Population ageing and sustainable development

The Madrid International Plan of Action on Ageing (MIPAA), adopted during the Second World Assembly on Ageing in April 2002, recognized population ageing—the shift towards a larger proportion of older persons in the population—as an important global trend. MIPAA linked questions of ageing to other frameworks of social and economic development and human rights, calling for the ensurance of the well-being of older persons in an inclusive “society for all ages”. As the world population continues to age, ageing-related concerns should be incorporated into the post-2015 United Nations development agenda and sustainable development goals. This brief summarises current and future trends in population ageing, and their implications for social and economic development.

1. Global ageing to accelerate in the coming decades

The percentage of the global population aged 60 years or over increased from 8.5 per cent in 1980 to 12.3 per cent in 2015 and is projected to rise further to 21.5 per cent in 2050 (figure 1). Out of 233 countries or areas, 191 (82 per cent) experienced increases in the proportion of older persons between 1980 and 2015. Two hundred and thirty-one countries or areas (99 per cent) are expected to see an increase in the proportion aged 60 or over between 2015 and 2050.

Population ageing is a phenomenon that results from declines in fertility as well as increases in longevity, two trends that are usually associated with social and economic development.

Europe was the first region to enter the demographic transition, having begun the shift to lower fertility and increasing longevity in the late nineteenth and early twentieth centuries. As a result, today’s European population is the most aged in the world, with 24 per cent of the population aged 60 or over. Europe is projected to remain the most aged region in the coming decades, with 34 per cent of the population projected to be aged 60 or over in 2050, followed by Northern America (27 per cent), Latin America and the Caribbean (25 per cent), Asia (24 per cent) and Oceania (23 per cent).

Compared to other regions, many parts of Africa entered the demographic transition relatively recently, and thus the ageing process has only just begun: older persons accounted for just over 5 per cent of the population of Africa in 2015, but that proportion is projected to nearly double by 2050.

Figure 1: Percentage of the population aged 60 years or over, estimated for 1980-2015 and projected to 2050.

*Updated based on World Population Prospects: The 2015 Revision.
2. Most of the projected growth of the older population will take place in the global South.

Asia was home to more than half of the world’s 901 million older persons in 2015, with 508 million people aged 60 or over. Another 177 million older persons resided in Europe (20 per cent), 75 million in Northern America (8 per cent), 71 million in Latin America and the Caribbean (8 per cent), 64 million in Africa (7 per cent), and 6 million in Oceania (1 per cent).

By 2050 the number of older persons worldwide is projected to more than double to 2 billion. While that increase reflects growing numbers of older persons in all regions, Africa, Latin America and the Caribbean, and Asia are projected to see especially rapid growth of their older populations (figure 2). The population of older persons in Africa is projected to more than triple by 2050, reaching 220 million. The number of older persons in Latin America and the Caribbean will nearly triple to 200 million.

The older population is itself ageing. Among those aged 60 or over worldwide, 14 per cent were aged 80 or over in 2015. By 2050, the projected 434 million people aged 80 or over will account for 21 per cent of the global population over age 60.

The older population is and will remain predominantly female. Globally, women outlived men by 4.4 years on average between 2010 and 2015 (life expectancy at birth was 72.7 years for females compared to 68.3 years for males). As a result, women made up 54 per cent of those aged 60 or over and 61 per cent of those aged 80 or over.

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**Figure 2: Population of older persons, estimated for 2015 and projected for 2050.**

- **Aged 80 years or over**
- **Aged 60 to 79 years**

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3. As people age, they rely on various sources of financial support: labour income, assets, their families and public programmes.

In developing countries, with limited public transfer systems, assets and labour income are the major sources of financial support for old age (figure 3). During their early old age (60-69 years), net asset reallocations together with labour income finance almost all of older persons’ consumption. At more advanced ages (70 and over), these two sources continue to finance about 70 per cent of the consumption of older persons in developing countries, while transfers (both public and private) become more important. In contrast, in the developed countries public transfers are a major source of old-age support, financing 39 per cent of the consumption among 60-69 year-olds and 67 per cent among those aged 70 years or over.

Older persons contribute financially to their families. Older persons are often net providers of financial transfers to their children and grandchildren in both developed and developing countries.

In developing countries, older persons aged 60 to 69 years give net financial transfers to younger generations in an amount equivalent to 28 per cent of older persons’ consumption. They become net receivers of familial transfers only at more advanced ages (70 years or over), in an amount that accounts for 12 percent of their consumption.

In the more developed countries, familial transfers comprise a smaller share of older persons’ consumption even at more advanced ages: those aged 70 or over finance around 7 per cent of their consumption, on average, through familial transfers.

Older persons increasingly are living independently. Forty per cent of the world’s older population lives independently, that is, either alone or with a spouse only. While the percentage living independently is similar by sex, higher female life expectancy means that older women are more likely to live alone (19 per cent) than older men (11 per cent).

Independent living is the dominant living arrangement of older persons in the more developed regions: almost three quarters of them live alone or with a spouse only. In contrast, less than 30 per cent of older persons in the less developed regions live independently. As populations continue to age, independent living is expected to become increasingly common among older persons in both the more developed and less developed regions.
4. Health care systems must adapt to meet the changing needs of an ageing population

As populations age, noncommunicable diseases (NCDs) account for a growing share of the overall disease burden, thereby confronting health care systems with new prevention and treatment challenges. The NCDs most associated with old age include cardiovascular diseases, cancers, diabetes and respiratory diseases, as well as other prominent causes of disability, such as arthritis, hearing and vision loss, depression, dementia and Alzheimer’s disease.

While many countries have achieved reductions in the prevalence and severity of disability even as people survive to more advanced ages, growth in the overall number of older persons has produced increases in the burden of NCD-related disability. The years of life lost due to disability (YLD) is a metric that summarises both the prevalence and severity of disability experienced in a population. The countries that saw the largest increases in the population aged 60 or over between 2000 and 2012—most of which are located in Africa, Asia and Latin America and the Caribbean—also tended to experience larger proportional increases in the years of life lost due to NCD-related disability (figure 4).

As the population of older persons continues to grow into the future, so too will the demand for interventions that prevent and treat morbidities associated with old age. Preventing disease and postponing morbidity to later ages can both improve older persons’ quality of life and mitigate future increases in health care costs implied by population ageing. Nevertheless, apart from population ageing, income growth and technological advances in medicine are anticipated to continue to exert substantial upward pressure on health expenditures in many countries.

Notes

1 Data are from World Population Prospects: The 2012 Revision, CD-ROM Edition-Extended Dataset (United Nations Publications, Sales No. 13.XIII.10)
2 Data are obtained from National Transfer Accounts at www.ntaccounts.org. The developed countries in this sample include Austria, Germany, Hungary, Japan, Slovenia, Sweden and the United States of America. The sample of developing countries includes Brazil, China, Costa Rica, India, Indonesia, Mexico, the Republic of Korea, the Philippines and Thailand.

Figure 4: Change in NCD-related disability versus change in population aged 60 or over, 2000-2012.*

* 172 WHO Member States