SENATE STAFF ANALYSIS AND ECONOMIC IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

BILL:	SM 1948						
SPONSOR:	Senator Clary						
SUBJECT:	Office of Men's Health						
DATE:	March 5, 2004	REVISED:					
ANALYST		STAFF DIRECTOR	REFERENCE	ACTION			
1. Munroe		Wilson	HC	Favorable			
2			RC				
3							
4							
5							
6.							

I. Summary:

The memorial urges the Congress of the United States to support S. 1028 and H.R. 1734, which amend the Public Health Service Act to establish an Office of Men's Health. The whereas clauses of the memorial express legislative findings.

II. Present Situation:

Legislation has been filed in the Congress of the United States to amend the Public Health Service Act (42 U.S.C. 300u et seq.) to require the Secretary of the United States Department of Health and Human Services to establish an Office of Men's Health and appoint a Director to administer the duties of that office. The legislation would also require the Secretary of Health and Human Services, acting through the Director of the Office of Men's Health, to submit to the Congress a report describing the activities of the office, including findings that the Director has made regarding men's health.

The United States Department of Health and Human Services has established an Office on Women's Health that focuses on women's health issues and works on issues relating to research, health care services, and education that have historically put the health of women at risk.² The Office on Women's Health that is established in the Centers for Disease Control and Prevention also provides information on men's health issues. National Men's Health Week is celebrated annually as the week that precedes and includes Father's Day.³ The Centers for Disease Control and Prevention produces publications and other materials related to men's health, including fact

¹ See "Men's Health Act of 2003" S.1028 filed by Senator Michael D. Crapo, and H.R. 1734 filed by Representative Randy Cunningham.

² The Office on Women's Health in the U.S. Dept. of Health and Human Services at http://www.4woman.gov/owh/>.

³ Senate Joint Resolution 179 was signed by the President on May 31, 1994, and became Public Law 103-264.

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sheets, recommendations, reports, disease trends, and program strategies. In 2001, the leading causes of death among men were heart disease, cancer, unintentional injuries, stroke, chronic lower respiratory diseases, diabetes, influenza and pneumonia, suicide, kidney disease, and chronic liver disease. Among the leading causes of cancer death in men, prostate cancer is second, behind lung cancer. When compared with all causes of death in men over age 45, prostate cancer ranks fifth. According to the Centers for Disease Control and Prevention, males are at higher risk than females for motor vehicle crashes, falls, drowning, and homicide.

Life expectancy is a measure often used to gauge the overall health of a population. As a summary measure of mortality, life expectancy represents the average number of years of life that could be expected if current death rates were to remain constant. During the 20th century, life expectancy at birth increased from 48 to 74 years for men and from 51 to almost 80 years for women. Life expectancy at age 65 also increased during the last century. Among men, life expectancy at age 65 rose from 12 to 16 years and among women from 12 to 19 years.⁶

III. Effect of Proposed Changes:

The memorial expresses legislative findings that male morbidity and mortality from preventable causes is substantial, with significant and alarming disparities among subpopulations of men based on race, ethnicity, and socioeconomic status. The silent health crisis is affecting the health and well-being of American men. The National Center for Health Statistics has shown that men have higher age-adjusted death rates than women for each of the top 10 leading causes of death in the United States. Men are almost twice as likely as women to die from heart disease, and the incidence of stroke is over 10 percent higher in men than in women. Men are 50 percent more likely to die of cancer than women.

The life expectancy gap between men and women has steadily increased from 1 year in 1920 to 5.5 years in 2000. Seven out of ten "baby boom" women will outlive their husbands and can expect to be widows for 15 to 20 years. Relative to men, older women are three times more likely to be living alone, and are nearly twice as likely to live in poverty. More than one-half the elderly widows living in poverty were not poor before the death of their husbands. Studies show that the huge disparity between men and women is due in part to a lack of awareness, poor health education, and the low number of male-specific health programs, and men are one-half as likely as women to visit a doctor for regular physician check-ups or to obtain preventive screening tests for serious disease.

Men's health is a concern for employers who lose productive employees and who pay the cost of medical care. Men's health is a concern for federal and state governments and society which absorb the enormous costs of premature death and disability. Every state has formed a commission to address women's issues or has established a women's health program but only seven states have a commission to address men's issues or a men's health program. The education of men, their families, and health care providers about the importance of early detection of male health problems can result in the reduction of mortality rates of diseases that

⁴ CDC "Leading Causes of Death Males- United States, 2001, cited at: http://www.cdc.gov/od/spotlight/nmhw/lcod.htm.

⁵ See Centers for Disease Control, "Prostate Screening," at < http://www.cdc.gov/cancer/prostate/prospdf/prosguide.pdf>.

⁶ National Center for Health Statistics. Health, United States, 2003. p. 46

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are male-specific and may improve the health of American and the country's overall economic well-being.

The memorial urges the Congress of the United States to support S. 1028 and H.R. 1734, which amend the Public Health Service Act to establish an Office of Men's Health.

The Legislature of the State of Florida resolves that a copy of this memorial be delivered to the President of the United States, the President of the United States Senate, to the Speaker of the United States House of Representatives, and to each member of the Florida delegation to the Congress of the United States.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

The provisions of this bill have no impact on municipalities and the counties under the requirements of Article VII, s. 18 of the Florida Constitution.

B. Public Records/Open Meetings Issues:

The provisions of this bill have no impact on public records or open meetings issues under the requirements of Article I, s. 24(a) and (b) of the Florida Constitution.

C. Trust Funds Restrictions:

The provisions of this bill have no impact on the trust fund restrictions under the requirements of Article III, Subsection 19(f) of the Florida Constitution.

V. Economic Impact and Fiscal Note:

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None.

B. Private Sector Impact:

None.

C. Government Sector Impact:

None.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

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VIII. Amendments:

None.

This Senate staff analysis does not reflect the intent or official position of the bill's sponsor or the Florida Senate.