

Life expectancy and healthy life expectancy at age 65

All OECD countries have experienced tremendous gains in life expectancy at age 65 for both men and women in recent decades, although these gains have been diminished by the impact of COVID-19. On average across OECD countries, life expectancy at age 65 increased by 6 years between 1970 and 2021, and by 2.1 years between 2000 and 2021. Five countries (Korea, Ireland, Chile, Australia and Portugal) enjoyed gains of at least 3 years between 2000 and 2021; five countries (United States, Poland, Latvia, Hungary and the Slovak Republic) experienced an increase of less than 1 year over the period, and one country (Mexico) experienced a slight decrease of 0.3 years (Figure 10.3). In Lithuania, life expectancy at age 65 remained unchanged between 2000 and 2021.

On average across OECD countries in 2021, people at age 65 could expect to live a further 19.5 years. Life expectancy at age 65 is around 3.3 years higher for women than for men. This gender gap has not changed substantially since 2000, when life expectancy at age 65 was 3.5 years higher for women than men. Among OECD countries, life expectancy at age 65 in 2021 was highest for women in Spain (23.5 years) and for men in Iceland (20.5 years). It was lowest for women in the Slovak Republic (17.1 years) and for men in Latvia (12.7 years) (Figure 10.4).

While almost all OECD countries experienced gains in life expectancy at age 65 between 2000 and 2021, not all additional years are lived in good health. The number of healthy life-years at age 65 varies substantially across OECD countries (Figure 10.4). In the European Union (EU), an indicator of disability-free life expectancy known as “healthy life-years” is calculated regularly, based on a general question about disability in the EU Statistics on Income and Living Conditions (EU-SILC) survey. On average across OECD countries participating in the survey, the number of healthy life-years at age 65 was 10 years for women and 9.6 for men in 2021 – a noticeably smaller difference between men and women than that for general life expectancy at age 65. Healthy life expectancy at age 65 was close to or above 14 years for both men and women in Norway and Sweden; for men, this was nearly 2 years above the next-best performing countries (Iceland and Ireland). Healthy life expectancy at 65 was around 5 years or less for both men and women in the Slovak Republic and Latvia. In these countries, women spend nearly three-quarters of their additional life-years in poor health, compared to one-third or less in Norway and Sweden.

The COVID-19 pandemic had a significant effect on life expectancy, especially among older populations, who are at a higher risk of developing severe symptoms and dying because of underlying health conditions and frailty. More than 90% of all cumulative COVID-19 deaths were among people aged 60 and over, and more than 50% were among those aged 80 and over on average across 22 OECD countries by April 2022 (OECD, 2023^[1]). Between 2019 and 2021, life expectancy at age 65 declined in all 26 OECD countries with available data, falling by an average of 6 months. Life expectancy at age 65 declined by more than 1 year in nine

countries (the Slovak Republic, Poland, Latvia, Lithuania, the Czech Republic, Estonia, Hungary, Greece and the United States), while it increased slightly in eight countries (Japan, Mexico, New Zealand, Costa Rica, Iceland, Korea, Australia and Chile). As population ageing continues, OECD countries will need to anticipate health challenges that can disproportionately affect older people, and make structural changes to strengthen resilience.

Definition and comparability

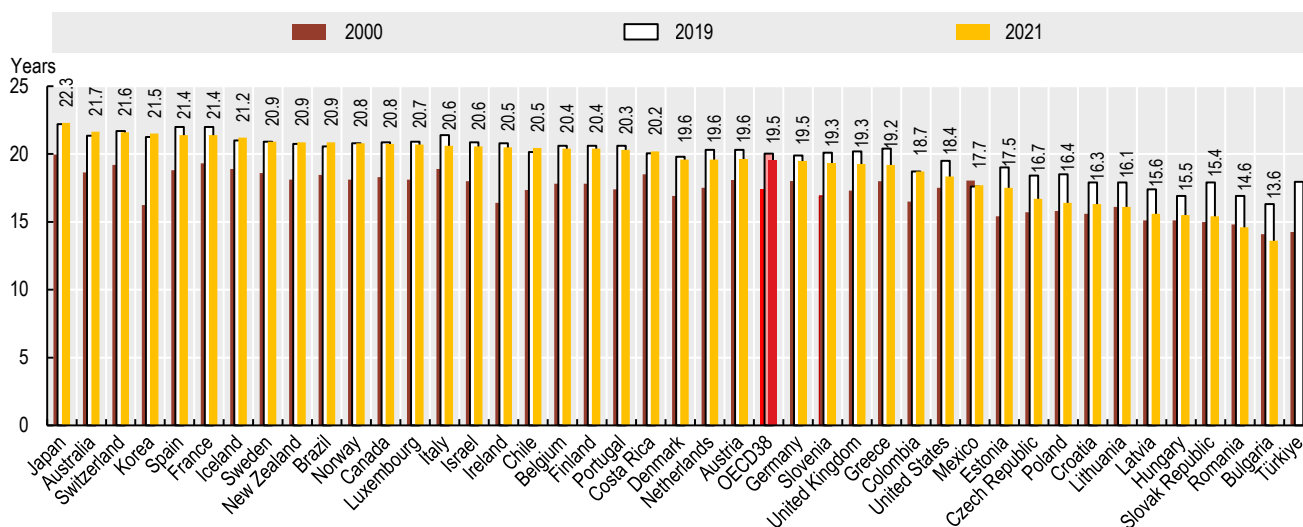
Life expectancy measures how long on average a person of a given age can expect to live if current death rates do not change. However, the actual age-specific death rate of any particular birth cohort cannot be known in advance. If rates are falling, as has been the case over recent decades in OECD countries, actual life spans will be higher than life expectancy calculated using current death rates. The methodology used to calculate life expectancy can vary slightly between countries. This can change a country’s estimates by a fraction of a year. Data for life expectancy at age 65 come from Eurostat for EU countries. For non-EU OECD countries the data come from OECD Health Statistics 2023, where the OECD Secretariat calculates life expectancy at age 65 for all OECD countries, using an unweighted average of life expectancy of men and women.

Disability-free life expectancy (or “healthy life-years”) is defined as the number of years spent free of activity limitation. In Europe, this indicator is calculated annually by Eurostat for EU countries and some European Free Trade Association countries. The disability measure is based on the global activity limitation indicator (GALI) question in the EU-SILC survey: “For at least the past six months, have you been hampered because of a health problem in activities people usually do? Yes, strongly limited / yes, limited / no, not limited”. While healthy life-years is the most comparable indicator to date, there are still problems with translation of the GALI question, although it does appear to reflect other health and disability measures satisfactorily (Jagger et al., 2010^[2]).

References

- Jagger, C. et al. (2010), “The Global Activity Limitation Index measured function and disability similarly across European countries”, *Journal of Clinical Epidemiology*, Vol. 63/8, pp. 892-899, <https://doi.org/10.1016/j.jclinepi.2009.11.002>. [2]
- OECD (2023), *Ready for the Next Crisis? Investing in Health System Resilience*, OECD Health Policy Studies, OECD Publishing, Paris, <https://doi.org/10.1787/1e53cf80-en>. [1]

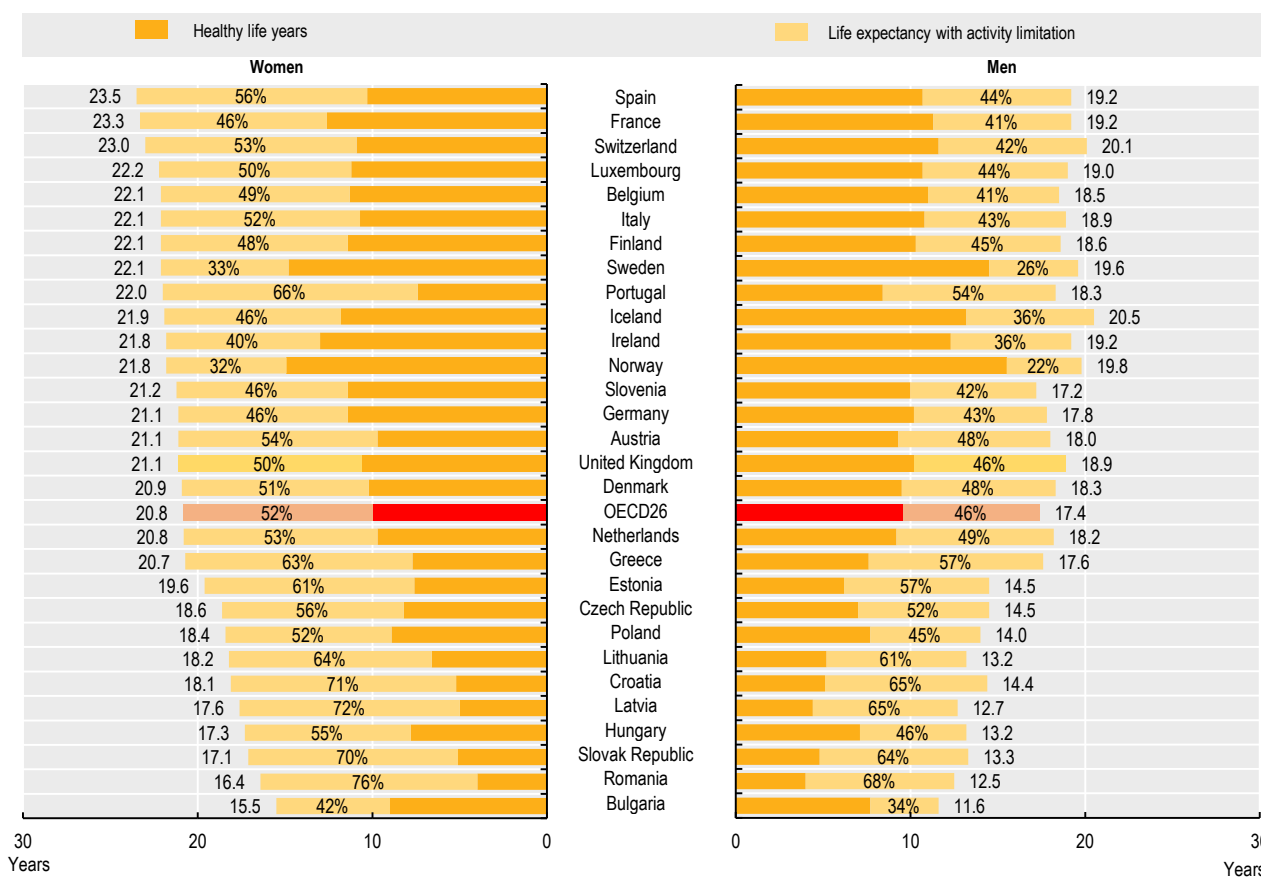
Figure 10.3. Life expectancy at age 65, 2000, 2019 and 2021 (or nearest year)



Sources: Eurostat Database and OECD Health Statistics 2023.

StatLink <https://stat.link/bdo90r>

Figure 10.4. Life expectancy and healthy life-years at age 65, by sex, 2021 (or nearest year)



Note: Data comparability is limited because of cultural factors and different formulations of the GALI question in the EU-SILC survey. 1. Data for Iceland and the United Kingdom refer to 2018 2. Data for Norway refer to 2020.

Source: Eurostat Database.

StatLink <https://stat.link/eqso85>



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