

Health disparities among US African-American and Hispanic men cost economy more than \$450 billion

January 22 2014

African-American men incurred \$341.8 billion in excess medical costs due to health inequalities between 2006 and 2009, and Hispanic men incurred an additional \$115 billion over the four-year period, according to a new study by researchers at the Johns Hopkins Bloomberg School of Public Health. The study, published this week in the *International Journal of Men's Health*, looks at the direct and indirect costs associated with health inequalities and projects the potential cost savings of eliminating these disparities for minority men in the U.S.

"Health disparities have a devastating impact on individuals and families, and they also affect society as a whole," said Roland J. Thorpe, Jr., PhD, lead author of the study and Assistant Professor at the Johns Hopkins Bloomberg School of Public Health and Director of the Program for Research on Men's Health in the Johns Hopkins Center for Health Disparities Solutions. "Quantifying the economic impact of [health inequalities](#) among men highlights how enormous a societal problem this is."

Researchers used data from the Agency for Health Care Research and Quality's 2006-2009 Medical Expenditure Panel Survey (MEPS) to determine the prevalence of a variety of health statuses and conditions (for example, fair/poor health, obesity, diabetes, heart disease) among each racial/ethnic group (African American, Asian, Hispanic and white). This information was incorporated in statistical models to estimate the

total direct medical costs and the proportion of costs incurred due to [health disparities](#) for each group. The direct medical expenditures for African-American men over the four-year period totaled \$447.6 billion; and 5.4 percent, or \$24.2 billion, were excess costs attributed to health disparities. There were no excess direct costs due to health disparities for the other racial/ethnic groups over the four year period.

The [indirect costs](#) of lower worker productivity due to illness and premature death were calculated using data from MEPS and the CDC's National Vital Statistics System. Over the four-year period, these factors cost the economy a total of \$436.3 billion—lower worker productivity due to illness contributed \$28 billion in excess costs, and premature death contributed \$408.3 billion. Of the total indirect costs, African-American men accounted for \$317.6 billion, or 72 percent; indirect [costs](#) totaled \$115 billion for Hispanic men and \$3.6 billion for Asian men.

"These stark findings underscore the fact that we can't afford to overlook men's [health](#) disparities that exist in this country," added Thorpe. "The cost to society—both moral and economic—is staggering."

Provided by Johns Hopkins University Bloomberg School of Public Health

Citation: Health disparities among US African-American and Hispanic men cost economy more than \$450 billion (2014, January 22) retrieved 23 April 2024 from <https://medicalxpress.com/news/2014-01-health-disparities-african-american-hispanic-men.html>

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