逢甲大學經濟學系 博士論文

公共政策變革對家庭決策之影響

Essays on Public Policy Reform: Impacts on Vietnamese Household Outcomes

指導教授:郭祐誠

研究生:方友謙

中華民國一百零九年七月

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☑學術型論文

□實務型論文

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考試日期:中華民國109年5月28日

Acknowledgements

Throughout the writing of this dissertation I have received a great deal of support and assistance. Foremost, I would like to express my special appreciation and thanks to my advisor, Professor Yu-Chen Kuo, for his invaluable advice, scholarly input and consistent encouragement throughout this work. I greatly appreciate all his generous contributions of time, ideas, and funding to make my Ph.D. experience productive and stimulating.

I also offer my sincere thanks to the members of my review committee, Professors Hung-Lin Tao, Ho-Don Yan, Sheng-Jang Sheu, Chi-Yin Wu, and Jia-Huey Lin. Their comments, thoughts and ideas have improved this paper in numerous ways. I would also like to acknowledge the faculty members and staff in the Department of Economics at Feng Chia University. They were consistently kind, patient, and quick to extend whatever ever assistance they could throughout the many phases of this research.

Finally, I wish to mention the enduring patience of my family. Words cannot adequately express how grateful I am for the support of my mother Hoang Thi Keo, father Phuong Huu Ai, wife Mong Thi Nguyet and my two sons Phuong Minh Khoa and Phuong Minh Duc. My two older sisters Phuong Thi Doan and Phuong Thi Ngoan and other family members all helped support each other in my absence, and thus helped me too, during my prolonged period of study abroad. Thank you all for your support and encouragement throughout this experience.

As a last word, this dissertation could not have been completed without the help of my classmates and friends, Edward Gotham, Mr. Wu, Mike Cuong, and Dew. In the five years we studied together I learned so much from you all.

Publications

Chapter 2 of this thesis is based on results produced in the following published paper: Phuong Huu Khiem, Yu-Chen Kuo (2019). EC0249: The impact of health insurance reforms on children's educational attainment: Evidence from Vietnam. 3rd International Conference on Econometrics and Statistics, National Chung Hsing University, Taichung, Taiwan.

Chapter 4 of this thesis is based on results produced in the following published paper: Phuong Huu Khiem et al. (2020). Does tuition fee policy reform encourage poor children's school enrolment? Evidence from Vietnam. Economic Analysis and Policy, 66, 109-124. https://doi.org/10.1016/j.eap.2020.03.001.



Summary

In the last decade economic growth among developing nations has been especially rapid. However, as countries continue to grow public policies and public policy administration must keep pace with the needs of the society they intend to support. National progress requires intensive investigation and accurate identification of policy issues so that policy makers may effectively plan and implement changes.

In terms of economic progress, Vietnam is an example of how economic development, poverty reduction and human capital accumulation go hand in hand. After determining that human capital and household development were vital to Vietnam's continued success, policies in these areas began to be proposed and adopted. This has led to human capital accumulation, improved household economics, and benefits in health and education sectors.

This dissertation seeks to quantify some of these benefits and examine to what degree the success is attributable to policy changes. Using a quasi-experimental difference-in-differences approach, with propensity score matching, this manuscript combines three essays that isolate public policy reforms in various sectors and measures the outcomes.

The first essay examines the effects of national health insurance reform on children's educational outcomes. Households in the state sector were unaffected before and after the reform, and so children in that group served as a natural control group, whereas children growing up in non-state employed households formed a suitable treatment group. Educational outcomes were measured for the three levels of general education: primary, secondary and high school. Results showed that the national health insurance reform improved educational outcomes for children in high school, both in terms of enrollment and school completion likelihood. Furthermore, it was shown that children from minority groups, females, those in rural areas, and those from poorer families were less likely to derive the same educational outcomes when compared to their counterparts. These findings are the first of their kind using the Vietnam household living standard survey data and would be of value to policy makers in countries that plan to adopt a similar health policy.

The second essay was extended findings from the first to evaluate the impact of the national health insurance reform in 2005 on the household consumption. It exploits the difference between households in the state sector (control group) and households in the non-state sector (treatment group). Results showed that the national health insurance reform in 2005 has the strong positive impact on the total household consumption, per capital consumption and non-medical expenditure as well with the treatment group, while it has not the impact on the household medical consumption. In addition, the ethnic minority households or households living in rural areas or poor households are likely to decrease spending on the goods than that with the households in counterpart. While households with spouse(s) in the higher education and occupation skill level or the richer households are likely to increase their consumption than that in comparison with households in counterpart.

The third essay examines the influence of the 2010 policy reform on school enrollment rates at the primary, secondary and high school levels. The three levels of education in Vietnam were assessed separately by this study. It was found that the policy implementation improved enrollment rates at both primary and secondary levels (compulsory in Vietnam), while high school enrollment rates remained unaffected. One of the largest differences identified was for ethnic minority groups and those in regional areas. Minority groups preferred to enroll more than their ethnic majority counterparts at both the secondary and high school levels; however, there is a significant gap among groups, where children from rural areas were overall less likely to enroll than children from urban areas. The cause for this may be that the tuition fees and subsidies only covered a small part of the total cost of education expenditure, or it may be part of the opportunity cost equation that older children face when they come from poor backgrounds and have the chance to join the labor force.

Key words: Health insurance, Difference-in-differences, Educational attainment, Household consumption, Tuition fee exemption, Tuition fee policy, School enrollment.

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