

Healthy life expectancy is an important indicator of population health, as it indicates whether any gains in life expectancy are lived in good health or with some health issues and disabilities. A greater number of healthy life years generally means a healthier workforce, fewer early retirements due to health problems, and reduced or postponed long-term care needs.

The main indicator of healthy life years used in the EU is the number of years lived free of activity limitations due to health problems (in other words, disability-free life expectancy). On average across EU countries, men could expect to live 81% of their lives free of disability in 2018, while this proportion was only 77% among women (Figure 3.5). The lower share of healthy life years among women is due to the fact that they generally report more activity limitations due to health problems at any given age and also because they live longer. Whereas the gender gap in life expectancy at birth is almost six years on average across EU countries, it is only half a year in healthy life expectancy (64.2 years for women compared with 63.7 years for men). In the Netherlands, Denmark, Portugal, Slovenia, Sweden and Finland, the number of healthy life years is lower for women than men because they report more disabilities.

In 2018, Malta and Sweden were the two countries with the highest healthy life expectancy among both women and men. In these two countries, women can expect to live about 85% of their life expectancy free of disability, while this share reaches around 90% for men. Latvia and Estonia had the lowest healthy life expectancy among both women and men, reflecting both a relatively low life expectancy and a substantial share of people's life lived with some disabilities.

As people get older, the share of the remaining years of life that they can expect to live free of disability falls. This is particularly the case among women. While women across EU countries can expect to live almost another 22 years when they reach the age of 65, only ten of these years can be expected to be free of activity limitations. For men, the remaining life expectancy at age 65 is almost four years shorter across EU countries (18 years), but they can also expect to live only about ten years free of disability (Figure 3.6).

Inequalities in healthy life years by socio-economic status are even greater than inequalities in life expectancy, because women and men with lower education or income are also more

likely to report some activity limitations throughout their lives than those with higher level of education or income. In the Netherlands, the gap in life expectancy at age 25 between the most and the least educated people was around six years in 2011, but this gap was over seven years when it comes to healthy life expectancy (Gheorghe et al., 2016).

A range of policies can contribute to increasing healthy life expectancy while reducing health inequalities, including greater efforts to prevent health problems starting early in life, promoting equal access to care for the whole population, and better managing chronic health problems when they occur to reduce their disabling effects (OECD, 2017).

Definition and comparability

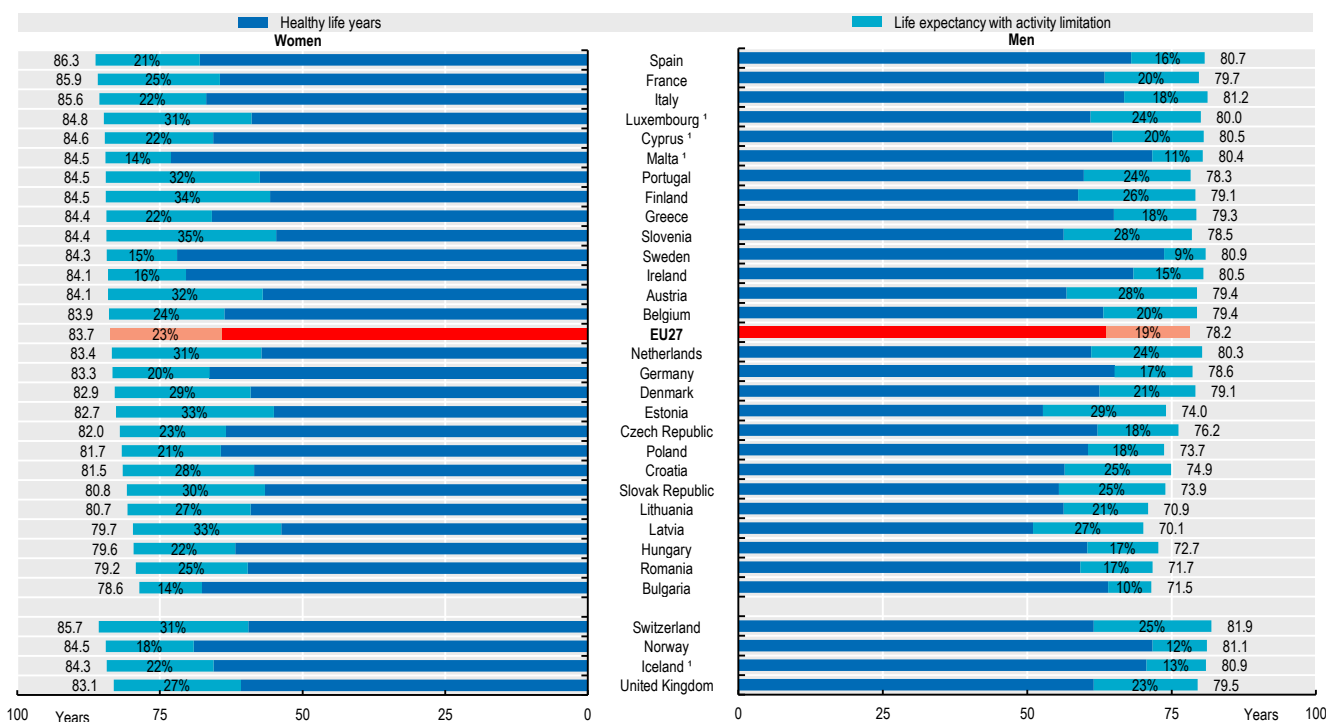
Healthy life years (HLY) are defined as the number of years spent free of long-term activity limitation (this is equivalent to disability-free life expectancy). Healthy life years are calculated annually by Eurostat based on life table data and age-specific prevalence data on long-term activity limitations. The disability measure is the Global Activity Limitation Indicator (GALI), which measures limitation in usual activities, based on the EU-SILC survey.

The comparability of data on healthy life years is limited by the fact that the indicator is derived from self-reported data which can be affected by people's subjective assessment of their activity limitation (disability) and by social and cultural factors. There are also differences across countries in the formulation of the question on disability in national languages in EU-SILC, limiting data comparability.

References

- Gheorghe, M. et al. (2016), "Health inequalities in the Netherlands: trends in quality-adjusted life expectancy by educational level", *European Journal of Public Health*, Vol. 26/5, pp. 794-799.
- OECD (2017), *Preventing Ageing Unequally*, OECD Publishing, Paris, <http://dx.doi.org/10.1787/9789264279087-en>.

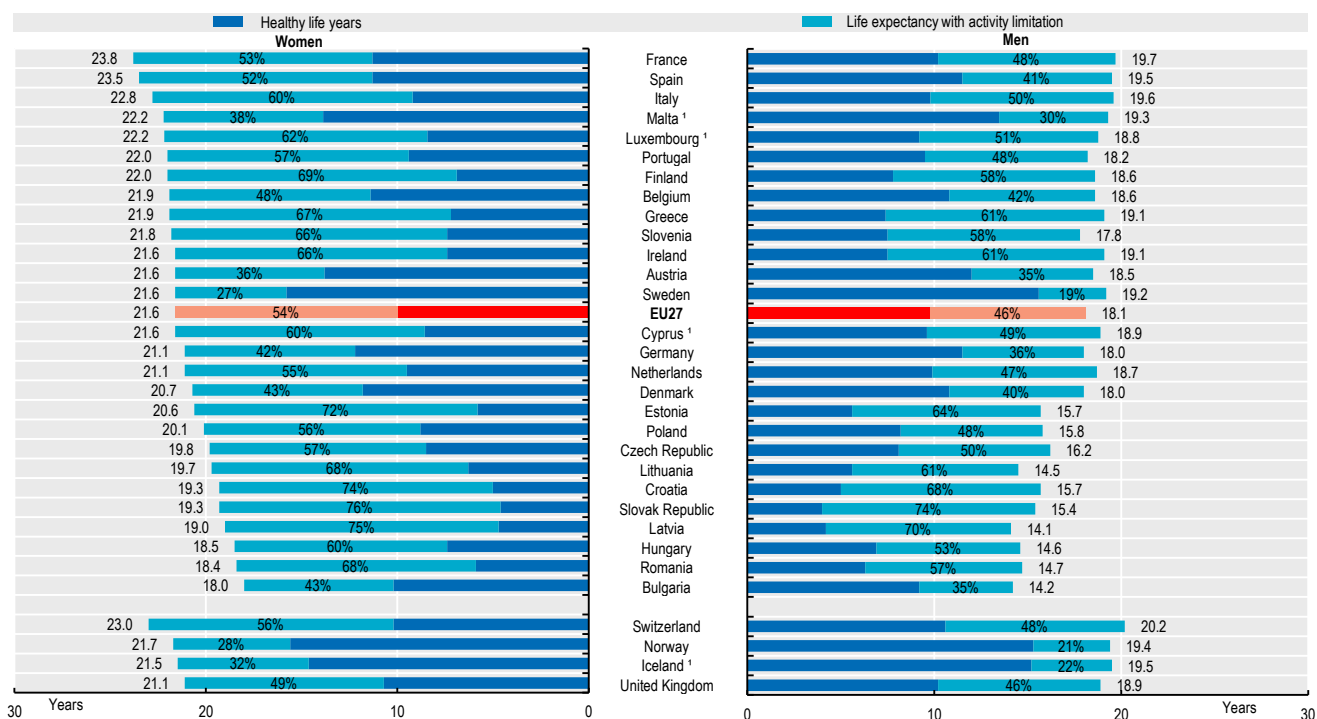
Figure 3.5. Life expectancy and healthy life years at birth, by gender, 2018 (or nearest year)



Note: The EU average is weighted. Data comparability is limited because of cultural factors and different formulations of question in EU-SILC. 1. Three-year average. Source: Eurostat Database.

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Figure 3.6. Life expectancy and healthy life years at 65, by gender, 2018 (or nearest year)



Note: The EU average is weighted. Data comparability is limited because of cultural factors and different formulations of question in EU-SILC. 1. Three-year average. Source: Eurostat Database.

StatLink <https://stat.link/tyhncw>



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