

**The Economic Burden Shouldered by Public and Private Entities as a
Consequence of Health Disparities Between Men and Women**

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Abstract

On average, American men live shorter, less healthy lives than women. They are more likely to be the victim of a violent crime, die in a car crash, commit suicide, and be injured at work. In addition, men have higher death rates in 9 of the top 10 causes of death, and are less likely to receive routine preventative care, leaving men with a life span that is significantly shorter than women's. Recently, policy makers and researchers have been paying more attention to health disparities including race, sex, and ethnicity. However, men are still noticeably absent from these discussions despite being significantly harmed by disparities in preventive care, quality of life, and overall health outcomes. Ignoring these disparities is costly in terms of lost productivity, lives lost, and financial costs incurred by the government and employers each year.

Premature death and morbidity in men costs federal, state, and local governments in excess of \$142 billion annually.

It also costs U.S. employers and society as a whole in excess of \$156 billion annually in direct medical payments and lost productivity and an additional \$181 billion annually in decreased quality of life.

As federal and state governments and the private sector struggle with increasing health entitlement burdens—including escalating health care costs—eliminating male health inequities emerges as an important source of savings. This analysis will examine the economic and intangible costs associated with the health disparities that exist between genders and the benefits reaped if these disparities are reduced or eliminated.

Keywords health care utilization, health inequality/disparity, health policy issues, men's health programs

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