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**The Impact of Gender on the Wealth-Health Gradient:  
Longitudinal Evidence from Germany using Personal Wealth**

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**Abstract**

This study focuses on the intersection of economic inequality and gender in the production of health. We argue for a more systematic examination of the interaction between, on the one hand, economic wealth personally owned by individuals and wealth owned by their partners and, on the other hand, gender in the social patterning of health within heterosexual couples. Thereby, we go beyond a simplistic view that wealth is fully pooled within households. To the best of our knowledge, no other study has provided a direct examination of the extent to which the effect of wealth on health differs by gender yet. More specifically, we ask how personal wealth and partners' wealth is associated with health for women and men in Germany. Thereby, this study contributes to the literature on the wealth-health gradient and gender inequality by providing an examination of the strength of the association between wealth and health by gender.

The data for this study were from the German Socio-Economic Panel (SOEP) for the survey years 2002, 2007 and 2012. We estimated a series of longitudinal regression models

predicting health of individuals as a function of their personal wealth, their partners' wealth, gender, personal income, household income and other socio-demographic attributes. Such an analysis allowed examining whether the association between personal economic resources, partners' resources and health differs by gender. The preliminary results revealed gender differences in wealth-health gradient. Specifically, we found that wealth inequalities in health were higher among women than among men across the three years studied. Our results emphasize the importance of using an integrated approach for the analysis of health inequalities, simultaneously considering wealth and gender, in order fully to understand the social determinants of health.

**Keywords:** Wealth-health gradient, gender inequality, health inequality, longitudinal analysis, personal wealth