Gender Differences in Health Care, Status, and Use: Spotlight on Men’s Health
Findings from the 2013 Kaiser Men’s Health Survey and 2013 Kaiser Women’s Health Survey
Table 1: Health problems reported by women and men, by age and income status

<table>
<thead>
<tr>
<th>Share of men and women reporting:</th>
<th>Total</th>
<th>Total</th>
<th>Age Group</th>
<th>Poverty Level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Women</td>
<td>Men</td>
<td>Ages 18-44</td>
<td>Ages 45-64</td>
</tr>
<tr>
<td>Fair/poor health</td>
<td>15%</td>
<td>17%</td>
<td>13%</td>
<td>24%</td>
</tr>
<tr>
<td>Have disability, handicap, or</td>
<td>14%</td>
<td>11%</td>
<td>6%</td>
<td>18%*</td>
</tr>
<tr>
<td>chronic disease that limits</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>activity</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have ongoing condition that</td>
<td>43%</td>
<td>30%*</td>
<td>15%</td>
<td>52%*</td>
</tr>
<tr>
<td>requires regular monitoring,</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>care, or medication</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

NOTE: Among men and women ages 18-64. The Federal Poverty Level (FPL) was $19,530 for a family of three in 2013. *Indicates a statistically significant difference from Total Women, Ages 18-44, 200% FPL or greater, p<.05.
Men are less likely to experience barriers to care due to costs

Insurance deductibles, copays, and services not covered by insurance pose financial barriers to care for many men and women, impeding access to care. One in four women and one in five men reported they delayed or went without care because they couldn’t afford it.

Share of women and men reporting that in past 12 months they experienced following due to costs:

- Delayed or went without care
  - Total Women: 26%
  - Total Men: 20%*
- Put off or postponed preventive health services
  - Total Women: 20%
  - Total Men: 16%
- Skipped recommended medical test or treatment
  - Total Women: 20%
  - Total Men: 14%*
- Didn't fill prescription or cut/skipped doses of medicines
  - Total Women: 22%
  - Total Men: 12%*
- Experienced trouble getting mental health care
  - Total Women: 9%
  - Total Men: 7%

NOTE: Among men and women ages 18-64. *Indicates a statistically significant difference from Total Women, p<.05.
Many uninsured and low-income men do face cost-related barriers to care

Poor and uninsured men are much more likely to face cost-related barriers than their higher income, insured counterparts. Half of uninsured men, and four in ten low-income men delayed or went without care because they couldn’t afford it, 3-4 times the rate of their higher income and insured men.

Share of men reporting that in past 12 months they experienced following due to costs:

- **Delayed or went without needed care**:
  - Less than 200% FPL: 12%
  - 200% FPL or greater: 11%
  - Uninsured: 51%
  - Insured: 11%

- **Put off/postponed preventive care**:
  - Less than 200% FPL: 31%
  - 200% FPL or greater: 11%
  - Uninsured: 42%
  - Insured: 9%

- **Skipped recommended medical test/treatment**:
  - Less than 200% FPL: 27%
  - 200% FPL or greater: 9%
  - Uninsured: 35%
  - Insured: 8%

- **Didn’t fill prescription or cut/skipped dose**:
  - Less than 200% FPL: 22%
  - 200% FPL or greater: 10%
  - Uninsured: 24%
  - Insured: 9%

- **Trouble getting mental health care**:
  - Less than 200% FPL: 13%
  - 200% FPL or greater: 4%
  - Uninsured: 20%
  - Insured: 3%

NOTE: Among men ages 18-64. The Federal Poverty Level (FPL) was $19,530 for a family of three in 2013.

*Indicates a statistically significant difference from 200% FPL or greater, Insured, p<.05.

In addition to cost, transportation, childcare problems, and time impede men and women from receiving care. Nearly one in ten men and women report that transportation caused them to delay or put off care, while issues relating to time – either finding time, or getting time off work – caused a higher share of men and women to forgo care.

### Share of women and men reporting they delayed or went without care due to the following reasons:

<table>
<thead>
<tr>
<th>Reason</th>
<th>Total Women</th>
<th>Total Men</th>
</tr>
</thead>
<tbody>
<tr>
<td>Childcare problems</td>
<td>15%</td>
<td>6%*</td>
</tr>
<tr>
<td>Transportation problems</td>
<td>9%</td>
<td>8%</td>
</tr>
<tr>
<td>Couldn't find time to go</td>
<td>23%</td>
<td>18%*</td>
</tr>
<tr>
<td>to the doctor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Couldn't take time off work</td>
<td>19%</td>
<td>17%</td>
</tr>
</tbody>
</table>

*Indicates a statistically significant difference from Total Women, p<.05.

NOTE: Among men and women ages 18-64. Childcare problems among adults with children.

Nonfinancial barriers to receiving health care are more common among low-income men

Low-income men are over six times more likely to forgo care due to problems in transportation, and twice as likely to do so due to the inability to take time off work compared to higher income men.

Share of men reporting they delayed or went without care due to the following reasons:

- Transportation problems:
  - Less than 200% FPL: 20%*
  - 200% FPL or greater: 3%

- Couldn't find time to go to the doctor:
  - Less than 200% FPL: 25%*
  - 200% FPL or greater: 16%

- Couldn't take time off work:
  - Less than 200% FPL: 30%*
  - 200% FPL or greater: 13%

NOTE: Among men ages 18-64. The Federal Poverty Level (FPL) was $19,530 for a family of three in 2013.
*Indicates a statistically significant difference from 200% FPL or greater, p<.05.
Men and women experience trouble paying medical bills. Medical bills force many men to make trade offs that affect their ability to manage basic necessities, dip into savings or take out loans.

**Figure 4**

One in five men have difficulty paying for medical bills and for many, bills affect financial stability.

Among men reporting they had trouble with medical bills, the share reporting they or a family member have experienced the following as a result of those medical bills:

- **Used up most of savings**: 58%
- **Difficulty paying for basic necessities (food, heat, housing)**: 46%
- **Borrowed money from family or friends or got a loan**: 52%
- **Been contacted by a collection agency**: 48%

**Share of men and women reporting that they or a family member:**

- **Experience trouble paying medical bills in prior 12 months**:
  - Total Women: 28%
  - Total Men: 19%*

**NOTE:** Among men and women ages 18-64. The Federal Poverty Level (FPL) was $19,530 for a family of three in 2013.

*Indicates a statistically significant difference from Total Women, p<.05.

**SOURCE:** Kaiser Family Foundation, 2013 Kaiser Men’s Health Survey and 2013 Kaiser Women’s Health Survey.
Fewer men than women have a place they go for care when they are sick or need medical advice

About seven in ten men (72%) report they have a usual source of care, compared to 86% of women. Only half of uninsured men and 62% of low income men report having a regular place they go to for care.

<table>
<thead>
<tr>
<th>Share of women and men reporting they have a place that they usually go to when they are sick or need advice about health:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Women</td>
</tr>
<tr>
<td>Men</td>
</tr>
<tr>
<td>Total Men</td>
</tr>
<tr>
<td>Less than 200% FPL</td>
</tr>
<tr>
<td>200% FPL or greater</td>
</tr>
<tr>
<td>Uninsured</td>
</tr>
<tr>
<td>Insured</td>
</tr>
</tbody>
</table>

NOTE: Among men and women ages 18 to 64. The Federal Poverty Level (FPL) was $19,530 for a family of three in 2013.
*Indicates a statistically significant difference from Total Women, 200% FPL or greater, Insured, p< .05.
Figure 6

Men identify a clinician they usually go to for care less often than women

Nearly seven in ten men (68%) report they have a specific clinician they see for routine care, compared to 81% of all women. However, these rates are significantly lower for low income and uninsured men.

Share of women and men reporting they have a regular clinician that they usually go to when sick or need advice about health:

<table>
<thead>
<tr>
<th>Sex</th>
<th>Women and Men</th>
<th>Men Only</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Women</td>
<td>81%</td>
<td></td>
</tr>
<tr>
<td>Total Men</td>
<td>68%*</td>
<td></td>
</tr>
</tbody>
</table>

|| Income                          | Men Only |
|-------------------------------|----------|
| Less than 200% FPL or greater| 75%      |
| 200% FPL or greater           | 55%*     |
| Uninsured                     | 35%*     |
| Insured                       | 77%      |

NOTE: Among men and women ages 18 to 64. The Federal Poverty Level (FPL) was $19,530 for a family of three in 2013.*Indicates a statistically significant difference from Total Women, 200% FPL or greater, Insured, p<.05.
Men are less likely than women to have seen a provider in the past two years

Three in four men reported having had a medical visit in the past two years. The rates are significantly lower among low-income and uninsured men, however, with just half of uninsured men reporting they have had a visit in the past two years.

<table>
<thead>
<tr>
<th>Poverty level</th>
<th>Total Men</th>
<th>Men</th>
<th>Uninsured</th>
<th>Insured</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lower than 200% FPL</td>
<td>64%*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>200% FPL or greater</td>
<td>81%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

NOTE: Among men and women ages 18-64. The Federal Poverty Level (FPL) was $19,530 for a family of three in 2013. *Indicates a statistically significant difference from Total Women, 200% FPL or greater, Insured, p<.05.

Figure 8

Adult men report lower routine use of prescription drugs to manage health concerns compared to women

Nearly two thirds of men do not use prescription drugs on a routine basis, a rate that is considerably below women. Nearly one in five, however, takes three or more prescriptions on a regular basis.

Share of women and men reporting how many prescription drugs they take:

**Women**
- No Rx Use, 44%
- 1-2 Rx, 31%
- 3-5 Rx, 16%
- 6 Rx or more, 9%

**Men**
- No Rx Use, 63%
- 1-2 Rx, 19%
- 3-5 Rx, 12%
- 6 Rx or more, 6%

NOTE: Among men and women ages 18-64.
Men are less likely than women to get recommended screening services

Preventive care can improve health by identifying health problems earlier and preventing illnesses from manifesting into more serious conditions. Most men have had blood pressure and cholesterol tests, but when comparing by insurance status, rates are lower among the uninsured for all screenings.

NOTE: Among men and women ages 18-64. *Indicates a statistically significant different from Total Women, Insured Men, p<.05.

Men are more likely to get counseling on diet, exercise and nutrition than for substance use

Men have higher rates of obesity, cardiovascular problems, and problems with drug or alcohol use than women. Still, less than two thirds of men talk to their doctors about diet and exercise and only one in three men had recent conversations about smoking and alcohol or drug use.

<table>
<thead>
<tr>
<th>Topic</th>
<th>Total Women</th>
<th>Total Men</th>
<th>Uninsured Men</th>
<th>Insured Men</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diet, exercise and nutrition</td>
<td>70%</td>
<td>69%</td>
<td>62%*</td>
<td>37%*</td>
</tr>
<tr>
<td>Alcohol or drug use</td>
<td>31%</td>
<td>32%</td>
<td>32%</td>
<td>33%</td>
</tr>
<tr>
<td>Smoking</td>
<td>44%</td>
<td>42%</td>
<td>39%</td>
<td>43%</td>
</tr>
</tbody>
</table>

NOTE: Among men ages 18-64. *Indicates a statistically significant different from Total Women, Insured Men, p<.05.

Few men receive counseling on mental health or violence and safety

Men are less likely than women to receive counseling on mental health from their clinicians (30% vs 41%, respectively). Only 16% of men report receiving counseling on violence and safety from health care providers.

Share of men reporting they received counseling on following topics from a provider in the past 3 years:

- Mental health issues, such as anxiety or depression:
  - Less than 200% FPL: 33%
  - 200% FPL or greater: 30%
  - Uninsured Men: 31%
  - Insured Men: 24%

- Violence and Safety:
  - Less than 200% FPL: 15%
  - 200% FPL or greater: 16%
  - Uninsured Men: 16%
  - Insured Men: 16%

NOTE: Among men ages 18-64. *Indicates a statistically significant different from 200% FPL or greater, Insured Men, p<.05.
Few men get counseling about sexual health

Counseling on sexual health care allows clinicians to provide patient education, screen for high-risk behaviors, and identify the need for additional testing services. While it is recommended for men, very few report they have talked with a provider recently about their sexual history, as well as HIV and STI risks.

Share of women and men reporting they have received counseling in the following topics in the past two years:

- **Total Women**
- **Total Men**
- **Uninsured Men**
- **Insured Men**

### Figure 12

**Sexual History**
- Total Women: 38%
- Total Men: 25%
- Uninsured Men: 25%
- Insured Men: 24%

**HIV Counseling**
- Total Women: 23%
- Total Men: 20%
- Uninsured Men: 27%
- Insured Men: 18%

**STI Counseling**
- Total Women: 19%
- Total Men: 15%
- Uninsured Men: 21%
- Insured Men: 13%

**NOTE:** Among men and women ages 18-64. *Indicates a statistically significant different from Total Women, Insured Men, p<.05. **SOURCE:** Kaiser Family Foundation, 2013 Kaiser Men’s Health Survey and 2013 Kaiser Women’s Health Survey.
More than half of adult men who report HIV testing incorrectly assume it is a routine part of an exam

Over one in three men (37%) report that they received an HIV test in the past two years, but more than half of them incorrectly assume that the test is routinely administered, suggesting that the actual screening rate is lower than 37%.

Share of men reporting that in past two years they:
- Did not receive HIV test 60%
- Received HIV Test 37%

Among men who reporting receiving an HIV test, share who say:
- Asked to be tested 32%
- Doctor recommended test 6%
- Impression test was routine part of exam 55%

NOTE: Among men ages 18-64. Don’t know/refused answers not included.