prob > F = 0.1847

```

```
. est store fixed
```

```
. xtreg logY_real logK_real logL lit_rate Health5 trade_n_real, re
```

```

Random-effects GLS regression           Number of obs   =   293
Group variable (i): year                Number of groups =   14

```

```

R-sq:  within = 0.8728                   Obs per group: min =   1
        between = 0.8448                   avg           =  20.9
        overall = 0.8710                   max           =   63

```

```

Random effects u_i ~ Gaussian           Wald chi2(5)    =   785.58
corr(u_i, X) = 0 (assumed)              Prob > chi2     =   0.0000

```

```

-----+-----
logY_real |      Coef.   Std. Err.    z    P>|z|    [95% Conf. Interval]
-----+-----
logK_real |   .1644782   .0548086    3.00  0.003    .0570552   .2719011
logL      |   .7341624   .0618784   11.86  0.000    .6128829   .8554418
lit_rate  |  -.0016678   .0040487   -0.41  0.680   -.0096031   .0062676
Health5   |   .1534041   .035706    4.30  0.000    .0834216   .2233866
trade_n_real | 1.67e-12   3.63e-13    4.60  0.000    9.59e-13   2.38e-12
_cons     |   9.025572   .8029195   11.24  0.000    7.451879   10.59927
-----+-----
sigma_u   |           0
sigma_e   |   .6147578
rho       |           0   (fraction of variance due to u_i)
-----+-----

```

```
. est store random
```

```
. hausman fixed random
```

Note: the rank of the differenced variance matrix (4) does not equal the number of

coefficients being tested (5); be sure this is what you expect, or there

may be problems computing the test. Examine the output of your estimators

for anything unexpected and possibly consider scaling your variables so that the coefficients are on a similar scale.



logL		.6127892	.1899498	3.23	0.001	.2382505	.9873278
lit_rate		.004665	.0074887	0.62	0.534	-.010101	.019431
Health5		.0223609	.020844	1.07	0.285	-.0187388	.0634606
trade_n_real		4.74e-13	1.17e-13	4.04	0.000	2.43e-13	7.05e-13
-----							
_cons		6.488792	2.223303	2.92	0.004	2.104934	10.87265
-----							

. hetttest

Breusch-Pagan / Cook-Weisberg test for heteroskedasticity

Ho: Constant variance

Variables: fitted values of logY\_real

chi2(1) = 4.91  
 Prob > chi2 = 0.0267

#### SPECIFICATION (4.3)

. xtreg logY\_real logK\_real logL lit\_rate Health5 trade\_n\_real listed\_dom\_comp, fe

Fixed-effects (within) regression	Number of obs	=	185
Group variable (i): year	Number of groups	=	12
R-sq: within = 0.8747	Obs per group: min	=	1
between = 0.7989	avg	=	15.4
overall = 0.8654	max	=	44
	F(6,167)	=	194.24
corr(u_i, Xb) = 0.0573	Prob > F	=	0.0000

logY_real		Coef.	Std. Err.	t	P> t	[95% Conf. Interval]
logK_real		.1643164	.0832032	1.97	0.050	.0000508 .328582
logL		.7000006	.0972311	7.20	0.000	.50804 .8919613
lit_rate		.0023807	.0053044	0.45	0.654	-.0080916 .012853
Health5		.1434642	.050042	2.87	0.005	.0446677 .2422607
trade_n_real		1.14e-12	4.10e-13	2.78	0.006	3.29e-13 1.95e-12
listed_dom-p		.0008484	.0002714	3.13	0.002	.0003126 .0013841
_cons		9.280612	1.133244	8.19	0.000	7.043282 11.51794

sigma_u		.23233935
sigma_e		.57175233
rho		.1417277 (fraction of variance due to u_i)

F test that all u\_i=0: F(11, 167) = 1.73 Prob > F = 0.0703

. est store fixed

. xtreg logY\_real logK\_real logL lit\_rate Health5 trade\_n\_real listed\_dom\_comp, re

Random-effects GLS regression	Number of obs	=	185
Group variable (i): year	Number of groups	=	12
R-sq: within = 0.8736	Obs per group: min	=	1
between = 0.8249	avg	=	15.4
overall = 0.8668	max	=	44
Random effects u_i ~ Gaussian	Wald chi2(6)	=	416.53
corr(u_i, X) = 0 (assumed)	Prob > chi2	=	0.0000

	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
logY_real						
logK_real	.1615207	.0833793	1.94	0.053	-.0018996	.3249411
logL	.7196796	.0971637	7.41	0.000	.5292423	.9101169
lit_rate	.002527	.0053272	0.47	0.635	-.0079141	.0129681
Health5	.1143988	.048544	2.36	0.018	.0192542	.2095433
trade_n_real	1.13e-12	4.10e-13	2.75	0.006	3.24e-13	1.93e-12
listed_dom~p	.00078	.0002662	2.93	0.003	.0002583	.0013017
_cons	9.040647	1.138418	7.94	0.000	6.809389	11.27191
sigma_u	0					
sigma_e	.57175233					
rho	0	(fraction of variance due to u_i)				

. est store random

. hausman fixed random

Note: the rank of the differenced variance matrix (5) does not equal the number of

coefficients being tested (6); be sure this is what you expect, or there

may be problems computing the test. Examine the output of your estimators

for anything unexpected and possibly consider scaling your variables so that the coefficients are on a similar scale.

	---- Coefficients ----			
	(b)	(B)	(b-B)	sqrt(diag(V_b-V_B))
	fixed	random	Difference	S.E.
logK_real	.1643164	.1615207	.0027957	.
logL	.7000006	.7196796	-.0196789	.0036216
lit_rate	.0023807	.002527	-.0001462	.
Health5	.1434642	.1143988	.0290655	.0121524
trade_n_real	1.14e-12	1.13e-12	1.05e-14	.
listed_dom~p	.0008484	.00078	.0000683	.0000528

b = consistent under Ho and Ha; obtained from xtreg  
B = inconsistent under Ha, efficient under Ho; obtained from xtreg

Test: Ho: difference in coefficients not systematic

chi2(5) = (b-B)'[(V\_b-V\_B)^(-1)](b-B)  
= 3.09  
Prob>chi2 = 0.6867  
(V\_b-V\_B is not positive definite)

**xtregar logY\_real logK\_real logL lit\_rate Health5 trade\_n\_real listed\_dom\_comp,  
r  
> e**

RE GLS regression with AR(1) disturbances      Number of obs      =      185  
Group variable (i): year                              Number of groups    =      12

R-sq:    within = 0.8698                              Obs per group: min =      1  
          between = 0.8154    avg =      15.4  
          overall = 0.8636    max =      44

Wald chi2(7)                                        =      543.83

corr(u\_i, Xb) = 0 (assumed) Prob > chi2 = 0.0000

```
----- theta -----
min      5%      median      95%      max
0.0000  0.0000  0.0000  0.0000  0.0000
```

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
logK_real	.2479885	.0719991	3.44	0.001	.1068729	.3891041
logL	.6329586	.0836464	7.57	0.000	.4690147	.7969025
lit_rate	.0024063	.0044826	0.54	0.591	-.0063794	.011192
Health5	.0702979	.0416991	1.69	0.092	-.0114309	.1520267
trade_n_real	6.24e-13	3.54e-13	1.76	0.078	-6.92e-14	1.32e-12
listed_dom~p	.0009863	.0002818	3.50	0.000	.000434	.0015387
_cons	8.161152	.9685091	8.43	0.000	6.262909	10.0594
rho_ar	.85315724	(estimated autocorrelation coefficient)				
sigma_u	0					
sigma_e	.43775695					
rho_fov	0	(fraction of variance due to u_i)				

```
xi:reg logY_real logK_real logL lit_rate Health5 trade_n_real listed_dom_comp
i.c
> ountry
i.country      _Icountry_1-135      (naturally coded; _Icountry_1 omitted)
```

Source	SS	df	MS	Number of obs =	185
Model	456.171745	62	7.35760878	F( 62, 122) =	1804.58
Residual	.497417103	122	.004077189	Prob > F =	0.0000
Total	456.669162	184	2.48189762	R-squared =	0.9989
				Adj R-squared =	0.9984
				Root MSE =	.06385

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
logK_real	.077739	.0443812	1.75	0.082	-.010118	.1655959
logL	.7329656	.24467	3.00	0.003	.2486168	1.217314
lit_rate	.0235689	.0103255	2.28	0.024	.0031285	.0440092
Health5	.0080754	.0218462	0.37	0.712	-.0351714	.0513222
trade_n_real	5.22e-13	9.47e-14	5.51	0.000	3.35e-13	7.10e-13
listed_dom~p	-7.81e-06	.0000466	-0.17	0.867	-.0001001	.0000844
_cons	9.196266	2.86506	3.21	0.002	3.524593	14.86794

. hettest

Breusch-Pagan / Cook-Weisberg test for heteroskedasticity

Ho: Constant variance

Variables: fitted values of logY\_real

chi2(1) = 12.22

Prob > chi2 = 0.0005.

#### SPECIFICATION (4.4)

```
. xtreg logY_real logK_real logL lit_rate lit_rate_t Health5 Health5_t
trade_n_real
> listed_dom_comp, fe
```

```

Fixed-effects (within) regression
Group variable (i): year
Number of obs      =      185
Number of groups   =      12

R-sq:  within = 0.9208
       between = 0.9586
       overall = 0.9210
Obs per group:  min =      1
                avg  =     15.4
                max  =     44

corr(u_i, Xb) = 0.0852
F(8,165)      =     239.83
Prob > F      =     0.0000

```

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
logK_real	.2070035	.06707	3.09	0.002	.0745775	.3394296
logL	.7178344	.0786014	9.13	0.000	.5626401	.8730287
lit_rate	.0084853	.004314	1.97	0.051	-.0000325	.0170031
lit_rate_t	-.0124884	.0021585	-5.79	0.000	-.0167502	-.0082265
Health5	.1890855	.0403819	4.68	0.000	.1093536	.2688173
Health5_t	.3485109	.1971724	1.77	0.079	-.0407952	.737817
trade_n_real	4.30e-13	3.36e-13	1.28	0.202	-2.33e-13	1.09e-12
listed_dom~p	.0002696	.0002258	1.19	0.234	-.0001762	.0007154
_cons	7.832877	.918993	8.52	0.000	6.018376	9.647379
sigma_u	.10349939					
sigma_e	.45721574					
rho	.04874501	(fraction of variance due to u_i)				

```

F test that all u_i=0:      F(11, 165) =      0.64      Prob > F = 0.7919

```

```
. est store fixed
```

```
. xtreg logY_real logK_real logL lit_rate lit_rate_t Health5 Health5_t
trade_n_real
> listed_dom_comp, re
```

```

Random-effects GLS regression
Group variable (i): year
Number of obs      =      185
Number of groups   =      12

R-sq:  within = 0.9206
       between = 0.9651
       overall = 0.9212
Obs per group:  min =      1
                avg  =     15.4
                max  =     44

Random effects u_i ~ Gaussian
corr(u_i, X)      = 0 (assumed)
Wald chi2(8)      =     818.07
Prob > chi2       =     0.0000

```

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
logK_real	<b>.2170669</b>	.0650605	3.34	0.001	.0895506	.3445831
logL	<b>.7132855</b>	.0760551	9.38	0.000	.5642204	.8623507
lit_rate	<b>.0083082</b>	.0041783	1.99	0.047	.000119	.0164975
lit_rate_t	<b>-.0121623</b>	.002055	-5.92	0.000	-.01619	-.0081346
Health5	<b>.1935083</b>	.0383658	5.04	0.000	.1183128	.2687038
Health5_t	<b>.2665207</b>	.1835854	1.45	0.147	-.0933001	.6263415
trade_n_real	<b>4.04e-13</b>	3.24e-13	1.25	0.213	-2.31e-13	1.04e-12
listed_dom~p	<b>.0002043</b>	.0002154	0.95	0.343	-.0002177	.0006264
_cons	<b>7.690472</b>	.8898181	8.64	0.000	5.94646	9.434483
sigma_u	0					
sigma_e	.45721574					
rho	0	(fraction of variance due to u_i)				



```

listed_dom~p | .000182 .0002371 0.77 0.443 -.0002827 .0006467
_cons | 7.090843 .7517881 9.43 0.000 5.617365 8.564321
-----+-----
rho_ar | .90421987 (estimated autocorrelation coefficient)
sigma_u | 0
sigma_e | .33684736
rho_fov | 0 (fraction of variance due to u_i)
-----+-----

```

```

. xi:reg logY_real logK_real logL lit_rate lit_rate_t Health5 Health5_t
trade_n_rea
> l listed_dom_comp i.country
i.country _Icountry_1-135 (naturally coded; _Icountry_1 omitted)

```

Source	SS	df	MS	Number of obs =	185
Model	456.210418	64	7.12828778	F( 64, 120) =	1864.65
Residual	.45874347	120	.003822862	Prob > F =	0.0000
Total	456.669162	184	2.48189762	R-squared =	0.9990
				Adj R-squared =	0.9985
				Root MSE =	.06183

logY_real	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]
logK_real	.1047621	.0443367	2.36	0.020	.0169784 .1925457
logL	.8890516	.2419667	3.67	0.000	.4099743 1.368129
lit_rate	.0211319	.0100776	2.10	0.038	.0011791 .0410848
lit_rate_t	.0964052	.0756714	1.27	0.205	-.053419 .2462294
Health5	-.0200019	.0231776	-0.86	0.390	-.0658919 .0258881
Health5_t	.1465359	.0603248	2.43	0.017	.027097 .2659748
trade_n_real	5.59e-13	9.25e-14	6.04	0.000	3.76e-13 7.42e-13
listed_dom~p	-.0000528	.0000493	-1.07	0.286	-.0001503 .0000448
_cons	-4.391776	8.802352	-0.50	0.619	-21.81982 13.03627

```

. hetttest

```

```

Breusch-Pagan / Cook-Weisberg test for heteroskedasticity

```

```

Ho: Constant variance
Variables: fitted values of logY_real

```

```

chi2(1) = 3.37
Prob > chi2 = 0.0665

```

#### IV ESTIOMATION OUTPUT

```

. . xtivreg logY_real logK_real logL (lit_rate lit_rate_t Health1 Health1_t
trade_n
> _real listed_dom_comp=1.lit_rate 1.lit_rate_t 1.Health1 1.Health1_t
1.trade_n_r
> eal 1.listed_dom_comp), fe

```

```

Fixed-effects (within) IV regression
Group variable: country
Number of obs = 573
Number of groups = 66

```

```

R-sq: within = 0.7635
between = 0.0397
overall = 0.0885
Obs per group: min = 2
avg = 8.7
max = 12

```

```

corr(u_i, Xb) = -0.9175
Wald chi2(8) = 1.26e+07
Prob > chi2 = 0.0000

```

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
lit_rate	-.0056105	.0026662	-2.10	0.035	-.0108361	-.0003849
lit_rate_t	.1129176	.0708227	1.59	0.111	-.0258924	.2517275
Health1	.03288	.0147727	2.23	0.026	.003926	.061834
Health1_t	.0034788	.1254027	0.03	0.978	-.2423059	.2492635
trade_n_real	6.31e-13	1.05e-13	5.99	0.000	4.25e-13	8.38e-13
listed_dom~p	.00016	.0000626	2.56	0.011	.0000374	.0002826
logK_real	.1558408	.0173543	8.98	0.000	.121827	.1898545
logL	.8552711	.0706096	12.11	0.000	.7168788	.9936634
_cons	6.374027	1.363195	4.68	0.000	3.702215	9.045839
sigma_u	4.7321252					
sigma_e	.06031813					
rho	.99983755	(fraction of variance due to u_i)				

F test that all u\_i=0: F(65,499) = 344.63 Prob > F = 0.0000

Instrumented: lit\_rate lit\_rate\_t Health1 Health1\_t trade\_n\_real  
listed\_dom\_comp  
Instruments: logK\_real logL L.lit\_rate L.lit\_rate\_t L.Health1 L.Health1\_t  
L.trade\_n\_real L.listed\_dom\_comp

```
. xtivreg logY_real logK_real logL (lit_rate lit_rate_t Health1 Health1_t
trade_n
> _real listed_dom_comp=l.lit_rate l.lit_rate_t 1.Health1 1.Health1_t
l.trade_n_r
> eal l.listed_dom_comp), re
```

G2SLS random-effects IV regression Number of obs = 573  
Group variable: country Number of groups = 66

R-sq: within = 0.7539 Obs per group: min = 2  
between = 0.8492 avg = 8.7  
overall = 0.8611 max = 12

corr(u\_i, X) = 0 (assumed) Wald chi2(8) = 1258.94  
Prob > chi2 = 0.0000

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
lit_rate	.0016808	.0017295	0.97	0.331	-.001709	.0050705
lit_rate_t	-.0051023	.0021404	-2.38	0.017	-.0092975	-.0009072
Health1	.0414116	.0146753	2.82	0.005	.0126484	.0701747
Health1_t	.1065414	.136731	0.78	0.436	-.1614464	.3745291
trade_n_real	6.01e-13	1.11e-13	5.41	0.000	3.83e-13	8.19e-13
listed_dom~p	.0001683	.0000622	2.71	0.007	.0000464	.0002902
logK_real	.1760102	.0181096	9.72	0.000	.1405161	.2115044
logL	.6650815	.0333936	19.92	0.000	.5996312	.7305317
_cons	9.581085	.4834232	19.82	0.000	8.633593	10.52858
sigma_u	.41050738					
sigma_e	.06001819					
rho	.97907149	(fraction of variance due to u_i)				

Instrumented: lit\_rate lit\_rate\_t Health1 Health1\_t trade\_n\_real  
listed\_dom\_comp  
Instruments: logK\_real logL L.lit\_rate L.lit\_rate\_t L.Health1 L.Health1\_t  
L.trade\_n\_real L.listed\_dom\_comp

```

.. xtivreg logY_real logK_real logL (lit_rate lit_rate_t Health2 Health2_t
trade_n
> _real listed_dom_comp=l.lit_rate l.lit_rate_t l.Health2 l.Health2_t
l.trade_n_r
> eal l.listed_dom_comp), fe

```

```

Fixed-effects (within) IV regression      Number of obs      =      256
Group variable: country                  Number of groups   =      40

R-sq:  within = 0.7811                    Obs per group: min =      1
      between = 0.0002                      avg =      6.4
      overall = 0.0007                      max =      12

Wald chi2(8) = 4.82e+06
corr(u_i, Xb) = -0.9902                    Prob > chi2 = 0.0000

```

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]
lit_rate	-.001393	.0063911	-0.22	0.827	-.0139194 .0111333
lit_rate_t	.2542259	.0876547	2.90	0.004	.0824259 .4260259
Health2	-.088049	.0512999	-1.72	0.086	-.1885949 .012497
Health2_t	.1147141	.1138554	1.01	0.314	-.1084383 .3378666
trade_n_real	6.52e-13	1.27e-13	5.13	0.000	4.03e-13 9.01e-13
listed_dom~p	-.0000939	.0000835	-1.12	0.261	-.0002576 .0000697
logK_real	.21192	.0338505	6.26	0.000	.1455741 .2782658
logL	1.456362	.2145398	6.79	0.000	1.035872 1.876852
_cons	-9.582737	4.245322	-2.26	0.024	-17.90342 -1.262058
sigma_u	12.444054				
sigma_e	.05972283				
rho	.99997697	(fraction of variance due to u_i)			

```

F test that all u_i=0:      F(39,208) = 353.47      Prob > F = 0.0000

```

```

Instrumented:  lit_rate lit_rate_t Health2 Health2_t trade_n_real
               listed_dom_comp
Instruments:  logK_real logL L.lit_rate L.lit_rate_t L.Health2 L.Health2_t
               L.trade_n_real L.listed_dom_comp

```

```

.. xtivreg logY_real logK_real logL (lit_rate lit_rate_t Health4 Health4_t
trade_n
> _real listed_dom_comp=l.lit_rate l.lit_rate_t l.Health4 l.Health4_t
l.trade_n_r
> eal l.listed_dom_comp), fe

```

```

Fixed-effects (within) IV regression      Number of obs      =      121
Group variable: country                  Number of groups   =      20

R-sq:  within = .
      between = 0.2094                      Obs per group: min =      1
      overall = 0.2312                      avg =      6.0
                                           max =      12

Wald chi2(8) = 468014.49
corr(u_i, Xb) = -0.9933                    Prob > chi2 = 0.0000

```

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]
lit_rate	.036172	.0288186	1.26	0.209	-.0203114 .0926554
lit_rate_t	-.2702018	.6493501	-0.42	0.677	-1.542905 1.002501
Health4	-.4168186	.2991662	-1.39	0.164	-1.003174 .1695364

```

Health4_t | .803844 .662692 1.21 0.225 -.4950084 2.102696
trade_n_real | 2.09e-12 1.02e-12 2.04 0.042 8.02e-14 4.10e-12
listed_dom~p | .0001644 .0004722 0.35 0.728 -.0007612 .0010899
logK_real | -.0832367 .1615959 -0.52 0.606 -.3999587 .2334854
logL | 1.693536 .7663299 2.21 0.027 .1915568 3.195515
_cons | 8.699445 29.98834 0.29 0.772 -50.07661 67.4755

```

```

-----
sigma_u | 12.934226
sigma_e | .09560835
rho | .99994536 (fraction of variance due to u_i)
-----

```

```

F test that all u_i=0: F(19,93) = 75.18 Prob > F = 0.0000
-----

```

```

Instrumented: lit_rate lit_rate_t Health4 Health4_t trade_n_real
listed_dom_comp
Instruments: logK_real logL L.lit_rate L.lit_rate_t L.Health4 L.Health4_t
L.trade_n_real L.listed_dom_comp

```

```

.. xtivreg logY_real logK_real logL (lit_rate lit_rate_t Health5 Health5_t
trade_n
> _real listed_dom_comp=1.lit_rate 1.lit_rate_t 1.Health5 1.Health5_t
1.trade_n_r
> eal 1.listed_dom_comp), fe

```

```

Fixed-effects (within) IV regression      Number of obs      =      97
Group variable: country                  Number of groups   =      19

```

```

R-sq:  within =      .
        between = 0.4231
        overall = 0.4758
        Obs per group: min =      1
                        avg  =      5.1
                        max  =      10

```

```

corr(u_i, Xb) = -0.9983
Wald chi2(8) = 63526.90
Prob > chi2 = 0.0000

```

```

-----
logY_real |      Coef.   Std. Err.      z    P>|z|    [95% Conf. Interval]
-----+-----
lit_rate |   .0017493   .0705717     0.02  0.980   - .1365686   .1400672
lit_rate_t | -.3772936   1.490985    -0.25  0.800   -3.299571   2.544983
Health5 | -1.156268   2.379902    -0.49  0.627   -5.820791   3.508255
Health5_t |  1.488202   2.884759     0.52  0.606   -4.165823   7.142227
trade_n_real | 3.23e-12   4.41e-12     0.73  0.465   -5.42e-12   1.19e-11
listed_dom~p | .000368   .001292     0.28  0.776   -.0021643   .0029003
logK_real | -.066652   .3550389    -0.19  0.851   -.7625153   .6292114
logL |  5.737047  10.44436     0.55  0.583  -14.73353   26.20762
_cons | -43.33777  127.5982    -0.34  0.734  -293.4256   206.75

```

```

-----
sigma_u | 20.677055
sigma_e | .22073419
rho | .99988605 (fraction of variance due to u_i)
-----

```

```

F test that all u_i=0: F(18,70) = 12.52 Prob > F = 0.0000
-----

```

```

Instrumented: lit_rate lit_rate_t Health5 Health5_t trade_n_real
listed_dom_comp
Instruments: logK_real logL L.lit_rate L.lit_rate_t L.Health5 L.Health5_t
L.trade_n_real L.listed_dom_comp

```

```

. xtivreg logY_real logK_real logL lit_rate lit_rate_t trade_n_real
listed_dom_co
> mp (Health1 Health1_t = 1.Health1 1.Health1_t), fe

```

```

Fixed-effects (within) IV regression      Number of obs      =      613
Group variable: country                  Number of groups   =      69

R-sq:  within = 0.7575                    Obs per group: min =      1
      between = 0.0126                      avg =      8.9
      overall = 0.0254                      max =      12

corr(u_i, Xb) = -0.9618                    Wald chi2(8)      = 2.03e+07
                                           Prob > chi2       = 0.0000

```

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
Health1	.0288384	.0146743	1.97	0.049	.0000774	.0575994
Health1_t	.2220278	.1321388	1.68	0.093	-.0369596	.4810152
logK_real	.1591376	.0164042	9.70	0.000	.126986	.1912892
logL	.84121	.0687431	12.24	0.000	.706476	.9759439
lit_rate	-.002985	.0025293	-1.18	0.238	-.0079422	.0019723
lit_rate_t	.1598891	.0566296	2.82	0.005	.0488971	.270881
trade_n_real	5.27e-13	7.07e-14	7.46	0.000	3.88e-13	6.65e-13
listed_dom~p	.0000891	.0000385	2.31	0.021	.0000136	.0001646
_cons	5.437993	1.269552	4.28	0.000	2.949716	7.926269
sigma_u	6.7938648					
sigma_e	.0622949					
rho	.99991593	(fraction of variance due to u_i)				

```

F test that all u_i=0:      F(68,536) = 369.78      Prob > F = 0.0000

```

```

Instrumented:  Health1 Health1_t
Instruments:  logK_real logL lit_rate lit_rate_t trade_n_real listed_dom_comp
              L.Health1 L.Health1_t
. xtivreg logY_real logK_real logL lit_rate trade_n_real listed_dom_comp
(Health2
> Health2_t = 1.Health2 1. Health2_t),fe

```

```

Fixed-effects (within) IV regression      Number of obs      =      275
Group variable: country                  Number of groups   =      40

R-sq:  within = 0.7524                    Obs per group: min =      1
      between = 0.8260                      avg =      6.9
      overall = 0.8404                      max =      12

corr(u_i, Xb) = -0.7008                    Wald chi2(7)      = 6.26e+06
                                           Prob > chi2       = 0.0000

```

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
Health2	.0197119	.0533152	0.37	0.712	-.084784	.1242078
Health2_t	.067008	.067875	0.99	0.324	-.0660245	.2000405
logK_real	.1758371	.0337498	5.21	0.000	.1096888	.2419854
logL	1.173279	.2034569	5.77	0.000	.7745106	1.572047
lit_rate	.0011318	.0058068	0.19	0.845	-.0102493	.012513
trade_n_real	3.77e-13	1.02e-13	3.68	0.000	1.76e-13	5.77e-13
listed_dom~p	-8.47e-06	.0000435	-0.19	0.846	-.0000937	.0000768
_cons	2.049792	2.797056	0.73	0.464	-3.432337	7.531921
sigma_u	1.0060199					
sigma_e	.06384632					
rho	.99598844	(fraction of variance due to u_i)				

```

F test that all u_i=0:      F(39,228) = 434.10      Prob > F = 0.0000

```

```
-----
Instrumented:  Health2 Health2_t
Instruments:  logK_real logL lit_rate trade_n_real listed_dom_comp L.Health2
              Health2_t
```

```
.
. xtivreg logY_real logK_real logL lit_rate trade_n_real listed_dom_comp
(Health4
> Health4_t = 1.Health4 1. Health4_t),fe
```

```
Fixed-effects (within) IV regression      Number of obs      =      133
Group variable: country                   Number of groups   =      21

R-sq:  within = 0.5335                    Obs per group: min =      1
       between = 0.8177                    avg =              6.3
       overall = 0.8698                    max =             12

corr(u_i, Xb) = -0.3781                    Wald chi2(7)       = 1.62e+06
                                              Prob > chi2        = 0.0000
```

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]
Health4	.1734932	.1807205	0.96	0.337	-.1807126 .5276989
Health4_t	.0014025	.1818197	0.01	0.994	-.3549576 .3577625
logK_real	.0756229	.0780127	0.97	0.332	-.0772791 .228525
logL	1.210065	.4151123	2.92	0.004	.3964594 2.02367
lit_rate	-.0027465	.0154926	-0.18	0.859	-.0331114 .0276183
trade_n_real	2.21e-13	4.24e-13	0.52	0.602	-6.10e-13 1.05e-12
listed_dom~p	-.0000722	.0000533	-1.36	0.175	-.0001766 .0000322
_cons	4.433817	5.333996	0.83	0.406	-6.020623 14.88826
sigma_u	.80810277				
sigma_e	.06626612				
rho	.99332057	(fraction of variance due to u_i)			

```
F test that all u_i=0:      F(20,105) = 239.14      Prob > F = 0.0000
```

```
-----
Instrumented:  Health4 Health4_t
Instruments:  logK_real logL lit_rate trade_n_real listed_dom_comp L.Health4
              Health4_t
```

```
. xtivreg logY_real logK_real logL lit_rate lit_rate_t trade_n_real
listed_dom_co
> mp (Health2 Health2_t = 1.Health2 1.Health2_t), fe
```

```
Fixed-effects (within) IV regression      Number of obs      =      275
Group variable: country                   Number of groups   =      40

R-sq:  within = 0.7165                    Obs per group: min =      1
       between = 0.0001                    avg =              6.9
       overall = 0.0007                    max =             12

corr(u_i, Xb) = -0.9867                    Wald chi2(8)       = 5.45e+06
                                              Prob > chi2        = 0.0000
```

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]
Health2	-.0405764	.0553147	-0.73	0.463	-.1489912 .0678384
Health2_t	.4301945	.1414608	3.04	0.002	.1529363 .7074526
logK_real	.2266902	.0377098	6.01	0.000	.1527804 .3006

logL		1.336102	.2180381	6.13	0.000	.9087552	1.763449
lit_rate		-.0022	.0063077	-0.35	0.727	-.0145628	.0101628
lit_rate_t		.2067395	.0721922	2.86	0.004	.0652454	.3482336
trade_n_real		3.76e-13	1.13e-13	3.34	0.001	1.55e-13	5.96e-13
listed_dom~p		-.0000756	.0000495	-1.53	0.126	-.0001725	.0000213
_cons		-7.46369	3.909466	-1.91	0.056	-15.1261	.1987219

sigma_u		10.333776					
sigma_e		.06847752					
rho		.99995609	(fraction of variance due to u_i)				

F test that all u\_i=0: F(39,227) = 324.53 Prob > F = 0.0000

Instrumented: Health2 Health2\_t  
Instruments: logK\_real logL lit\_rate lit\_rate\_t trade\_n\_real listed\_dom\_comp  
L.Health2 L.Health2\_t

```
. xtivreg logY_real logK_real logL lit_rate lit_rate_t trade_n_real
listed_dom_co
> mp (Health4 Health4_t = 1.Health4 1.Health4_t), fe
```

Fixed-effects (within) IV regression Number of obs = 133  
Group variable: country Number of groups = 21

R-sq: within = 0.5036 Obs per group: min = 1  
between = 0.3231 avg = 6.3  
overall = 0.3327 max = 12

corr(u\_i, Xb) = -0.7805 Wald chi2(8) = 1.51e+06  
Prob > chi2 = 0.0000

logY_real		Coef.	Std. Err.	z	P> z	[95% Conf. Interval]
Health4		-.1139511	.1571082	-0.73	0.468	-.4218776 .1939754
Health4_t		.6263482	.1923788	3.26	0.001	.2492926 1.003404
logK_real		.0806289	.0859479	0.94	0.348	-.0878259 .2490836
logL		1.491152	.4089982	3.65	0.000	.6895298 2.292773
lit_rate		.0125734	.0154147	0.82	0.415	-.0176388 .0427856
lit_rate_t		.0288157	.120039	0.24	0.810	-.2064565 .2640879
trade_n_real		7.90e-13	3.91e-13	2.02	0.043	2.43e-14 1.56e-12
listed_dom~p		-.0001061	.0000617	-1.72	0.086	-.000227 .0000149
_cons		-2.855979	7.153094	-0.40	0.690	-16.87579 11.16383

sigma_u		2.4260146					
sigma_e		.06868367					
rho		.99919911	(fraction of variance due to u_i)				

F test that all u\_i=0: F(20,104) = 172.12 Prob > F = 0.0000

Instrumented: Health4 Health4\_t  
Instruments: logK\_real logL lit\_rate lit\_rate\_t trade\_n\_real listed\_dom\_comp  
L.Health4 L.Health4\_t

```
. xtivreg logY_real logK_real logL lit_rate lit_rate_t trade_n_real
listed_dom_co
> mp (Health5 Health5_t = 1.Health5 1.Health5_t), fe
```

Fixed-effects (within) IV regression Number of obs = 108  
Group variable: country Number of groups = 20

R-sq: within = 0.0764 Obs per group: min = 1  
between = 0.3563 avg = 5.4

overall = 0.3675 max = 10  
 Wald chi2(8) = 859448.64  
 Prob > chi2 = 0.0000  
 corr(u\_i, Xb) = -0.7628

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
Health5	-.2202045	.8895686	-0.25	0.804	-1.963727	1.523318
Health5_t	.6009778	.9397467	0.64	0.522	-1.240892	2.442847
logK_real	.0778554	.1122452	0.69	0.488	-.1421412	.297852
logL	1.625782	3.662652	0.44	0.657	-5.552885	8.804448
lit_rate	.012585	.0238663	0.53	0.598	-.0341921	.0593621
lit_rate_t	.0273895	.1397365	0.20	0.845	-.246489	.3012679
trade_n_real	1.12e-12	1.52e-12	0.74	0.459	-1.85e-12	4.10e-12
listed_dom~p	-.0000993	.0000753	-1.32	0.188	-.0002469	.0000484
_cons	-5.203495	54.24874	-0.10	0.924	-111.5291	101.1221
sigma_u	2.237777					
sigma_e	.0777124					
rho	.99879545	(fraction of variance due to u_i)				

F test that all u\_i=0: F(19,80) = 113.80 Prob > F = 0.0000

Instrumented: Health5 Health5\_t  
 Instruments: logK\_real logL lit\_rate lit\_rate\_t trade\_n\_real listed\_dom\_comp  
 L.Health5 L.Health5\_t

#### FRONTIER ESTIMATION

```
. xtfrontier logY_real logK_real logL lit_rate, tvd i(country) t(year)
iterate(20
> )
```

Time-varying decay inefficiency model Number of obs = 1368  
 Group variable (i): country Number of groups = 99  
 Time variable (t): year Obs per group: min = 1  
 avg = 13.8  
 max = 15

Log likelihood = -226.22037 Wald chi2(3) = 7469.62  
 Prob > chi2 = 0.0000

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
logK_real	.7526089	.0125226	60.10	0.000	.7280651	.7771528
logL	.1607604	.0251834	6.38	0.000	.1114019	.210119
lit_rate	-.0011088	.0013869	-0.80	0.424	-.0038271	.0016095
_cons	3.601787	.3128495	11.51	0.000	2.988613	4.214961
/mu	-3.960116	7.108935	-0.56	0.577	-17.89337	9.97314
/eta	-.0107699	.0021929	-4.91	0.000	-.0150678	-.0064719
/lnsigma2	1.244525	1.337789	0.93	0.352	-1.377493	3.866542
/ilgtgamma	4.001878	1.360913	2.94	0.003	1.334537	6.669219
sigma2	3.471285	4.643845			.2522102	47.77689
gamma	.9820469	.0239939			.7915901	.9987322
sigma_u2	3.408965	4.643727			-5.692574	12.5105
sigma_v2	.0623202	.0024838			.0574521	.0671883

```
. predict te0, te
(793 missing values generated)

. xtfreier logY_real logK_real logL lit_rate Health1, tvd i(country) t(year)
it
> erate(20)
```

```
Time-varying decay inefficiency model      Number of obs      =      1162
Group variable (i): country                Number of groups   =         98

Time variable (t): year                    Obs per group: min =         1
                                           avg =      11.9
                                           max =      13

Wald chi2(4) = 1462.86
Log likelihood = 766.53475                  Prob > chi2        = 0.0000
```

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
logK_real	.2796857	.0144331	19.38	0.000	.2513972	.3079741
logL	.6800843	.0393957	17.26	0.000	.6028701	.7572984
lit_rate	.0007268	.0017136	0.42	0.671	-.0026318	.0040855
Health1	.0176797	.0058691	3.01	0.003	.0061764	.029183
_cons	8.042952	.6070782	13.25	0.000	6.853101	9.232803
/mu	1.410736	.1259636	11.20	0.000	1.163852	1.65762
/eta	-.0007426	.0008827	-0.84	0.400	-.0024726	.0009873
/lnsigma2	-.6335874	.1891424	-3.35	0.001	-1.0043	-.2628751
/ilgtgamma	4.037351	.1986649	20.32	0.000	3.647975	4.426727
sigma2	.5306846	.100375			.3663011	.7688379
gamma	.9826618	.0033848			.9746173	.9881877
sigma_u2	.5214835	.1003864			.3247298	.7182371
sigma_v2	.0092011	.0004011			.0084151	.0099872

```
. predict tel, te
(999 missing values generated)

. xtfreier logY_real logK_real logL lit_rate Health2, tvd i(country) t(year)
it
> erate(20)
```

```
convergence not achieved

Time-varying decay inefficiency model      Number of obs      =      589
Group variable (i): country                Number of groups   =         97

Time variable (t): year                    Obs per group: min =         1
                                           avg =         6.1
                                           max =         13

Wald chi2(4) = 538765.67
Log likelihood = -10542.368                  Prob > chi2        = 0.0000
```

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
logK_real	.4485952	.0044543	100.71	0.000	.439865	.4573254
logL	.6442638	.0050337	127.99	0.000	.6343979	.6541297
lit_rate	-.0238443	.0003732	-63.90	0.000	-.0245756	-.0231129

Health2		-.0682521	.0015237	-44.79	0.000	-.0712386	-.0652657
_cons		5.487912	.054595	100.52	0.000	5.380907	5.594916
-----							
/mu		-1.224656	.2636153	-4.65	0.000	-1.741333	-.70798
/eta		.0210759	.0002785	75.67	0.000	.0205301	.0216218
/lnsigma2		.2221243	.	.	.	.	.
/ilgtgamma		8.494355	.	.	.	.	.
-----							
sigma2		1.248727	.	.	.	.	.
gamma		.9997954	.	.	.	.	.
sigma_u2		1.248471	.	.	.	.	.
sigma_v2		.0002555	.	.	.	.	.

```
. predict te2, te
(1786 missing values generated)
```

```
. xtfrontier logY_real logK_real logL lit_rate Health4, tvd i(country) t(year)
it
> erate(20)
```

```
Time-varying decay inefficiency model      Number of obs      =      425
Group variable (i): country                Number of groups   =      96

Time variable (t): year                    Obs per group: min =      1
                                           avg =      4.4
                                           max =      13

Wald chi2(4)                               =      1200.29
Log likelihood = 127.31666                  Prob > chi2        =      0.0000
```

logY_real		Coef.	Std. Err.	z	P> z	[95% Conf. Interval]
logK_real		.2854082	.0289474	9.86	0.000	.2286722 .3421441
logL		.6682787	.044282	15.09	0.000	.5814875 .7550698
lit_rate		.004885	.0022776	2.14	0.032	.000421 .0093489
Health4		.0568743	.0156519	3.63	0.000	.0261971 .0875516
_cons		7.63533	.6315087	12.09	0.000	6.397596 8.873064
-----						
/mu		1.208869	.1188538	10.17	0.000	.9759198 1.441818
/eta		-.0050471	.0017134	-2.95	0.003	-.0084053 -.0016889
/lnsigma2		-.8599736	.1881193	-4.57	0.000	-1.228681 -.4912666
/ilgtgamma		3.623285	.2109947	17.17	0.000	3.209743 4.036827
-----						
sigma2		.4231733	.079607			.2926785 .6118509
gamma		.9739992	.0053434			.9611993 .9826528
sigma_u2		.4121704	.0796298			.2560988 .568242
sigma_v2		.0110028	.0008683			.0093011 .0127046

```
. predict te3,te
(1736 missing values generated)
```

```
. xtfrontier logY_real logK_real logL lit_rate Health5, tvd i(country) t(year)
it
> erate(20)
```

```
Time-varying decay inefficiency model      Number of obs      =      301
Group variable (i): country                Number of groups   =      87

Time variable (t): year                    Obs per group: min =      1
```

avg = 3.5  
max = 13

Log likelihood = 70.179519      Wald chi2(4) = 1391.77  
Prob > chi2 = 0.0000

logY_real	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
logK_real	.4237905	.0427595	9.91	0.000	.3399834	.5075976
logL	.5409519	.0579009	9.34	0.000	.4274683	.6544356
lit_rate	.0033438	.0032824	1.02	0.308	-.0030896	.0097773
Health5	.0567774	.0225187	2.52	0.012	.0126416	.1009133
_cons	6.019432	.6517599	9.24	0.000	4.742006	7.296858
/mu	.6946064	.288272	2.41	0.016	.1296037	1.259609
/eta	-.0022903	.002598	-0.88	0.378	-.0073824	.0028017
/lnsigma2	-.548473	.3424799	-1.60	0.109	-1.219721	.1227752
/ilgtgamma	3.962494	.3510204	11.29	0.000	3.274507	4.650482
sigma2	.5778315	.1978957			.2953125	1.13063
gamma	.9813392	.0064281			.9635438	.9905335
sigma_u2	.5670487	.1977662			.1794341	.9546632
sigma_v2	.0107828	.001066			.0086935	.0128721

. predict te4,te  
(1860 missing values generated)

. sum te\*

Variable	Obs	Mean	Std. Dev.	Min	Max
te0	1368	.6131948	.2258853	.0220008	.9717745
te1	1162	.2952289	.1906515	.0356164	.9666941
te2	375	.488863	.271127	.0282066	.9972136
te3	425	.3664094	.2056599	.0353162	.9612878
te4	301	.4390954	.2261963	.0312448	.9626191