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Background

- Approximately 66 percent of all deaths in India occur due to NCDs, affecting the age group 30-69 years
- Women incur the triple burden of reproductive, communicable, and non-communicable diseases (NCDs)
- Myth: NCDs are male-dominant and limited to high-income countries
- Reality: NCDs have been the leading cause of death among women globally for the past three decades
- Two in every three deaths among women are due to NCDs each year

Research Question

- How differently are men and women facing the burden of NCDs in India?
- How much does the gender gap exist in healthcare costs among NCDs?
- What are the background factors responsible for the gender gap in Healthcare Costs (HCC) among NCDs?

Data and Methods

- 75th round of 'National Sample Survey on Household Social Consumption: Health (2017-18)
- In-patient hospitalization data for average total medical expenses for the last 365 days
- Cross-tabulation and descriptive statistics to examine the differences in hospitalization cases and HCC
- Oaxaca Blinder Decomposition Analysis to evaluate the factors responsible for the gap into explained and unexplained:

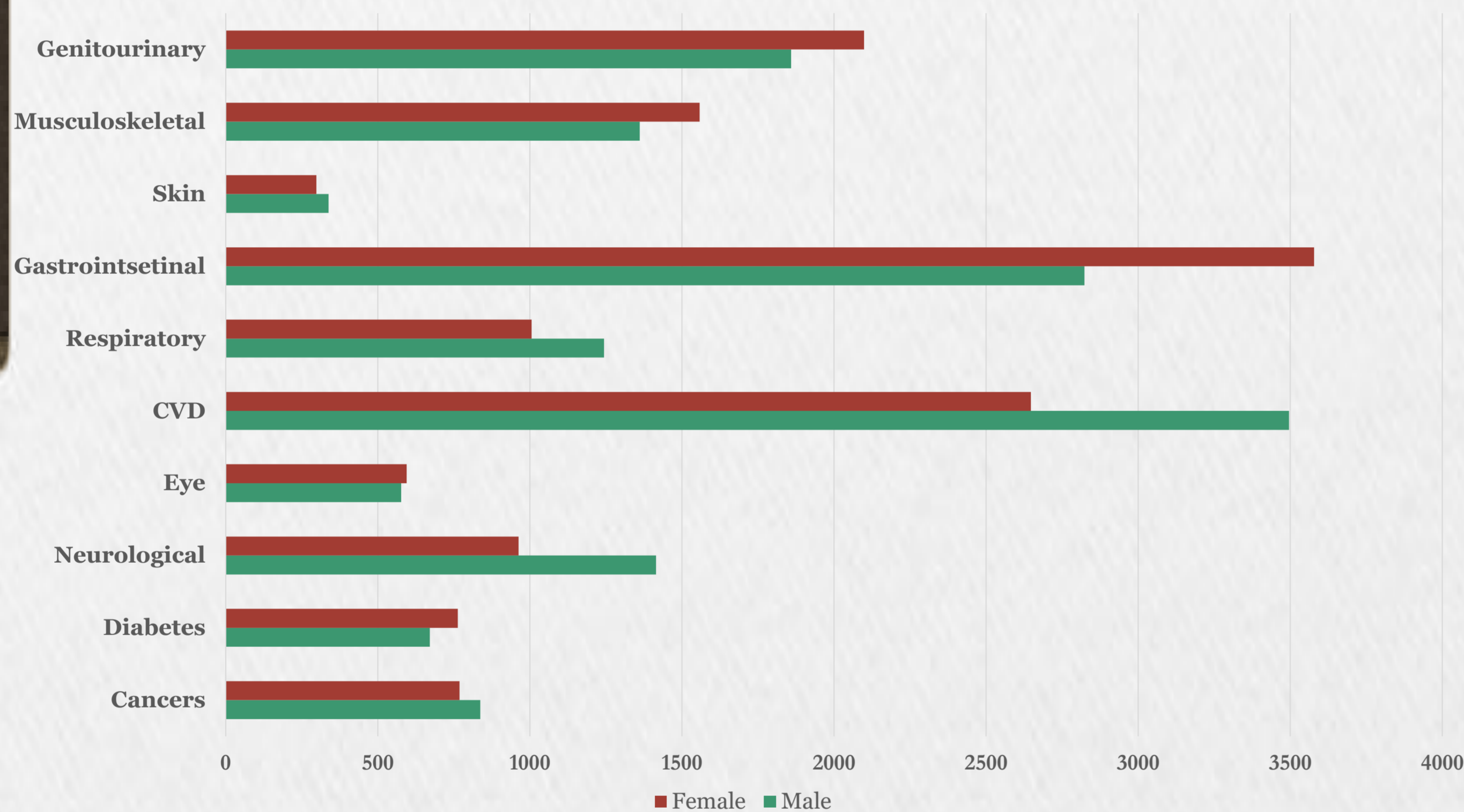
$$\ln HCC^{men} - \ln HCC^{women} = \beta^{men} \chi^{men} - \beta^{women} \chi^{women}$$

$$\rightarrow \beta^{women} \Delta \chi + \chi^{women} \Delta \beta + \Delta \chi \Delta \beta$$

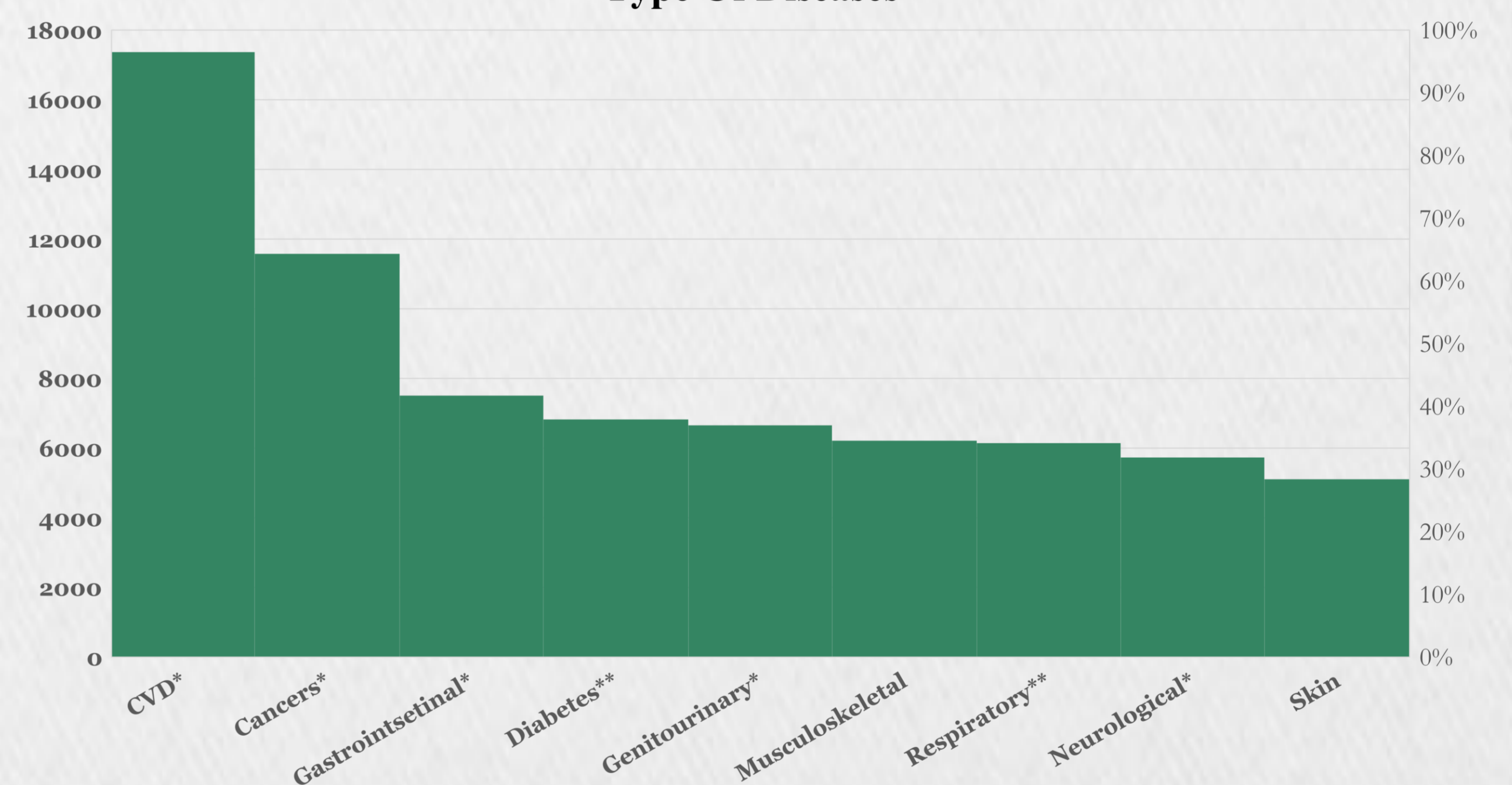
Endowment Effect {E} + Coefficient Effect {C} + Interaction Effect {CE}

Results

Disease-wise gender profile of hospitalisation cases



Absolute Gender Gap in HCC By Type Of Diseases



Oaxaca-Blinder Decomposition Results

Variables	Coefficient
Men	9.53
Women	9.22
Raw Difference {R}	0.31
Endowments {E}	0.22
Coefficients {C}	0.07
Interaction {CE}	0.02

Unexplained (U){C+(1-D)CE}:	0.09
Explained (V) {E+D*CE}:	0.216
% unexplained {U/R}:	29.5
% explained (V/R):	70.5

Contributors to the Gender Gap in HCC:

- Catastrophic Health Expenditures -42%
- Age group (60 and above)- 16%
- Other Factors: Not Insured, Source of Finance (Borrowings), Place of Hospitalization (Other State)

Discussion & Conclusion

- Women bear more burden for diseases like cardiovascular diseases, cancers, psychiatric and neurological, genitourinary, musculoskeletal, and gastrointestinal diseases in HCC
- Increased gender discrimination in Indian households - facing catastrophic health expenditures.
- Lack of coverage under healthcare expenditure support schemes lags women behind their male counterparts in HCC.
- Government should focus on disease-specific treatment facilities to break gender asymmetries in healthcare costs in India

References

- World Health Organisation. (2022). NONCOMMUNICABLE DISEASES PROGRESS MONITOR 2022.
- Ministry of Health and Family Welfare India. (2021). NFHS-5 India Fact Sheet.
- Ministry of Statistics and Programme Implementation. (2020). Health in India.
- Ladusingh, L., Mohanty, S. K., & Thangjam, M. (2018). Triple burden of disease and out-of-pocket healthcare expenditure of women in India. *PLoS ONE*, 13(5).
- Rahimi, E., & Hashemi Nazari, S. S. (2021). A detailed explanation and graphical representation of the Blinder-Oaxaca decomposition method with its application in health inequalities. *Emerging Themes in Epidemiology*, 18(1).

