

The Health of Older People in Switzerland

Chastonay P^{1,*}, Weber D², Mattig T^{2,3}

¹Department of Medicine, University of Fribourg, Fribourg, Switzerland.

²Health Promotion Switzerland, Bern, Switzerland.

³Institute of Global Health, Faculty of Medicine, University of Geneva, Geneva, Switzerland.

Abstract

Over the past century, the proportion of Swiss residents aged 65 or older rose from 5.8% to 17.8%; during the same period, the proportion aged over 80 rose from 0.5% to 5.0%. Although the majority of older people in Switzerland enjoy good health, disease prevalence rises with age. Almost half (49%) of people over 65 living at home report at least one chronic illness. Among the 65- to 79-year-olds living at home, 25.2% suffer from several chronic diseases; among people in the 80s, this figure reaches 41.3%. People aged over 80 are also particularly at risk for falls (30%). In addition, between 15% and 25% of the elderly suffer from at least one mental illness. Close to 30% of healthcare costs are attributable to people over the age of 75, who make up only 8% of the total population.

Given the public health importance of the issue a health promotion project targeting the elderly – the VIA Project -, based on successful local programs, is being implemented throughout the country. The overall goal of the VIA project is to promote the health of older people and to strengthen their self-determination and independence.

Corresponding author: Professor Philippe Chastonay, MD, MPH, Department of Medicine, University of Fribourg, 1700 Fribourg, Switzerland, Email: philippe.chastonay@unifr.ch

Keywords: Health of the elderly, ageing population, health statistics, health promotion

Received: Oct 14, 2018

Accepted: Oct 27, 2018

Published: Oct 30, 2018

Editor: Omnia Hamdy, National Institute of Laser Enhanced Sciences, Cairo University.

Demographic Ageing in Switzerland

As in all high-income countries, the population of Switzerland is ageing¹. Over the past century, the proportion of people under the age of 20 has decreased from 40.7% in 1900 to 20.2% in 2014². During the same period, the proportion of people aged over 65 rose from 5.8% to 17.8%, and those over 80 from 0.5% to 5.0%.

Demographic ageing results from rising life expectancy and declining fertility rates. In just over a century (from 1900 to 2015), life expectancy in Switzerland nearly doubled, from 46.2 to 80.7 years for men and from 48.8 to 84.9 years for women^{2,3,4}. This impressive increase in life expectancy can be explained by declining rates of mortality in childhood and in old age: since 1900, infant mortality has dropped from approximately 140‰ to less than 4‰^{5,6}. The age of death has also changed: in 1970, 50% of women died after age 76, and 50% of men after 70 years; in 2003, 50% of women died after age 84, and 50% of men after 78 years^{7,8}. Since 1900, fertility rates have decreased from nearly 4 children per woman to less than 2⁹.

As a result, the Swiss population will continue to age. In absolute terms, the population over 65 is projected to rise from 1.3 million in 2008 to 2.1 million in 2030 and 2.7 million in 2045, an increase of 66% and 108%, respectively⁶.

The rising number of people over 65 will significantly affect the so-called old-age dependency ratio. By 2040, there will be 49 people over 65 per 100 people aged 20–64; in 2010, the figure was 27. The proportion of people aged over 80 among the population over 65 will increase from 28.4% in 2010 to 42.6% in 2050. In absolute terms, more than one million people will be over the age of 80 by 2050^{6,8}.

Yet, in a country like Switzerland, the elderly population is highly diverse: it differs, in particular, by housing conditions, economic situation, level of education and migratory status, all of which can substantially affect health. The labor force participation rate also varies among those aged 65–69 (a mean of roughly 22%, but with a wide range across socioeconomic classes)¹⁰.

Health of Older People in Switzerland.

Although the natural ageing process is usually

accompanied by an increasing prevalence of diseases and accidents, old age is not synonymous with ill health. In 2015, life expectancy at age 65 was 22.2 years for women and 19.2 years for men; life expectancy at age 65 in good health was 14.2 years for women and 13.6 years for men¹¹. In recent years, the number of healthy life years has increased faster than life expectancy. This positive trend is reflected in the perceptions of the elderly themselves. Among the elderly living at home in the 65–74 age group, 73% consider themselves to be in good health. After the age of 75, the proportion is 62%.

Almost half (49%) of people over 65 living at home report at least one chronic illness. Among the 65- to 79-year-olds living at home, 25.2% suffer from several chronic diseases; among people in the 80s, this figure reaches 41.3%. People aged over 80 are also particularly at risk for falls (30%). In addition, between 15% and 25% of the elderly suffer from at least one mental illness^{12,13}.

Ageing and Healthcare Expenditure

In recent decades, healthcare costs have been rising in Switzerland due to various factors, such as a growing population, increasing labor costs, changes in consumer/patient behavior, new treatment standards, and *ageing of the population*. Overall, chronic NCDs account for 80% of healthcare costs, with cardiovascular disease, musculoskeletal disease and mental disorders at the top of the list.

Close to 30% of health care costs are attributable to people over the age of 75. But according to the health authorities global health care costs could be drastically reduced if health and independence of the elderly can be improved^{14,15,16,17}.

The VIA Project – Good Practice in Promoting the Health of the Elderly

All this let the Health Authorities to support a national health promotion project, a quite unique endeavor in a federal state like Switzerland where health policies are defined at local and state levels, targeting the elderly throughout the country – the VIA Project - , a program based on successful local pilot programs. The overall goal of the VIA project is to promote the health of older people and to strengthen their self-determination and independence in order to maintain or improve their quality of life and overall well-being,

allowing them to continue living at home for as long as possible. The project aims to help partners (cantons, communes, NGOs) to provide quality health promotion and prevention for the elderly. It offers the cantons a wide range of services (scientific foundations and aids to implementation, networking, advice and support, information and communication). Six priorities to be addressed were identified: (a) promotion of physical activity, (b) prevention of falls, (c) mental health, (d) targeting vulnerable groups, (e) integration of general practitioners, and (f) support of events, workshops and counseling sessions. This multi-year project is coordinated by Health Promotion Switzerland - a foundation supported by the cantons and the health insurance companies, and financed through a modest annual deduction from each insured person's compulsory health insurance contributions¹⁸ - and implemented in several steps by the cantonal and communal authorities.

Conclusion

In Switzerland older people are a growing part of society. Ensuring their health, well-being and independence is a challenge, as well in a cost containment perspective as in a public health perspective. The VIA project implemented in Switzerland aims at promoting health among the elderly in a nationally coordinated effort.

References

1. OECD/WHO (2011) OECD Reviews of Health Systems: Switzerland 2011. OECD Publishing. <http://dx.doi.org/10.1787/9789264120914-e>
2. OFS (2015) La population de la Suisse 2014 [Switzerland's population 2014]. Neuchâtel: Office fédéral de la statistique.
3. Cotter, S. (2005) Le vieillissement démographique de la Suisse [Demographic ageing of Switzerland]. Available at https://www.ecoparc.ch/fileadmin/user_upload/resources/Forum05_Cotter.pdf (Accessed: December 1, 2017)
4. Cotter, S. (2016) Survol de 100 ans de démographie suisse [Overview of 100 years of Swiss demography]. Available at http://www.imsv.unibe.ch/unibe/portal/fak_naturwis/a_dept_math/b_inst_statvers/content/e19451/e226662/e504926/e507687/mos_kol_cotter_ger.pdf (Accessed: December 1, 2017)
5. Enderli, S., Käch, S., Lorber, C., Sandmeier, H. (2017) Santé publique en Suisse [Public health in Switzerland]. Basel: Interpharma
6. BFS (2017) Statistisches Jahrbuch der Schweiz 2017 [Statistical Yearbook of Switzerland 2017]. Neuchâtel: Bundesamt für Statistik
7. Bopp, M., Minder, C. (2003) Mortality by education in German speaking Switzerland, 1990–1997: results from the Swiss National Cohort. *International Journal of Epidemiology* 32: 346–354
8. Menthonnex, J. (2015) Estimation des durées de vie par génération. Evolution 1900–2150 et tables de mortalité par génération 1900–2030 pour la Suisse [Estimation of life span by generation. Evolution 1900–2150 and life tables by generation 1900–2030 for Switzerland]. Neuchâtel: Office fédéral de la statistique
9. Grimaldi, C. (2015) Evolution de la population suisse, des taux démographiques et de la répartition par âges aux XXe et XXIe s. [Evolution of the Swiss population, demographic rates and age distribution in the 20th and 21st centuries]. Available at <https://clio.texte.clionautes.org/Evolution-de-la-population-suisse.html> (Accessed: December 1, 2017)
10. Bachmann, N., Burla, L., Kohler, D. (2015) La santé en Suisse – Le point sur les maladies chroniques [Health in Switzerland: Chronic disease update]. Neuchâtel: Observatoire Suisse de la Santé.
11. OFS (2016) Espérance de vie en bonne santé. Espérance de vie à la naissance – Années [Life expectancy in good health. Life expectancy at birth – years]. Available at <https://www.bfs.admin.ch/bfs/fr/home/statistiques/developpement-durable/cockpit/sante/esperance-vie-bonne-sante.assetdetail.451889.html> (Accessed: December 1, 2017)
12. BFS (2018) Dauerhaftes Gesundheitsproblem nach Alter, Geschlecht, Sprachgebiet, Bildungsniveau [Chronic health problem by age, sex, language area, education level]. Available at <https://www.bfs.admin.ch/bfs/de/home/statistiken/kataloge>

-datenbanken/tabellen.assetdetail.262764.html

(Accessed: February 2, 2018)

13. Weber, D., Abel, B., Ackermann, G., Biedermann, A., Bürgi, F., Kessler, C., Schneider, J., Steinmann, R. M., Widmer Howald, F. (2016) Gesundheit und Lebensqualität im Alter. Grundlagen für kantonale Aktionsprogramme «Gesundheitsförderung im Alter» [Health and quality of life in old age. Scientific basis for cantonal action programs "Health promotion in old age"]. Berne and Lausanne: Health Promotion Switzerland.
14. BFS (2014) Gesundheitsstatistik 2014 [Health statistics 2014]. Neuchâtel: Bundesamt für Statistik
15. Vuilleumier, M., Pellegrini, S., Jeanrenaud, C. (2007) Déterminants et évolution des coûts du système de santé en Suisse. Revue de la littérature et projections à l'horizon 2030 [Determinants and evolution of the costs of the health system in Switzerland. Review of the literature and projections to 2030]. Neuchâtel: Office fédéral de la statistique
16. Weaver, F., Jaccard Ruedin, H., Pellegrini, S., Jeanrenaud, C. (2008) Les coûts des soins de longue durée d'ici à 2030 en Suisse [The costs of long-term care up to 2030 in Switzerland]. Neuchâtel: Observatoire Suisse de la Santé
17. Schweizerischer Bundesrat (2012) Entwicklungsszenarien für das Gesundheitswesen [Development scenarios for the healthcare sector]. In: Legislaturfinanzplan 2013–2015: Anhang zur Botschaft über die Legislaturplanung 2011–2015. Bern: Schweizerische Eidgenossenschaft.
18. Biedermann, A., Ackermann G., Steinmann R.M. (2014). Via: ein interkantonales Projekt zur Gesundheitsförderung im Alter. Projektabschlussbericht 2010–2013 [Via: an intercantonal project for health promotion in old age. Final Project Report 2010–2013]. Bern and Lausanne: Gesundheitsförderung Schweiz