

6 October 2021

Life expectancy falls as a result of COVID-19

- Life expectancy falls by 1.3 years for men and 0.9 years for women in 2020, as mortality rates reflect impact of pandemic
- 76% of all COVID deaths in 'high-risk' category impacted by factors such as existing health conditions, obesity and age
- However, impact of COVID on ethnic minorities and people in areas of deprivation is disproportionately high

A new report, **The COVID-19 Pandemic**, published today by the **Longevity Science Panel (LSP)**, highlights that life expectancy at birth fell by 1.3 years for men and 0.9 years for women in 2020, linked to the excess mortality caused by the pandemic. The report is a comprehensive review of COVID-19 effects and responses, intended as a resource for professional users of longevity data including actuaries, risk managers, public health professionals, epidemiologists and researchers.

While COVID-19 as an event has driven headline reductions in longevity, this over-simplifies; the most pronounced effects are in vulnerable groups where inequality has widened, while broader trend changes will depend far more on little-understood factors like variants, Long COVID and socio-economic impacts on longevity.

The pandemic has cost an estimated 155,000 lives in the UK and more than 4.5m lives globally, and while its impact has been profound, the data suggests that approximately 76% of total COVID deaths were in patients in the top 5% for highest predicted risk. These risk factors are varied, including everything from heart disease to obesity. By far the most substantial of these is age, with the risk of death increasing about 10% for each year of age.

Despite these health-based factors being significant, mortality rates from COVID-19 within the UK tend to be higher in deprived areas and vary by region, with the highest rates observed in the North.

Areas with higher rates of deprivation have generally experienced higher rates of mortality, partly because of overcrowded living conditions and poor-quality housing. This is also due to the fact that workers in lower socioeconomic groups, on lower pay and in more deprived areas, tend to have less control over their working conditions, such as being unable to work remotely. According to the data, the mortality rate for men in professional occupations, for instance, was 12 in every 100,000, whereas those in 'elementary occupations' saw a rate of 40 in every 100,000.

Black and Asian minority groups have had significantly higher likelihood of death from COVID-19, even taking into account deprivation, health and geography. For example, COVID-19 mortality for people of Black African or Black Caribbean ethnicity in the first half of 2020 was 2 to 2.5 times higher than for people of White ethnicity according to the Office for National Statistics.

The pandemic is far from over with uncertainty going forward, such as potential emergence of new variants, Long COVID and how backlog in the NHS might affect population longevity.

The Chair of LSP, Dame Karen Dunnell concluded: “The pandemic has had a devastating impact on us. On the other hand, it has unleashed many untapped resources of energy, flexibility, innovation and a “can do” approach to challenges. However, there are still many unknowns, such as the effects of Long COVID or the impact of delayed diagnoses and treatment of non-COVID conditions. There also remains the potential emergence of faster-spreading or more virulent variants; they require our continual surveillance. Success in managing the pandemic, as we move into its endemic stage, will require effective global efforts in immunisation, monitoring, healthcare, public behaviour and scientific developments.”

Professor Debora Price, Professor of Social Gerontology at the University of Manchester said: “The pandemic has plainly exposed the many structural and systemic inequalities in our societies that people live with from day to day and that have become a matter of life and death. Health inequalities have worsened, and for women, the pandemic has exacerbated existing inequalities in almost all areas of life, setting the equality agenda back decades. If we are to learn anything from this experience, it must surely be that we critically examine the unequal distribution of power and resources from the local to the global, and work out how to create a more equal society through social investment and social protection.”

-Ends-

Notes to the editor

About The Longevity Science Panel

The Longevity Science Panel is an independent group of experts, supported by Legal & General, to comment on factors that affect life expectancy in the UK. The Panel is unconstrained in the conduct and communication of its work by any particular commercial interest. Its conclusions will be openly disseminated, with the intention of promoting public interest. The Panel uses a multidisciplinary approach to monitor the ever-changing influences on life expectancy, drawing on its members’ expertise in social/actuarial science, epidemiology, medicine and healthcare system development.