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Gender differences in spousal household material status estimation

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Dear Editor,

Gender differences in socio-economic inequalities in mortality are well known. [1] However, gender differences in self-reported socio-economic status in public health surveys were much less frequently investigated. We aimed to compare the material status estimates provided by men and women in spousal pairs, obtained from the larger genetic epidemiology study in Croatia that was focusing on the families, thus enabling spousal pairs analysis. A total of 182 spousal pairs from the Adriatic island of Vis were included in this study. Household material status was estimated as the equally weighted sum of 16 questions on various items that were either present or absent from the household, as in our previous study. [2] Examinees were also asked to provide the information on their education level (years of schooling). Additionally, we asked examinees to provide information on three questions that were used as control questions: examinee's marital age, their spouse's marital age and a number of children they have. The data were analysed with the paired non-parametric Wilcoxon test. The results indicated no gender difference in any of the three control questions. As expected on the basis of the official population Census, [3] men had significantly higher education level than women (10.5±3.2 vs. 9.6±3.3 years, respectivelly; P<0.001). Additionally, men provided significantly higher self-reported material status estimates than women (10.1±2.2 vs. 9.8±2.4, respectivelly; P=0.027). This result indicates that either men were prone to overestimation, or women were prone to underestimation of the household material status. Theoretically, the only way to further explore these differences would be to compare the responses with the actual household, which was well beyond the scope of this study. The finding of unequal gender estimates in this population are even more interesting knowing that we had previously described high level of socio-economic homogeneity and virtual lack of health inequalities in the Vis Island population. [2] Admittedly, these results might be confined to the investigated island population and not very prevalent in other populations. Nevertheless, we propose that differences in selfreported socio-economic estimates depending on the examinee's gender should be taken into account, especially in studies that use gender-dependent socio-economic estimates in pooled analyses.

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