AGEING

Population ageing is characterised by a rise in the share of the older people resulting from longer life expectancy (see indicator “Life expectancy at birth” in Chapter 3) and declining fertility rates. In Asia-Pacific countries and territories, since 2000, life expectancy has increased by about 4.5 years and fertility has decreased from 2.6 children per woman of reproductive age, to the population replacement level of 2.1. This has been mainly due to better access to reproductive health care, primarily a wider use of contraceptives (see indicator “Reproductive health” in Chapter 4). Population ageing reflects the success of health and development policies over the last few decades.

The share of the population aged 65 years and over is expected to increase by nearly two and half times in lower-middle and low income Asia-Pacific countries in the next decades to reach 15.1% for females and 11.7% for males in 2050. This is still lower than the high-income and upper-middle income countries average of 31.4% and 19.1% for females and 26.7% and 17.6% for males respectively in 2050 (Figure 3.34, left panel). The share of older people will be particularly large in Hong Kong, China; Japan; the Republic of Korea and Singapore where more than one third of the population will be aged 65 and over in 2050. Ageing wears a largely woman’s face as women tend to outlive men.

Globally, the speed of ageing in the region will be unprecedented. It is particularly fast in Brunei Darussalam and Mongolia, where the share of the population over 65 is expected to increase by five- and four-fold respectively between 2015 and 2050. Many low and middle income countries are faced with much shorter timeframes to prepare for the challenges posed by the ageing of their populations.

The growth in the share of the population aged 80 years and over will be even more dramatic (Figure 3.34, right panel). On average across lower-middle and low income Asia-Pacific countries, the share of the population aged 80 years and over is expected to increase three and half times between 2015 and 2050, to reach 3.5% for females and 2.2% for males. The proportion is expected to triple for females and to quadruple for males in high-income and upper-middle income countries during the same period. The proportion is expected to grow by over eight times in Brunei Darussalam and more than five times in Macau, China for both females and males, and by over six times for males in the Republic of Korea, Korea DPR and Hong Kong, China over the next decades.

The pressure of population ageing will depend on the health status of people as they become older, highlighting that the health and well-being of older people are strongly related to circumstances across their life course. Given overall numbers of older people in the population, there is likely to be a greater demand for health care that meets the need of older people in the Asia-Pacific region in coming decades. All countries in the region will urgently need to address drastic changes in demographic structures and subsequent changes in health care needs. Health promotion and disease prevention activities will increasingly need to address cognitive and functional decline, including frailty and falls. Health systems will need to be reoriented to become more responsive to older people’s needs, including by investing in integrated and person-centred service delivery, supported by health financing arrangements and a health workforce with the right skills and ways of working. The development of long-term care systems as seen in OECD countries may also be worth noting. Increasingly, there is a need to foster innovative home- and community-based long-term care pathways tailored to older people’s specific and diverse needs.

Over the next few decades, the share of the economically active population aged 15-64 is expected to decline across countries in Asia-Pacific (Figure 3.35). In 2050, the ratio of people aged 15-64 to people aged over 65 years will be around one third of the 2015 value in high- and upper-middle income Asia-Pacific countries, whereas it will be less than half the 2015 value in lower-middle and low income Asia-Pacific countries. In Singapore; the Republic of Korea; Hong Kong, China; and Japan there will be less than two persons aged 15-64 for each person aged over 65 years.

These dramatic demographic changes will affect the financing of not only health systems but also social protection systems as a whole, and also the economy. Moreover, older age often exacerbates pre-existing inequities based on income, education, gender and urban/rural residence, highlighting the importance of equity-focused policy-making in future. Population ageing does not only call for equity-focused, gender-responsive and human rights-based action within the health sector but also require collaboration across sectors to address the underlying determinants of health of older people, including housing, transport and the built environment.

Definition and comparability

Population projections are based on the most recent “medium-variant” projections from the United Nations, World Population Prospects – 2017 Revision.
3.34. Share of the population aged over 65 and 80 years by sex, 2015 and 2050

Share of the population aged over 65 years by sex, 2015 and 2050


StatLink http://dx.doi.org/10.1787/888933867588

3.35. Ratio of people aged 15-64 to people aged over 65 years, 2015 and 2050


StatLink http://dx.doi.org/10.1787/888933867607