

Life expectancy and healthy life expectancy at age 65

Life expectancy at age 65 has increased significantly for both men and women over the past few decades in OECD countries, rising by 5.5 years on average since 1970 (Figure 11.3). Some of the factors explaining these gains in life expectancy at age 65 include advances in medical care combined with greater access to health care, healthier lifestyles and improved living conditions before and after people reach age 65.

Japan and Korea have achieved the highest gains in life expectancy at age 65 since 1970, with an increase of almost eight years. The gains have been much more modest in Hungary, the Slovak Republic and Mexico, with an increase of only about three years.

In 2013, people at age 65 in OECD countries could expect to live another 19.5 years: 21 years for women and 18 years for men (Figure 11.4). This gender gap of three years on average across OECD countries has been fairly stable over time. In 2013, life expectancy at age 65 was highest in Japan for women (24 years) and in Switzerland for men (nearly 20 years), followed by France in both cases. Among OECD countries, it was lowest in Hungary for both women and men.

Countries' relative positions with respect to life expectancy at age 65 mirror closely their relative positions with regard to life expectancy at age 80. Life expectancy at age 80 in 2013 was highest in France and Japan for women (who can expect to live an additional 11.5 years) and highest in France and Spain for men (who can expect to live more than 9 years).

Increased life expectancy at age 65 does not necessarily mean that the extra years lived are in good health. In Europe, an indicator of disability-free life expectancy known as "healthy life years" is calculated regularly, based on a general question about disability in the European Union Survey of Income and Living Conditions (EU-SILC). Given that this indicator has only recently been developed, long-time series are not yet available and efforts continue to improve its comparability.

Among European countries participating in the survey, the average number of healthy life years at age 65 was almost the same for women and men, at 9.5 years for women and 9.4 years for men in 2013 (Figure 11.5). The absence of any significant gender gap in healthy life years means that many of the additional years of life that women experience relative to men are lived with some type of activity limitation. Nordic countries (with the exception of Finland) had the highest number of healthy life years at age 65 in 2013, with women and men in Iceland and Norway expecting to live an additional 15 years free from disability on average.

Life expectancy and healthy life expectancy at age 65 years vary by educational status. For both men and women, highly educated people are likely to live longer and in better health. Differences in life expectancy by education level are particularly large in Central and Eastern European countries, especially for men. In the Czech Republic, 65-year-old men with a high level of education could expect to live seven years longer than those with a low education level in 2012. By contrast, differences in life expectancy by education level are much smaller (less than two years) in Nordic countries (Denmark, Finland, Norway and Sweden) and Portugal (Eurostat Database 2015).

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 the past 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.

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 EFTA countries. The disability measure is the Global Activity Limitation Indicator (GALI) which comes from the European Union Statistics on Income and Living Conditions (EU-SILC) survey. The GALI measures limitation in usual activities due to health problems. 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 satisfactorily reflect other health and disability measures (Jagger et al., 2010).

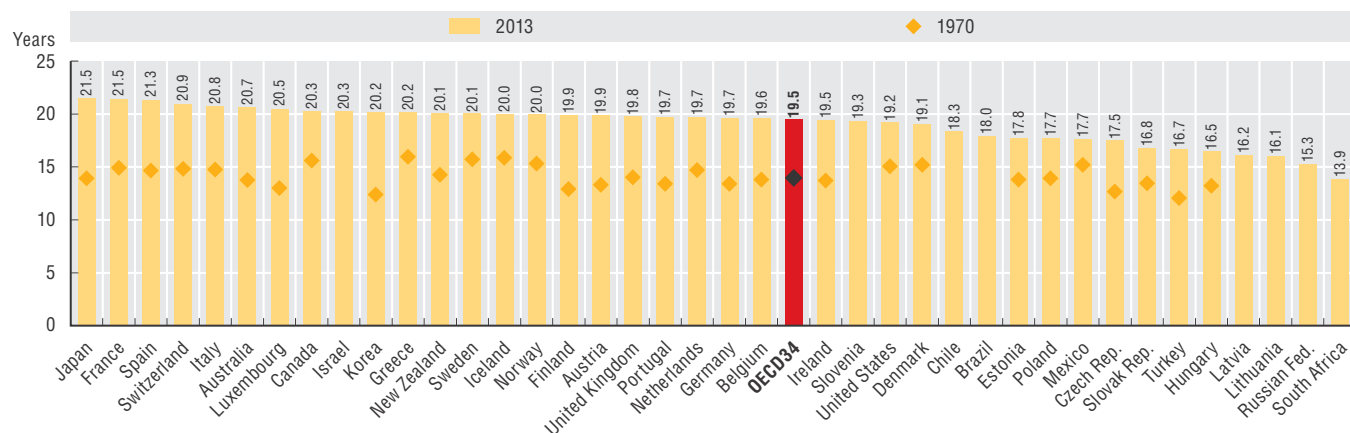
References

Jagger, C. et al. (2010), "The Global Activity Limitation Indicator (GALI) Measured Function and Disability Similarly across European Countries", *Journal of Clinical Epidemiology*, Vol. 63, pp. 892-899.

11. AGEING AND LONG-TERM CARE

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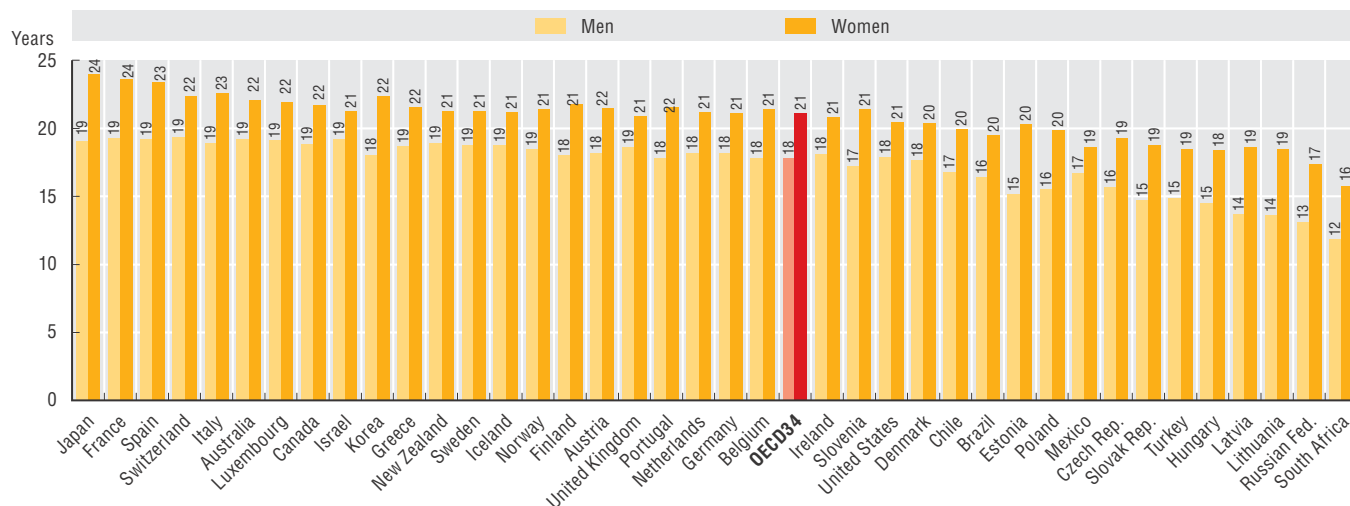
11.3. Life expectancy at age 65, 1970 and 2013 (or nearest years)



Source: OECD Health Statistics 2015, <http://dx.doi.org/10.1787/health-data-en>.

StatLink <http://dx.doi.org/10.1787/888933281383>

11.4. Life expectancy at age 65 by sex, 2013 (or nearest year)

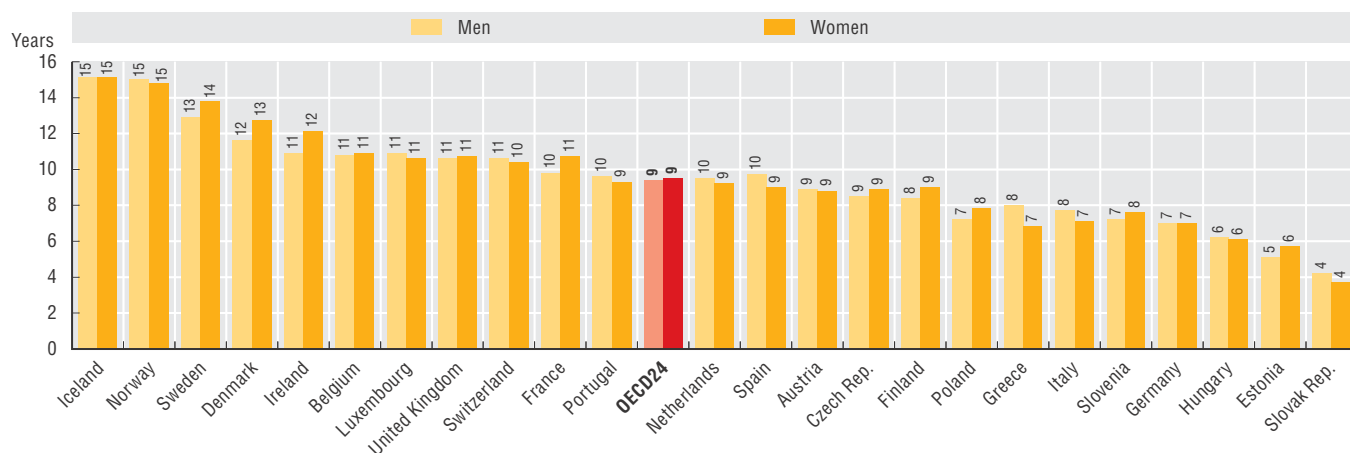


Note: Countries are ranked in descending order of life expectancy for the whole population.

Source: OECD Health Statistics 2015, <http://dx.doi.org/10.1787/health-data-en>.

StatLink <http://dx.doi.org/10.1787/888933281383>

11.5. Healthy life years at age 65, European countries, 2013

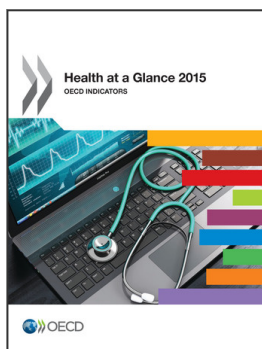


Note: Countries are ranked in descending order of healthy life expectancy for the whole population.

Source: Eurostat Database 2015.

StatLink <http://dx.doi.org/10.1787/888933281383>

Information on data for Israel: <http://oe.cd/israel-disclaimer>



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