

# Life Expectancy slowdown in V4 countries

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## Abstract

The main objective of the contribution is to show trends in life expectancy in Visegrád 4 (V4) countries in recent years. Life expectancy has increased in all OECD countries over the last few decades. Whilst life expectancy has increased steadily over time, there has been a slowdown in recent years. The aim of our contribution is to describe trends in recent years and then try to find which factors are behind these trends. To examine the slowdown in life expectancy improvements in recent years, changes in life expectancy at birth between 2002 and 2017 were chosen. Generally we can say that causes of this slowdown in life expectancy gains are multifaceted. Mortality at older ages is the primary driver of slowing improvements in life expectancy. It is unclear whether the current slowdown in mortality improvements is long-term trend or not. The slowdown has not been observed for long enough for statistical analysis to determine whether it will continue

**Keywords:** Life expectancy at birth, V4 countries

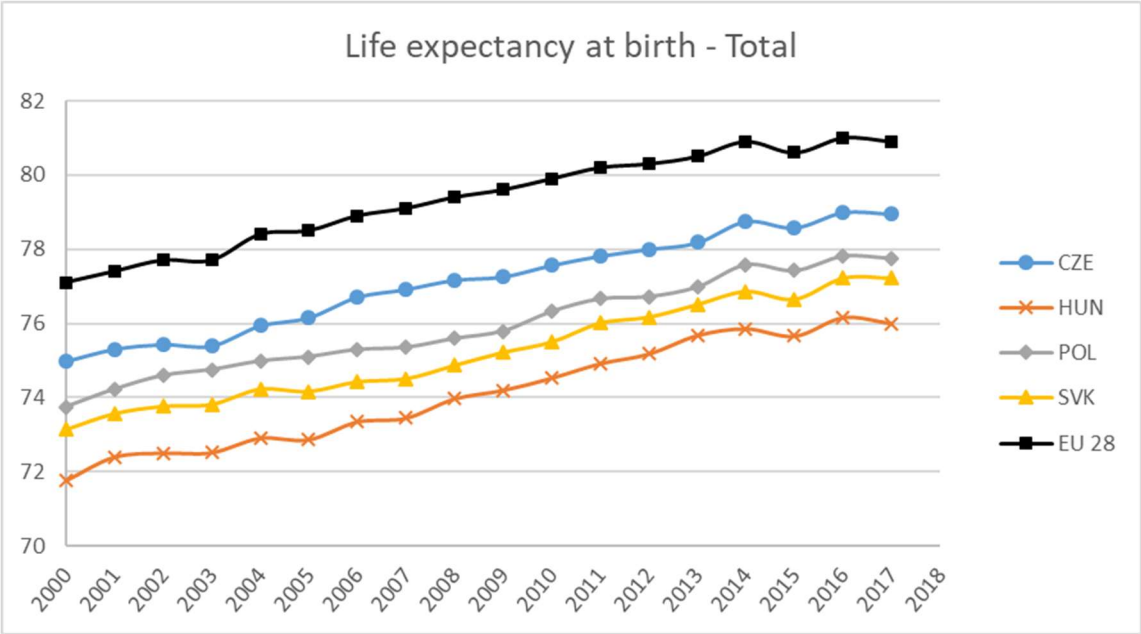
## Introduction

Life expectancy is a key indicator for the overall health of a population. Life expectancy at birth measures how long, on average, people would live based on a given set of age-specific death rates. Japan, Switzerland, Spain lead a large group of OECD countries in which life expectancy at birth exceeds 80 years. Our contribution is focusing on central and east European countries especially the Visegrad group (V4) countries – the Czech Republic, Hungary, Poland and the Slovakia. In all V4 countries life expectancy is below the EU 28 average. The Czech Republic, Poland and Slovakia have life expectancy between 77 and 80 years. Hungary has the lowest life expectancy (Table 1.), at less than 76 years in 2017.

Life expectancy has increased in all OECD countries over the last few decades. In 2017, life expectancy at birth was 80.7 years on average across OECD countries, over 10 years higher than it was in 1970.

Whilst life expectancy has increased steadily over time, there has been a slowdown in recent years. Comparing the last five years (2012-2017) with a decade earlier (2002-2007), V4 countries and OECD countries in average as well, experienced slower gains in life expectancy. These gains were slower for females than males. Naturally the question arises: Why have increases in life expectancy slowed down?

Figure 1. Life expectancy at birth – EU 28 average and V4 group countries (total) (2017)



Source: Author's illustration by Eurostat and HMD (2019)

*Table 1. Life expectancy at birth, 1970 and 2017 – EU 28 average and V4 group countries (total, male, female)*

	Life expectancy at birth, 2000			Life expectancy at birth, 2017		
	Total	Male	Female	Total	Male	Female
EU 28	77,1	73,8	80,5	80,9	78,3	83,7
CZE	75,0	71,7	78,4	79,0	76,1	82,0
HUN	71,2	67,1	75,6	75,8	72,5	79,3
POL	73,7	69,7	78,0	77,7	73,9	81,8
SVK	73,0	69,1	77,2	77,2	73,8	80,7

Source: Eurostat and HMD (2019)

Firstly we look at the trends of life expectancy in V4 countries and then try to find which factors are behind these trends.

We need to emphasize that life expectancy gains fell on average across OECD countries in 2015. The reductions in case of V4 countries were 1.2 months in Poland and 2.4 months in the Czech Republic, Hungary and Slovakia.

*Table 2. Slowdown in life expectancy gains, 2012-17 and 2002-2007 – EU 28 average and V4 group countries (total, male, female)*

	Change in life expectancy at birth, 2002-2007			Change in life expectancy at birth, 2012-2017		
	Total	Male	Female	Total	Male	Female
EU 28	1,40	1,50	1,30	0,60	0,90	0,60
CZE	1,35	1,48	1,35	0,95	1,04	0,88
HUN	1,66	1,95	1,26	0,82	1,00	0,65
POL	1,22	1,31	1,12	1,03	1,27	1,02
SVK	1,33	1,55	1,07	1,05	1,27	0,82

Source: Eurostat (2019)

*Table 3. Change in life expectancy at birth, 2014 to 2015 – OECD average and V4 group countries (total) – change in months*

OECD	CZE	HUN	POL	SVK
-1,00	-2,4	-2,4	-1,2	-2,4

Source: OECD Health Statistics (2019)

The causes of this slowdown in life expectancy gains are multifaceted. Among them belong slowing improvements in heart disease and stroke. Rising level of obesity and diabetes, as well as population ageing, have made it difficult for countries to maintain previous progress. There has been a substantial shift in the age structure of population in recent decades, the number and proportion of people older ages has increased. In recent decades, the share of the population aged 65 years or older has nearly doubled on average across OECD countries. The proportion of the population aged 65 years or over increased from less than 9% in 1960 to more than 17% in 2017. Between 2017 and 2050, the share of the population 80 and above will more than double on average in OECD countries, from 4,6% to 10,1%.

Gains in life expectancy at age 65 have slowed in recent years (exception is Slovakia) (Table 5.). Life expectancy at age 65 increased by 10 months on average in OECD countries between 2002 and 2017. Between years 2012 and 2017 this increase was just 7 months. The slowdown in life expectancy at age 65 in 2012-2017 compared with 2002-2007 may be partially explained by the severe influenza epidemic of 2014-2015, which affected frail and older populations in particular.

*Table 4. Share of the population aged 65 and over – OECD average and V4 group countries (2017)*

OECD	CZE	HUN	POL	SVK
17,4 %	19,0 %	18,8 %	16,7 %	15,3 %

Source: OECD Health Statistics (2019)

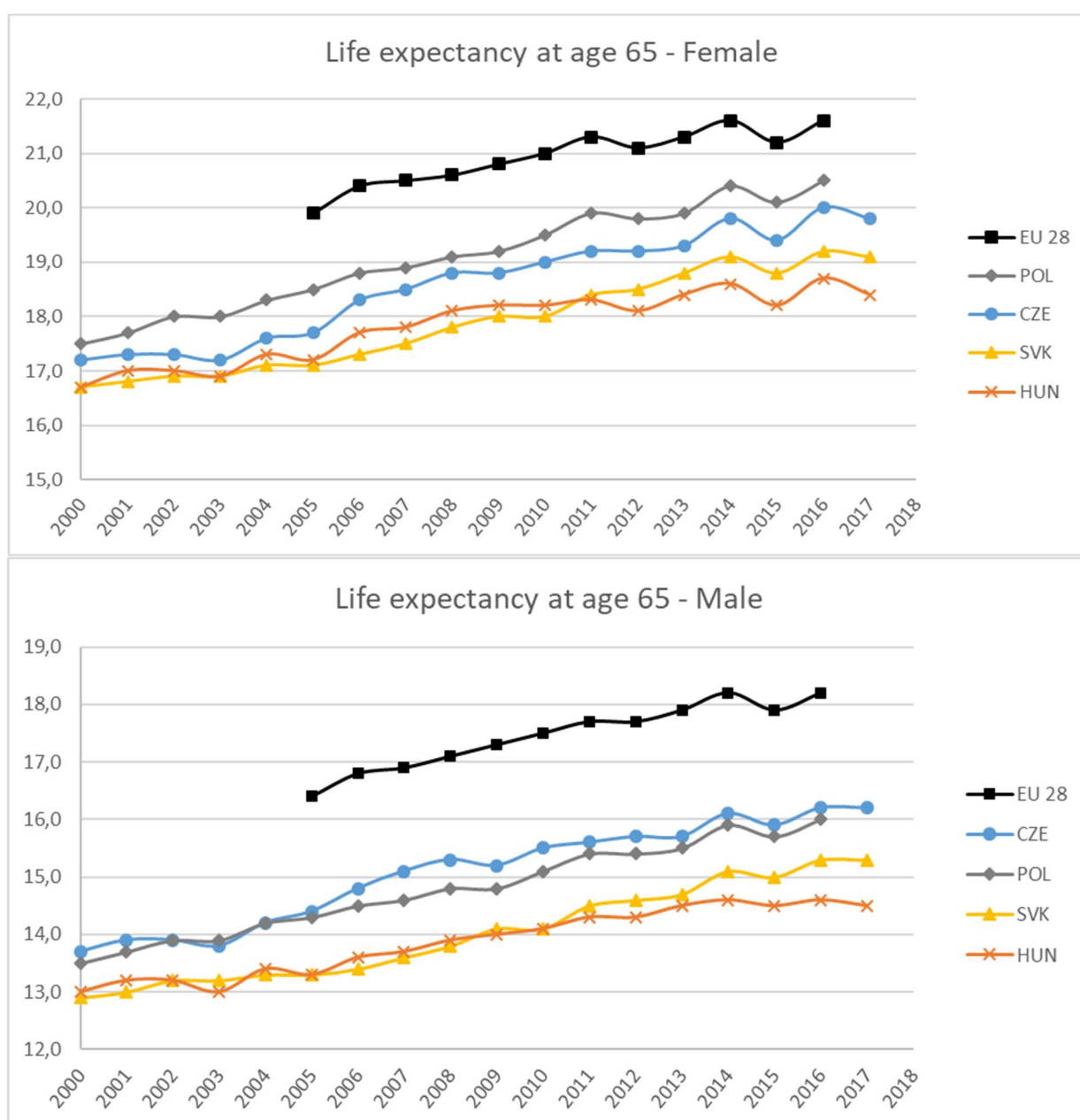
Heart disease and stroke have partly determined the trend in mortality rates in older adults, other causes of death have influenced the trend in younger people. The cause of death that had the biggest negative impact on mortality rates among younger adults was accidental poisoning due to drug or alcohol.

Table 5. Slowdown in life expectancy gains – OECD average and V4 group countries (2017) - gains in months

	OECD	CZE	HUN	POL	SVK
2002-2007	10,32	14,40	7,80	9,60	6,00
2012-2017	6,95	6,60	3,00	5,40	7,80

Source: OECD Health Statistics (2019)

Figure 2. Life expectancy at 65 – EU 28 average and V4 group countries (2017)



Source: Author's illustration by Eurostat and HMD (2019)

What is clear is that continued gains in longevity should not be taken for granted, with better protection of older people and other at-risk populations paramount to extending life expectancy.

Inequality in life expectancy has widened and the improvement in life expectancy has been slower in the more deprived areas than the less deprived area. In addition, female life expectancy in the most deprived areas has actually decreased.

There is a positive association between health spending per capita and life expectancy. V4 countries spend less than the OECD average and have lower life expectancy at birth.

The main conclusion from our contribution is that the overall slowdown in improvement is due to factors operating across a wide range of age groups, geographies and causes of death. It is not possible to attribute the recent slowdown in improvement to any single cause and it is likely that a number of factors, operating at the same time, need to be addressed. The slowdown has not been observed for long enough for statistical analysis to determine whether it will continue.

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