

Self-reported health and disability at age 65

Most OECD countries conduct regular health surveys which allow respondents to report on different aspects of their health. These surveys often include a question on self-perceived health status, along the lines of: “How is your health in general?”. Although these questions are subjective, indicators of perceived general health have been found to be a good predictor of future health care use and mortality (DeSalvo, 2005; Bond et al., 2006). However, cross-country differences may be difficult to interpret, as survey questions may differ slightly and cultural factors can affect responses.

Keeping these limitations in mind, more than half of the population aged 65 years and over report being in good health in 13 of the 34 OECD countries (Figure 11.6). The highest rates are in New Zealand, Canada and the United States, where more than three-quarters of older people report good health, but the response categories offered to survey respondents in these three countries are different from those used in most other OECD countries, introducing an upward bias in the results (see box on “Definition and comparability” below). Among European countries, older people in Sweden, Switzerland, Norway and Ireland report the best health status, with more than 60% assessing their health to be good.

At the other end of the scale, less than 20% of over-65s in Portugal, Hungary, Estonia, Poland, Turkey, the Slovak Republic and Korea report being in good health. In nearly all countries, men over 65 were more likely than women to rate their health to be good. On average across OECD countries, 47% of men aged over 65 rated their health to be good or better, while 41% of women did so.

The percentage of the population aged 65 years and over who rate their health as being good or better has remained fairly stable over the past 30 years in most countries where long time series are available. There has been significant improvement however in the United States, where the share has increased from 65% in 1982 to 77% in 2013.

Measures of disability are not yet standardised across countries, limiting the possibility for comparisons. In Europe, based on the EU Statistics on Income and Living Conditions survey, half of all over-65s reported that they were limited either to some extent or severely in their usual daily activities because of a health problem in 2013 (Figure 11.7). This ranged from a proportion of less than 25% in Norway and Iceland up to nearly 75% in the Slovak Republic and close to 70% in Estonia. On average across 25 European OECD countries, most limitations reported were moderate, 18% of the population aged 65 and over reported severe limitations, which often correspond to needs for long-term care.

Women were more likely than men to report severe activity limitations due to a health problem in all European countries covered by this survey, with the exception of Poland. The proportion of people aged 65 and over reporting some severe activity limitations was highest in Greece and the Slovak Republic, followed by Italy and Estonia (Figure 11.8).

Definition and comparability

Self-reported health reflects people’s overall perception of their own health, including both physical and psychological dimensions. Typically, survey respondents are asked a question such as: “How is your health in general? Very good, good, fair, poor, very poor”. *OECD Health Statistics* provides figures related to the proportion of people rating their health to be “good/very good” combined.

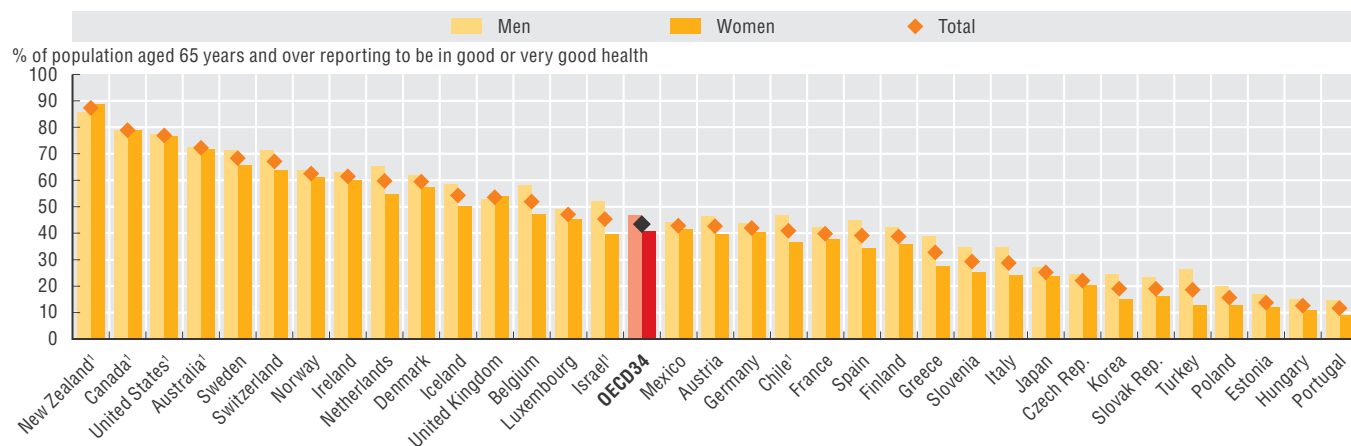
Caution is required in making cross-country comparisons of perceived health status, for at least two reasons. First, people’s assessment of their health is subjective and can be affected by cultural factors. Second, there are variations in the question and answer categories used to measure perceived health across surveys/countries. In particular, the response scale used in Australia, Canada, New Zealand and the United States is asymmetric (skewed on the positive side), including the following response categories: “excellent, very good, good, fair, poor”. The data reported in *OECD Health Statistics* refer to respondents answering one of the three positive responses (“excellent, very good or good”). By contrast, in most other OECD countries, the response scale is symmetric, with response categories being: “very good, good, fair, poor, very poor”. The data reported from these countries refer only to the first two categories (“very good, good”). Such difference in response categories biases upward the results from those countries that are using an asymmetric scale.

Perceived general disability is measured in the EU-SILC survey through the question: “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”. Persons in institutions are not surveyed, resulting in an underestimation of disability prevalence. Again, the measure is subjective, and cultural factors may affect survey responses.

References

- Bond, J. et al. (2006), “Self-rated Health Status as a Predictor of Death, Functional and Cognitive Impairments: A Longitudinal cohort Study”, *European Journal of Ageing*, Vol. 3, pp. 193-206.
- DeSalvo, K.B. et al. (2005), “Predicting Mortality and Health-care Utilization with a Single Question”, *Health Services Research*, Vol. 40, pp. 1234-1246.

11.6. Perceived health status in adults aged 65 years and over, 2013 (or nearest year)

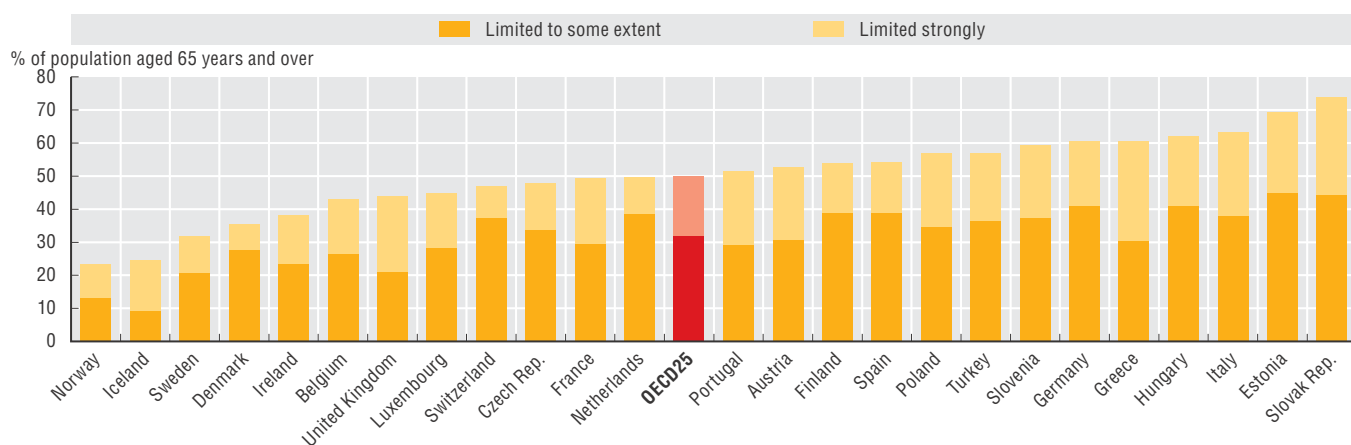


1. Results not directly comparable with other countries due to methodological differences (resulting in an upward bias).

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

StatLink <http://dx.doi.org/10.1787/888933281398>

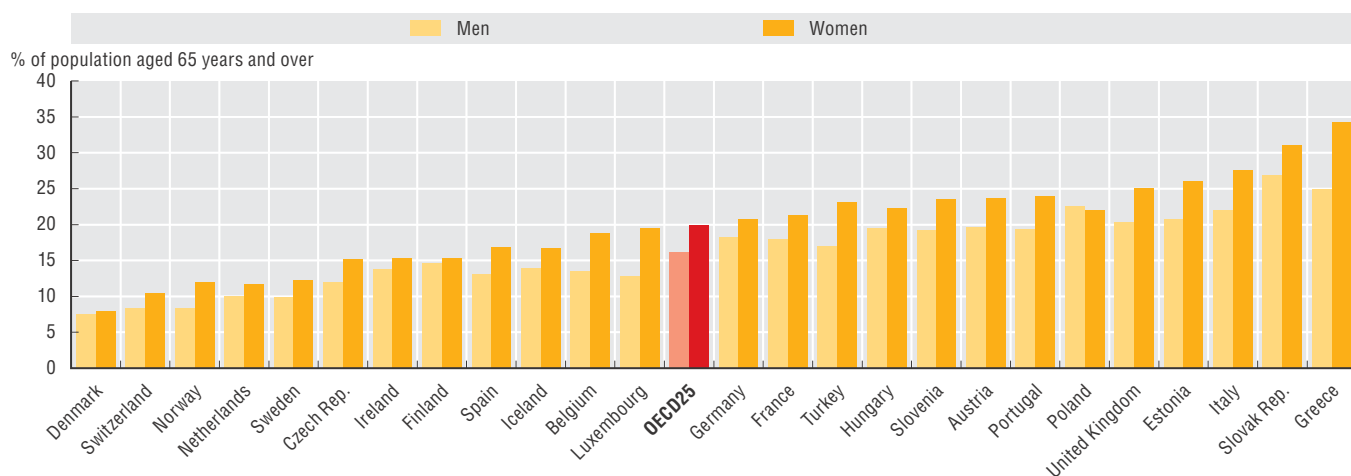
11.7. Limitations in daily activities in adults aged 65 years and over, European countries, 2013



Source: Eurostat Database 2015.

StatLink <http://dx.doi.org/10.1787/888933281398>

11.8. Strong limitations in daily activities in adults aged 65 years and over, European countries, 2013



Note: Countries are ranked in ascending order of percentage with strong limitations in daily activities for the whole population.

Source: Eurostat Database 2015.

StatLink <http://dx.doi.org/10.1787/888933281398>

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



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