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**Title: Gender Disparity in Household Medical Expenditure in Bangladesh**



Health is an important development goal as epitomized in the third Sustainable Development Goal—to ensure healthy lives and promote well-being for all at all ages. However, a sizable fraction of the population remain vulnerable to health shocks and unable to cope with high medical costs, particularly in developing countries, due to the lack of access to adequate healthcare services and health insurance. The situation may be particularly severe for females in patriarchal countries like Bangladesh because of the gender disparity in the intrahousehold allocation of resources for health, an issue largely ignored in the existing literature. Using three rounds of nationally-representative household surveys, we investigate the gender disparity in out-of-pocket medical expenditure within households in Bangladesh between 2000 and 2010. We find that females are less likely to have medical expenditure than males. Further, conditional on having positive medical expenditure, females spend significantly less on medical care than males. This is not because females need less medical services. Female may in fact have higher demand for medical care due to pregnancy-related conditions and longer expected years of life in ill health. In our data, females are more likely to suffer from chronic and acute illness than males. When we focus on the subsample of people with chronic or acute illness, females tend to have lower medical expenditure than males in the intensive margin, though there is no significant gender disparity in medical expenditure in the extensive margin. In addition, females are more likely to be prevented from seeking medical treatment than man by high treatment costs. Therefore, even though females have higher demand for medical care than males, females face larger financial difficulty to meet their needs. This study complements the existing literature that tend to focus on accessibility and utilization of health services, especially for children and pregnant women. This study also underscores the impending need to step up the efforts to promote gender equity in the allocation of medical expenditure taking account of the gender disparity in the intrahousehold resource allocation.