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Perpetuating gender inequity through uneven reporting

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We welcome the Editorial¹ on raising the profile of men's health to reach gender equity and progress on the Sustainable Development Goals. To achieve these targets, scientific journals and researchers must urgently recognise and address the role they have in perpetuating gender inequity through uneven reporting of research.

We noticed skewed reporting of inequitable health outcomes in a report of the global burden of tuberculosis.² In this comprehensive study, two-thirds of HIV-negative incident cases and deaths, and more than half of HIV-positive incident cases and deaths were in men. Yet, these critical findings were absent from the Summary, the Research in Context panel, and the Discussion, none of which mentions that being male was a major risk factor for tuberculosis. This oversight is inexplicable, particularly given *The Lancet's* guidelines for authors to report sex-disaggregated data and discuss how sex and gender might affect study findings.

The neglect of men in the global tuberculosis response is not new. Tuberculosis prevalence among men in low-income and middle-income countries is more than twice that in women, with men also substantially disadvantaged in access to diagnosis and care.³ Despite such glaring inequity, global tuberculosis policy and funding bodies have yet to prioritise men's needs.^{4,5}

Research that ignores gender inequities helps to perpetuate them. The research community has a vital part to play. Researchers and editors have a moral imperative to highlight, discuss, and make recommendations to address sex disparities in service access and outcomes, whether these affect women or men.

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We declare no competing interests.

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