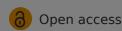




▶ Volume 3, Issue s2 ▶ Health inequalities among older men and

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Volume 3, 2010 - <u>Issue s2</u>: Special Issue: Growing older in Africa and Asia: Multicentre study on ageing, health and well-being. An INDEPTH WHO-SAGE collaboration (Supplement 2)



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Supplement 2, 2010

Health inequalities among older men and women in Africa and Asia: evidence from eight Health and Demographic Surveillance System sites in the INDEPTH WHO-SAGE Study

Nawi Ng , Paul Kowal, Kathleen Kahn, Nirmala Naidoo, Salim Abdullah, Ayaga Bawah, ... show all

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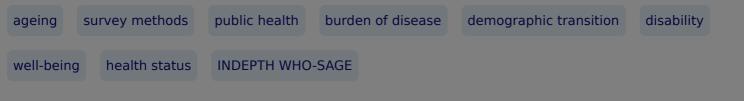
Objectives: To determine the extent to which demographic and socio-economic factors impact upon measures of health in older populations in Africa and Asia; to examine sex differences in health and further explain how these differences can be attributed to demographic and socio-economic determinants.

Methods: A total of 46,269 individuals aged 50 years and over in eight Health and Demographic Surveillance System (HDSS) sites within the INDEPTH Network were studied during 2006–2007 using an abbreviated version of the WHO Study on global AGEing and adult health (SAGE) Wave I instrument. The survey data were then linked to longitudinal HDSS background information. A health score was calculated based on self-reported health derived from eight health domains. Multivariable regression and post-regression decomposition provide ways of measuring and explaining the health score gap between men and women.

Results: Older men have better self-reported health than older women. Differences in household socio-economic levels, age, education levels, marital status and living arrangements explained from about 82% and 71% of the gaps in health score observed between men and women in South Africa and Kenya, respectively, to almost nothing in Bangladesh. Different health domains contributed differently to the overall health scores for men and women in each country.

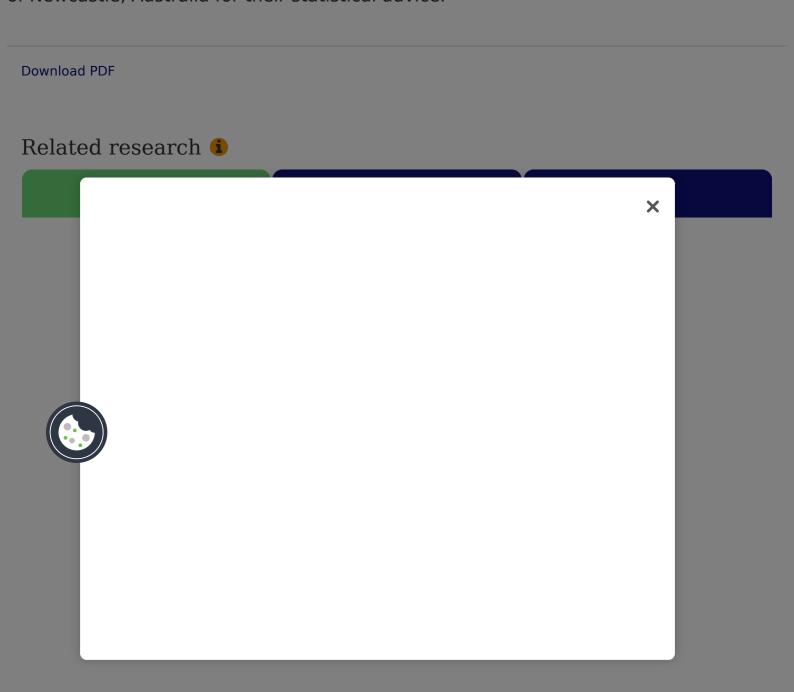
Conclusi orted health X in low- a in ted that sex demogra difference of inequality found in ferences in socio-de reported health o gs. The overa n and sleep es are inants to warrante which th lation for a alth more ev promotion stionnaire Access t d dataset (includir

(see Supplementary files under Reading Tools online). To obtain a password for the dataset, please send a request with 'SAGE data' as its subject, detailing how you propose to use the data, to global.health@epiph.umu.se



Acknowledgements

The authors would like to acknowledge the help of Dr. Richard Gibson and Dr. Jenny Stewart Williams from the Research Center on Gender, Health, and Ageing, University of Newcastle, Australia for their statistical advice.



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