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Eight Billion Ageing Citizens

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THE WORLD POPULATION is steadily growing older. Between 1970 and 2019, the median age of the world population increased from 20.3 to 30 years, while the proportion of the world population aged 50+ increased from 15.4% to 24.5% (UNPD - United Nations Population Division, 2022). The increase in median age and the proportion of older people in the population is a fairly new phenomenon which emerged as countries underwent advanced stages of the demographic transition with decreasing mortality at older ages.

Novel situations often give rise to insecurities, and population ageing has led to some rather apocalyptic forecasts: exploding healthcare costs, high shares of people dependent on others for care and economic support, labour shortages, and economic and cultural stagnation. Fears about population ageing tend to exaggerate the meaningfulness of chronological age as an indicator of health and productive capacity, and underestimate the human capacity to adapt. Technology could potentially compensate for productivity declines or labour shortages caused by an ageing workforce. For example, if existent technologies were to be invested in and implemented worldwide, most of the world's food could be produced by a mere 2.5% of the 800+ million people currently working in agriculture (Vittis et al., 2022) – freeing up a huge pool of people for work in other industries.

Widespread use of the old age dependency ratio has fueled fears about population ageing. Based on an arbitrary age cut-off (typically age 65), the old age dependency ratio (OADR) is the ratio of chronologically older to chronologically younger persons (aged 20-64) in a population. It is used to estimate the so-called "burden" of population ageing: that is, the number of older people that each younger person must support. The underlying premise of the old age dependency ratio is that chronological age is a good proxy for health and productive potential. There is, however, little empirical basis for this assumption.

Age is a poor predictor of how well a person is able to provide support – or need it. Although the risk of poor health and need for support increases as people get older, the relationships between age, health, and productive potential looks vastly different across individuals and populations. The average

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FIGURE 1   Health Adjusted Dependency Ratios & Old Age Dependency Ratios (Skirbekk et al., 2022)
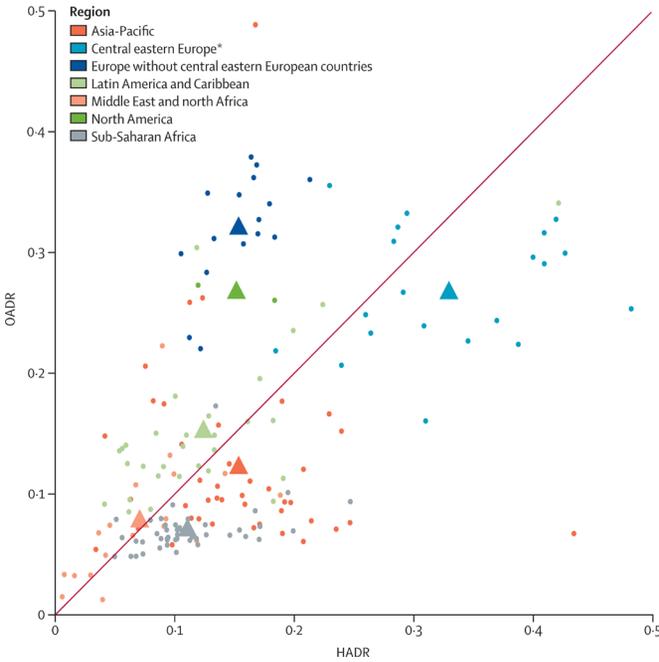
75-year-old in Japan is as healthy as the average 45-year-old in Papua New Guinea (Chang et al., 2019). It is also worth noting that, in many countries, half of working age people have only limited access to the labour market because they are women. The ratio of people in poor versus good health – that is, the health-adjusted dependency ratio – is a more precise indicator of the ratio of people who need versus can provide support in a population. Notably, the health-adjusted dependency ratio (HADR) is about the same in South-Asian and Sub-Saharan Africa as in Western Europe or East Asia – even though the populations of Western Europe and East Asia are chronologically much older (Skirbekk et al., 2022). See Figure 1.

Many of the world's richer countries have tried to slow down population ageing by trying to increase fertility and/or the immigration of younger people from other countries. I have argued that low fertility should be embraced. Low fertility generally goes hand-in-hand with greater gender equality, and makes it easier to reduce our negative impact on the planet and tackle poverty (Skirbekk, 2022). In any case, efforts to increase fertility are unlikely to succeed. Further, no realistic level of immigration could keep the world's richer countries as young as they are now. While efforts to slow down population ageing are probably futile, there is considerable room to improve how the world's 8 billion citizens will get older. Education, adequate financial resources, access to quality healthcare, and healthy lifestyles can help to delay

the onset of age-related health declines, and maximise opportunities to gain from the competencies of an older population. So far, however, few countries have adequately adapted their institutions and infrastructures to better suit the needs of an ageing population (e.g., adjusting pension systems to ensure long-term fiscal sustainability, greater focus on preventative healthcare, incentivising lifelong learning). Nations could also do much more to encourage people to adopt and maintain healthy lifestyles across the entire life span (e.g., (World Health Organization, 2022) and to ensure that everyone has access to adequate education. Education may through for instance greater knowledge, higher income and broader social networks, improve ones capacity to utilize health services. Education can improve one's capacity to alter lifestyles in ways that reduce health risks at later ages. It has been estimated that two-thirds of the world's youth currently lack basic skills (PISA level 1), ranging from 24% in North America to 89% in South Asia and 94% in Sub-Saharan Africa (Gust et al., 2022). The need to adapt to the needs of an ageing population is particularly pressing in low- and middle-income countries where the onset of poor health occurs early and the absolute rise in the number of older individuals is the highest.

Although the onset and magnitude of fertility and mortality decline varies across countries, the populations of all nations around the world are getting older. Ageing on a societal and global scale is a key aspect of the lives of the 8 billion world citizens as of mid-November 2022. The question is thus not whether we will age, but rather how well we will age. Population ageing does not have to spell disaster, but it is up to us to make the best of it.

Acknowledgments

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