

## Health at a Glance 2019

- Unmet needs for healthcare due to affordability are the third lowest across OECD countries
- Relatively few people are living with diabetes and other chronic diseases (4th lowest across the OECD)



- The share of adults overweight or obese is high, at 64%
- Access to long-term care is limited, with nearly one in five people aged 50 and over acting as informal carers



# United Kingdom

## How does it compare?



The United Kingdom spends almost 10% of its GDP on health, about one percentage point higher than the OECD average. This is projected to reach 11.4% by 2030.

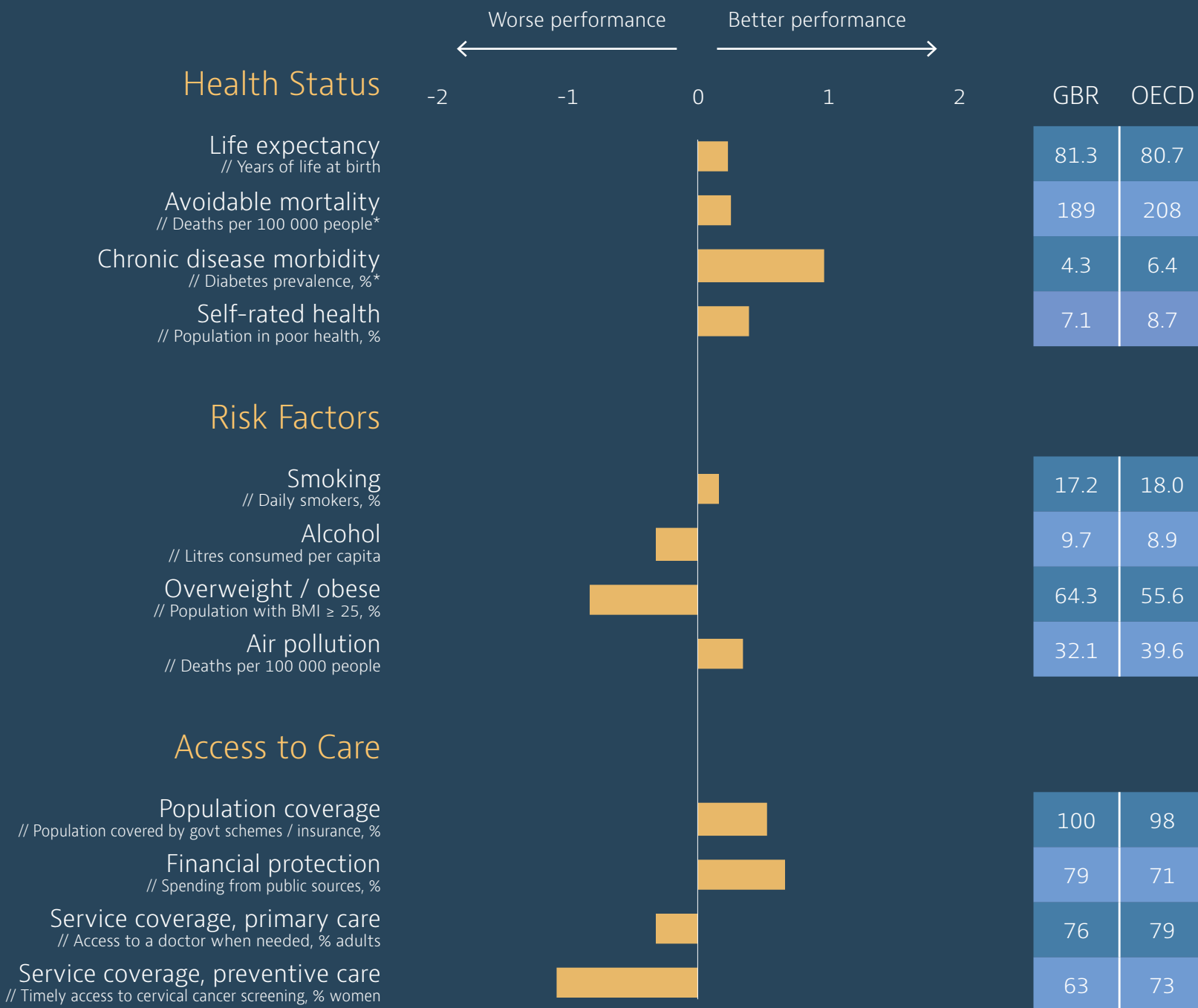
This level of spending buys strong access to health care, with low levels of inequality, though long-term care services are less accessible. Quality of care indicators are typically close to the OECD average. Health outcomes are fairly good, for example relatively few people live with diabetes (4.3%) and adults rating their own health poorly is also lower than the OECD average (7.1% v 8.7%). But gains in life expectancy have slowed in recent years.

Many British people lead unhealthy lifestyles. Whilst smoking rates are slightly below the OECD average, alcohol consumption is high (adults consume 9.7 litres per capita, compared to the OECD average of 8.9 litres) and 64% of adults are overweight or obese (the OECD average is 56%). Abusive use of opioids is a concern, with large increases in opioid-related deaths.

The United Kingdom has fewer doctors and nurses serving the population than in many OECD countries (2.8 doctors and 7.8 nurses per 1000 population, as compared with respective OECD averages of 3.5 and 8.8), although the number of doctors has been increasing steadily in recent years.

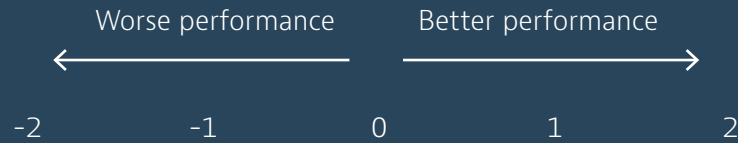


# How far is the United Kingdom from the OECD average?



## Quality of Care

- Safe prescribing  
// Antibiotics prescribed, DDDs/1 000 people
- Effective primary care  
// Avoidable asthma/COPD admissions\*\*
- Effective secondary care  
// 30-day mortality following AMI\*\*
- Effective cancer care  
// Breast cancer 5-year net survival, %\*



	GBR	OECD
Safe prescribing	17.5	18.5
Effective primary care	281	225
Effective secondary care	7.0	6.3
Effective cancer care	86	85

## Resources

- Health spending  
// Per capita (USD based on PPPs)
- Health spending share  
// As a % of GDP
- Practising doctors  
// per 1 000 people
- Practising nurses  
// per 1 000 people



	GBR	OECD
Health spending	4 070	3 806
Health spending share	9.8	8.8
Practising doctors	2.8	3.5
Practising nurses	7.8	8.8

Key data available for download here:  
[www.oecd.org/health/health-at-a-glance.htm](http://www.oecd.org/health/health-at-a-glance.htm)

Notes – These charts indicate how far a country is from the OECD average, based on the standard deviation. \*age-standardised. \*\*age-sex standardised. AMI = acute myocardial infarction; BMI = body mass index; COPD = chronic obstructive pulmonary disease; DDD = defined daily dose; PPPs = purchasing power parities.

## United Kingdom

### How does it compare?

*Health at a Glance 2019* compares key indicators for population health and health system performance across OECD members, candidate and partner countries. It highlights how countries differ in terms of the health status and health-seeking behaviour of their citizens; access to and quality of health care; and the resources available for health. Analysis is based on the latest comparable data across 80 indicators, with data coming from official national statistics, unless otherwise stated.

## United Kingdom: Selected issues

### Improving long-term care services for older populations

As with many OECD countries, the UK population is ageing rapidly. Yet many older British people are in poor health, with only 50% of women's lives and 60% of men's lives disability-free after age 65. There are large health inequalities among older people, with almost one in two adults (48%) aged 65 and over from the lowest income quintile reporting ill-health (as compared with 25% amongst adults from the highest income quintile). Dementia prevalence is also high, at 17.5 per 1 000 people.

Good quality long-term care (LTC) is particularly important for improving the quality of life for older populations. While access to health care overall is strong in the United Kingdom, when it comes to LTC, access is more limited. For example, for institutional care the costs for a person with severe LTC needs represent almost two times the median disposable income for individuals of retirement age. Yet government spending on LTC is below the OECD average. Informal carers share a heavy burden, with nearly one in five (18%) of people aged 50 and over acting as informal carers, the fourth highest among the 18 OECD countries with comparable data. In contrast, the formal LTC workforce has declined over time (in terms of workers per capita).

## United Kingdom

How does it compare?

Health at a Glance 2019: OECD Indicators  
[www.oecd.org/health/health-at-a-glance.htm](http://www.oecd.org/health/health-at-a-glance.htm)

### Unhealthy lifestyles are a concern, particularly high rates of obesity and alcohol consumption

Obesity and alcohol consumption are ongoing health risk factors for the United Kingdom, with abusive use of opioids a more recent concern.

Latest available data show that 64% of adults are overweight or obese (based on measured data) and one third of children aged 5-9 are overweight. Obesity has been high on the policy agenda in the United Kingdom, with numerous policies implemented. Further policies are discussed in *The Heavy Burden of Obesity: The Economics of Prevention*, OECD, 2019. Examples include reformulation of foods and beverages to reduce levels of saturated fat, sugars and sodium; and policies targeted at childhood obesity, such as those focussed in the digital health space.

Alcohol consumption is an ongoing public health issue. At almost 10 litres per year, British people consume over a litre more pure alcohol than the OECD average. Policies addressing harmful alcohol use include broad-based strategies, such as taxes and advertising regulations, and ones that target heavy drinkers (*Tackling Harmful Alcohol Use*, OECD, 2015).

Abusive use of opioids is a growing concern, with opioid-related deaths reaching 41 deaths per million in habitants in 2016, up from 28 deaths in 2011 (data for England and Wales only). Effective policies include improved prescribing practices; expansion of long-term medication-assisted therapy; enhanced coordination across health, social and criminal justice systems; as well as improving the public's understanding of substance abuse and treatment (*Addressing Problematic Opioid Use*, OECD, 2019).