

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 5.4 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 about 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 2015, 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 2015, life expectancy at age 65 was highest in Japan for women (24 years) and in Japan, Australia, and Iceland for men (nearly 20 years). Among OECD countries, it was lowest in Hungary for women (18 years) and in Latvia for men (14 years).

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 2015 was highest in Japan for women (who can expect to live an additional 12 years) and highest in France for men (who can expect to live an additional 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 Statistics on Income and Living Conditions (EU-SILC) survey. 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 9.3 years for women and 9.4 years for men in 2015 (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 2015. In Sweden, women could expect to live an average of an additional 17 years, and men 16 years, free of disability.

Life expectancy and healthy life expectancy 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 Slovak Republic,

65-year-old men with a high level of education could expect to live five years longer than those with a low education level in 2015. 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 (see Eurostat Database 2017).

Definition and comparability

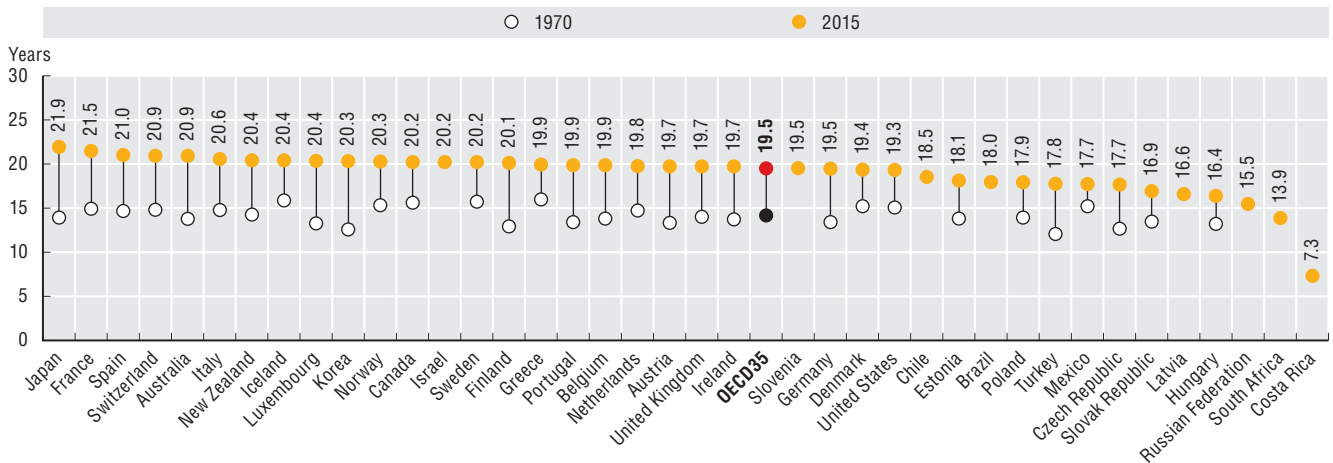
Life expectancy measures how long on average a person of a given age can expect to live, if current death rates do not change. However, the actual age-specific death rate of any particular birth cohort cannot be known in advance. If rates are falling, as has been the case over the past decades in OECD 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. Life expectancy at age 65 is the unweighted average of the life expectancy at age 65 of women and men.

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 based on the Global Activity Limitation Indicator (GALI) question, which comes from the European Union Statistics on Income and Living Conditions (EU-SILC) survey. The question asks: "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 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.
- Mäki, N. et al. (2013), "Educational Differences in Disability-free Life Expectancy: A Comparative study of Long-standing Activity Limitation in Eight European Countries", *Social Science & Medicine*, Vol. 94, pp. 1-8.

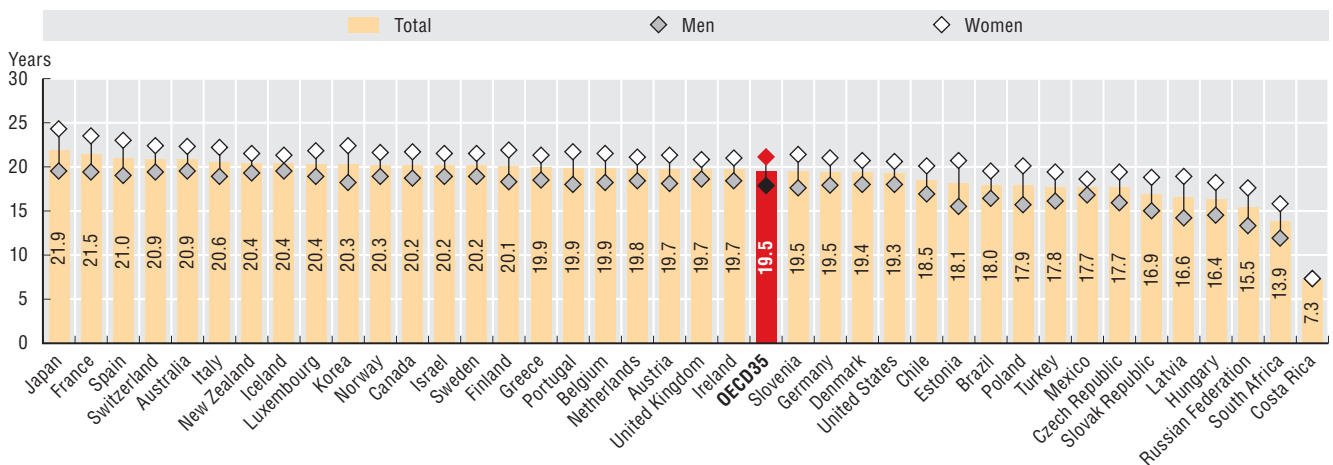
11.3. Life expectancy at age 65, 1970 and 2015 (or nearest year)



Source: OECD Health Statistics 2017.

StatLink <http://dx.doi.org/10.1787/888933605692>

11.4. Life expectancy at age 65 by sex, 2015 (or nearest year)

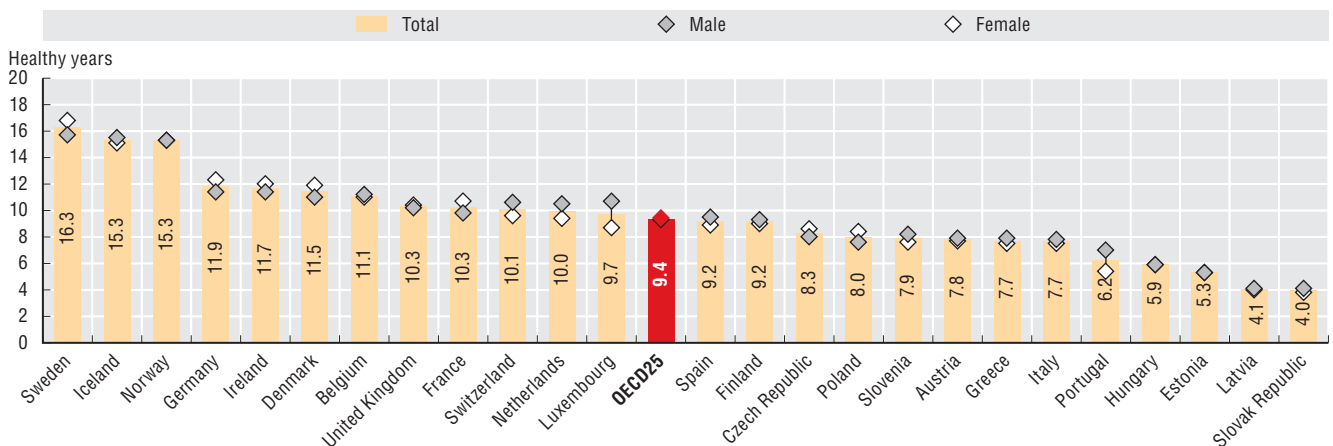


Note: Countries are ranked in descending order of healthy life expectancy for the whole population.

Source: OECD Health Statistics 2017.

StatLink <http://dx.doi.org/10.1787/888933605711>

11.5. Healthy life years at age 65, European countries, 2015 (or nearest year)



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

Source: Eurostat Database 2017.

StatLink <http://dx.doi.org/10.1787/888933605730>



From:
Health at a Glance 2017
OECD Indicators

Access the complete publication at:
https://doi.org/10.1787/health_glance-2017-en

Please cite this chapter as:

OECD (2017), "Life expectancy and healthy life expectancy at age 65", in *Health at a Glance 2017: OECD Indicators*, OECD Publishing, Paris.

DOI: https://doi.org/10.1787/health_glance-2017-74-en

This work is published under the responsibility of the Secretary-General of the OECD. The opinions expressed and arguments employed herein do not necessarily reflect the official views of OECD member countries.

This document and any map included herein are without prejudice to the status of or sovereignty over any territory, to the delimitation of international frontiers and boundaries and to the name of any territory, city or area.

You can copy, download or print OECD content for your own use, and you can include excerpts from OECD publications, databases and multimedia products in your own documents, presentations, blogs, websites and teaching materials, provided that suitable acknowledgment of OECD as source and copyright owner is given. All requests for public or commercial use and translation rights should be submitted to rights@oecd.org. Requests for permission to photocopy portions of this material for public or commercial use shall be addressed directly to the Copyright Clearance Center (CCC) at info@copyright.com or the Centre français d'exploitation du droit de copie (CFC) at contact@cfcopies.com.