

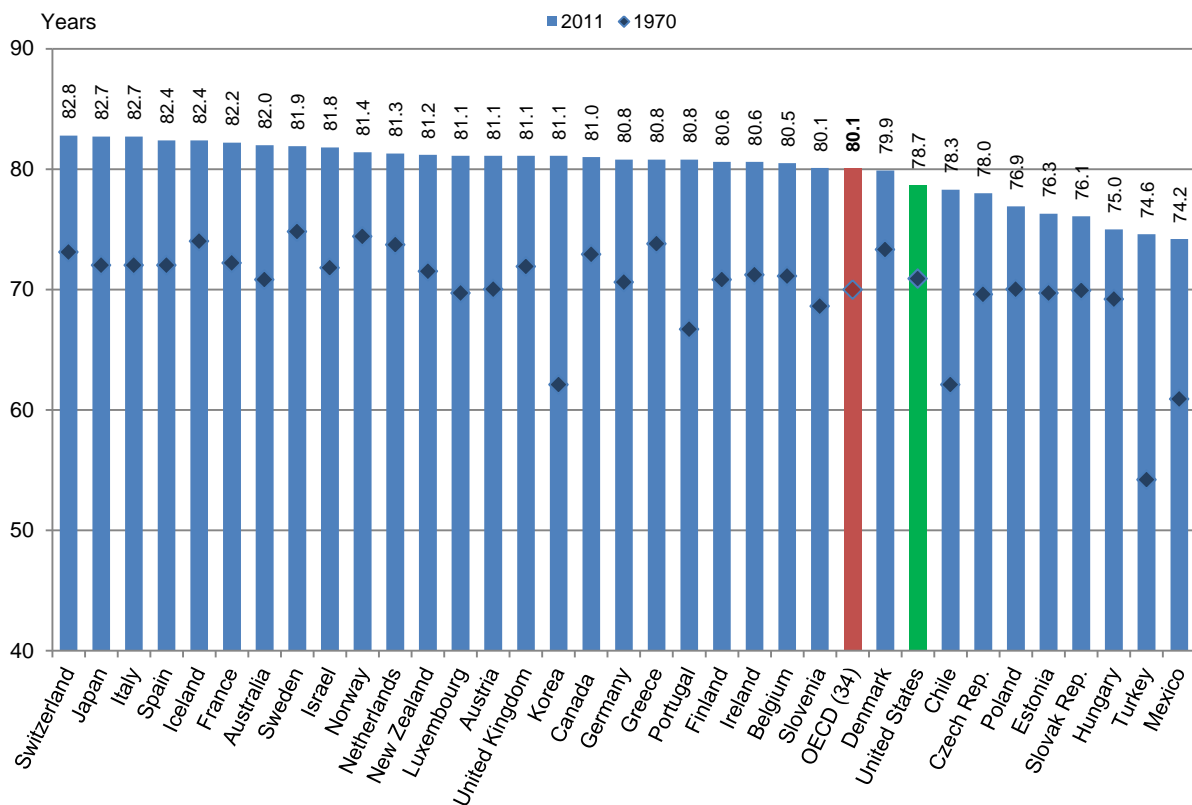


## Life expectancy in the US rising slower than elsewhere, says OECD

Life expectancy has increased in the United States over the past decades, but less rapidly than in other OECD countries. This is due to gaps in health insurance coverage and proper primary care, poorer health-related behaviours and poor living conditions for a significant proportion of the U.S. population, according to a new OECD report.

*Health at a Glance 2013* reports that life expectancy in the United States stood at 78.7 years in 2011: an increase of almost eight years since 1970, but significantly less than the ten year gain registered across OECD countries. Life expectancy is now more than a year below the OECD average of 80.1, compared to one year above the average in 1970. The gap between the United States and leading countries has also widened. For example, the life expectancy for U.S. men in 2011 was 4.2 years shorter than in Switzerland (up from less than 3 years in 1970); for U.S. women, it was 4.8 years shorter than in Japan in 2011 (while there was no gap in 1970).

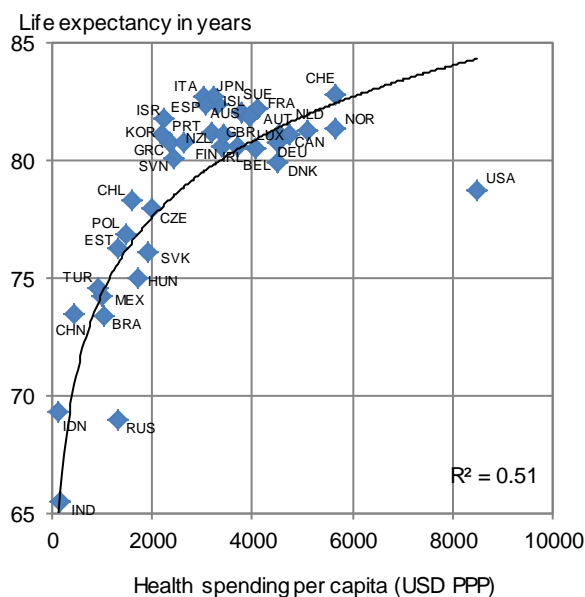
### Life expectancy in the United States is now lower than the OECD average



Source: Health at a Glance 2013

The United States spends much more on health per capita than all other OECD countries, with spending of 8500 USD in 2011, two-and-a-half times greater than the OECD average (3322 USD) and 50% higher than Norway and Switzerland (the next biggest spending countries). Higher health spending per capita tends to be associated with lower mortality rates and higher life expectancy, but this is not the case for the United States. The relatively low life expectancy of Americans is particularly striking given how much they spend on their health care.

### Life expectancy at birth and health spending per capita, 2011 (or nearest year)



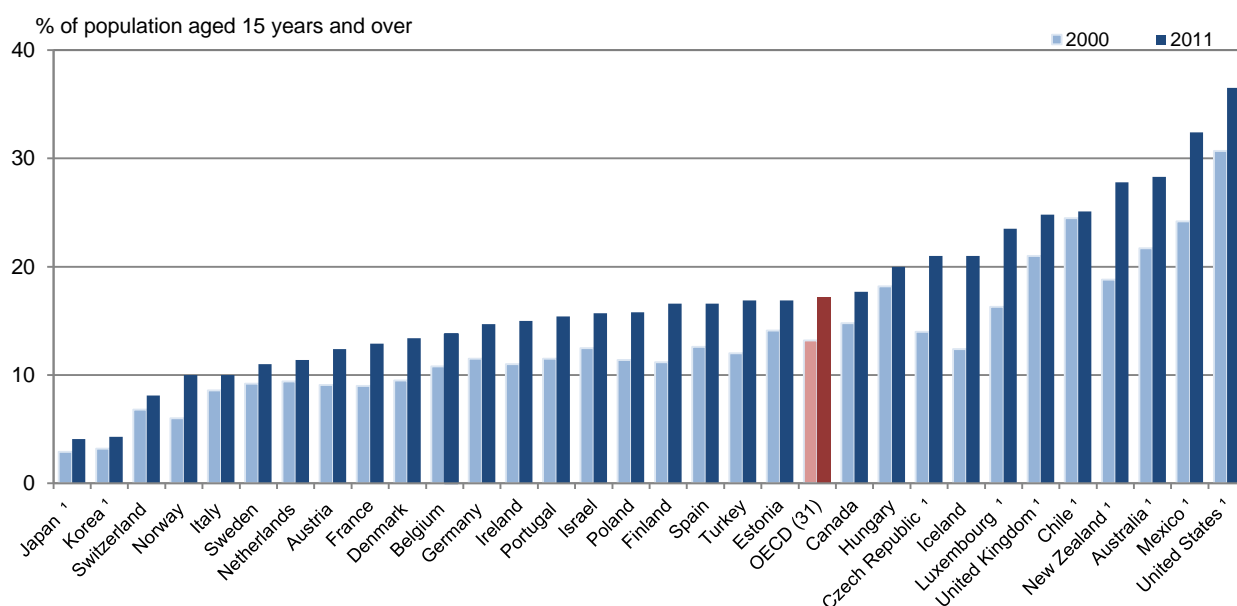
Source: Health at a Glance 2013

The U.S. health care system performs very well in the area of cancer care, achieving higher rates of screening and survival for several types of cancer than most other developed countries. However, the United States performs badly in preventing costly hospital admissions for chronic conditions, such as asthma, chronic obstructive pulmonary disease or diabetes, which should normally be managed through proper primary care.

The United States is one of the few OECD countries that has not achieved yet universal health coverage for a core set of services. In 2011, it had the highest proportion of its population without health coverage among all OECD countries, with 15% of the U.S. population uninsured. The Affordable Care Act is expected to expand health insurance coverage, which will become mandatory for nearly all citizens and legal residents from January 2014.

The obesity rate among adults in the United States is the highest of all OECD countries, with the rate reaching 36.5% in 2010, up from 30.7% in 2000. This is more than twice as high as the OECD average, although the obesity rate in several countries is under-estimated because it is based on self-reports of height and weight. As is the case in several other countries, the obesity rate in the United States tends to be higher among disadvantaged socio-economic groups, especially in women. Mortality from diseases including cardiovascular diseases and many cancers increases progressively once people become obese.

## Obesity rate among adults is highest in the United States



1. Data are based on measurements rather than self-reported height and weight.

Source: Health at a Glance 2013

These are some of the main findings from the latest edition of *Health at a Glance* published by the Paris-based OECD. This report brings together data on a wide range of health topics including health status, risk factors to health, health care access and quality, as well as expenditure.

Journalists can download the report from the OECD's protected site or contact the OECD Media Division (tel. + 33 1 45 24 97 00 or [news.contact@oecd.org](mailto:news.contact@oecd.org)).

For any question about the content of the publication, journalists are invited to contact Gaetan Lafortune (tel. 33 1 45 24 92 67 or [gaetan.lafortune@oecd.org](mailto:gaetan.lafortune@oecd.org)).

More information is also available at [www.oecd.org/health/healthataglance](http://www.oecd.org/health/healthataglance).