Healthy Enough to Work?

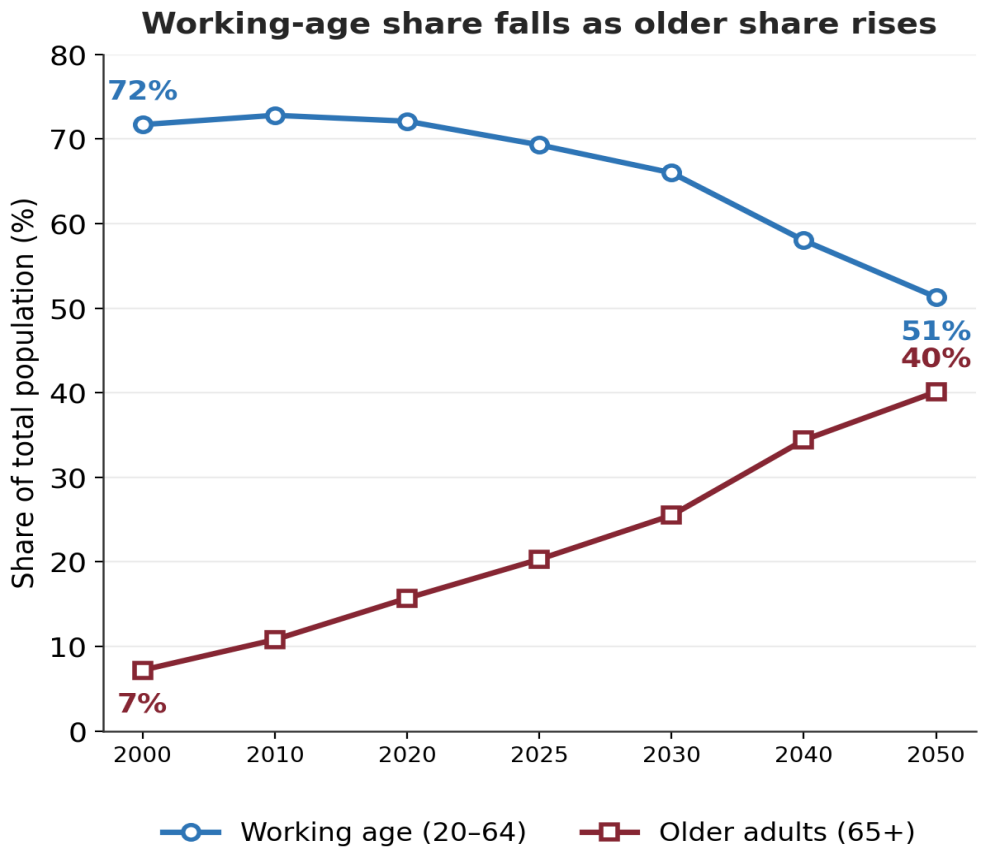
Changing Health, Work, and Earnings Capacity Among Older Adults in South Korea

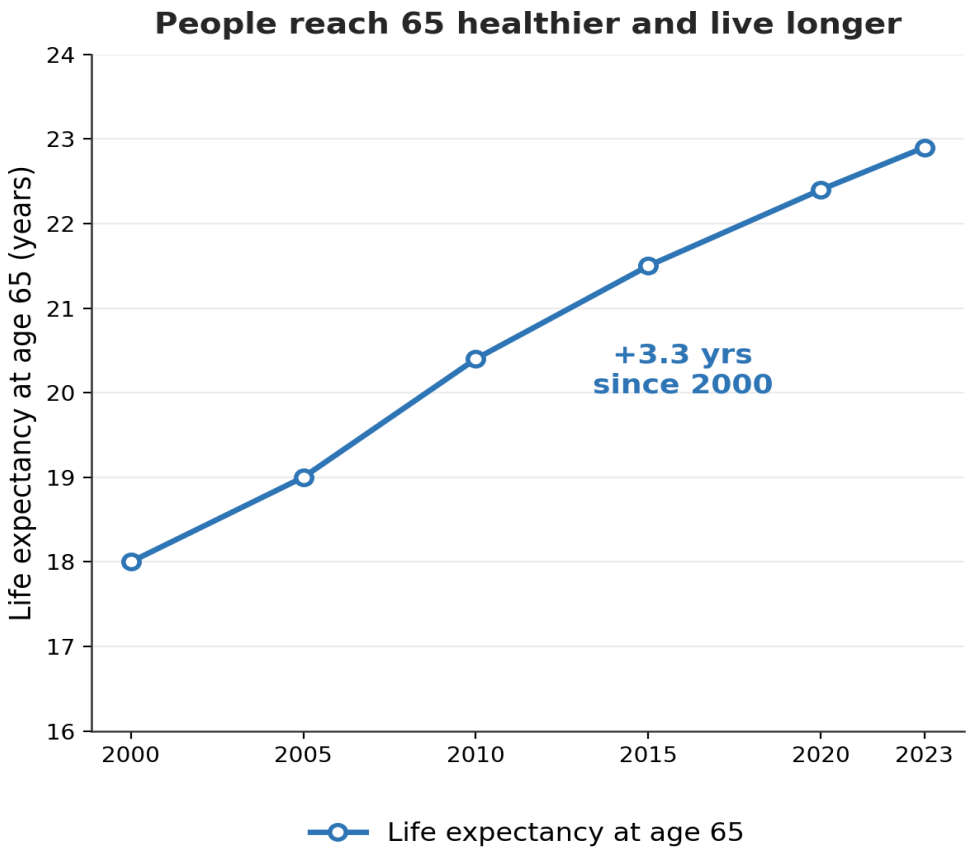
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Asia-Pacific Regional Conference on Population Ageing 2026

Track A: Silver Economy · September 2026

Background: Why Korea





A shrinking workforce and healthier older ages raise a key question: how much additional **capacity to work** do older Koreans have?

Research questions

1. Do newer cohorts reach the same ages in better health, and with higher employment and earnings?

2. Based on health alone, how much more could older Koreans work and earn than is currently observed?

3. Has this capacity grown across successive cohorts, and does it differ by education and gender?

Data & Methods

Data

- Korean Longitudinal Study of Ageing (KLoSA), 2006–2022
- Four cohorts observed at ages 55–58 in 2006, 2010, 2014, and 2018

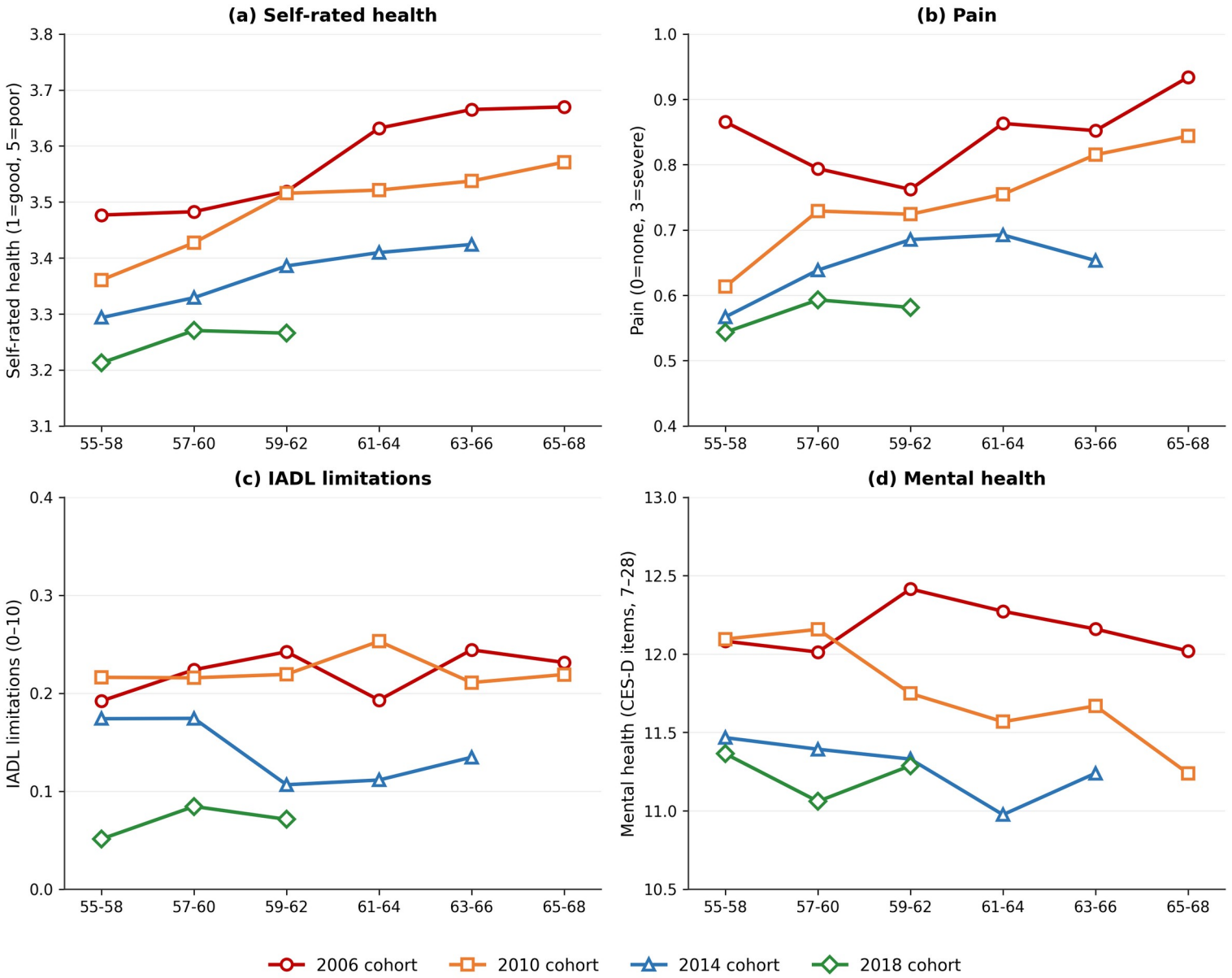
Key measures

- Health: self-rated health, pain, IADL limitations, mental health
- Labor outcomes: employment, full-time work, and annual earnings

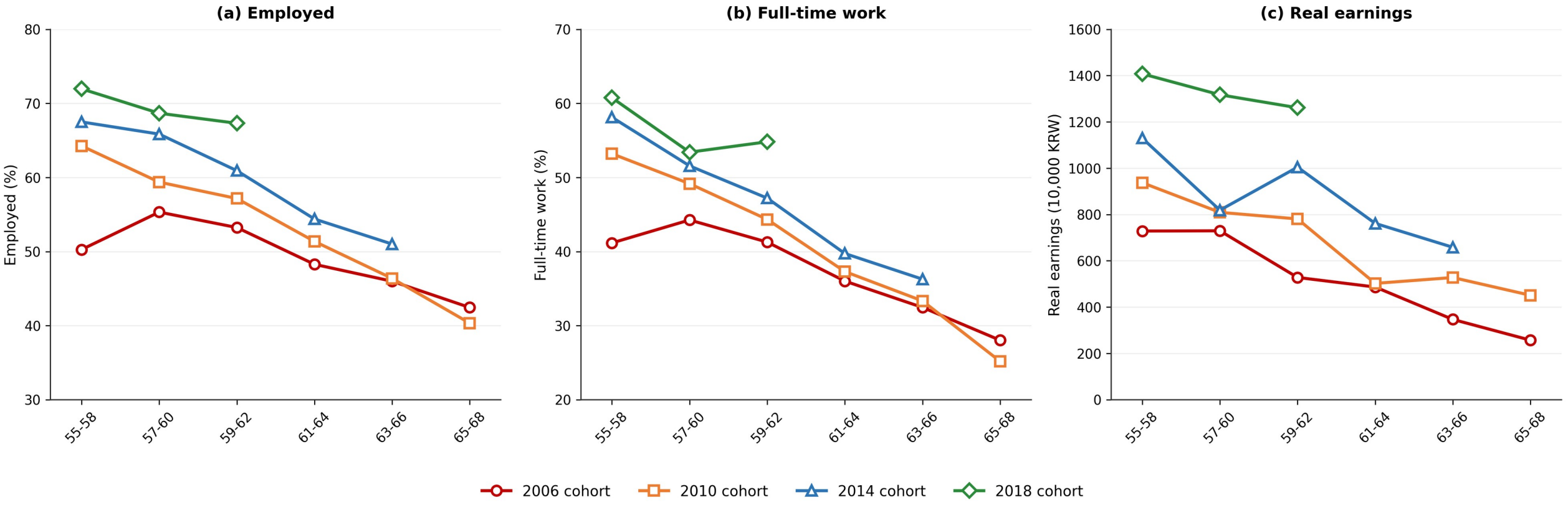
Approach

- Compare cohorts at the same ages to track health and labor outcomes
- Estimate work and earnings capacity from the health–work link at ages 55–58, applied to ages 62–64
- Compare with prospective old age (remaining life = 15 years)

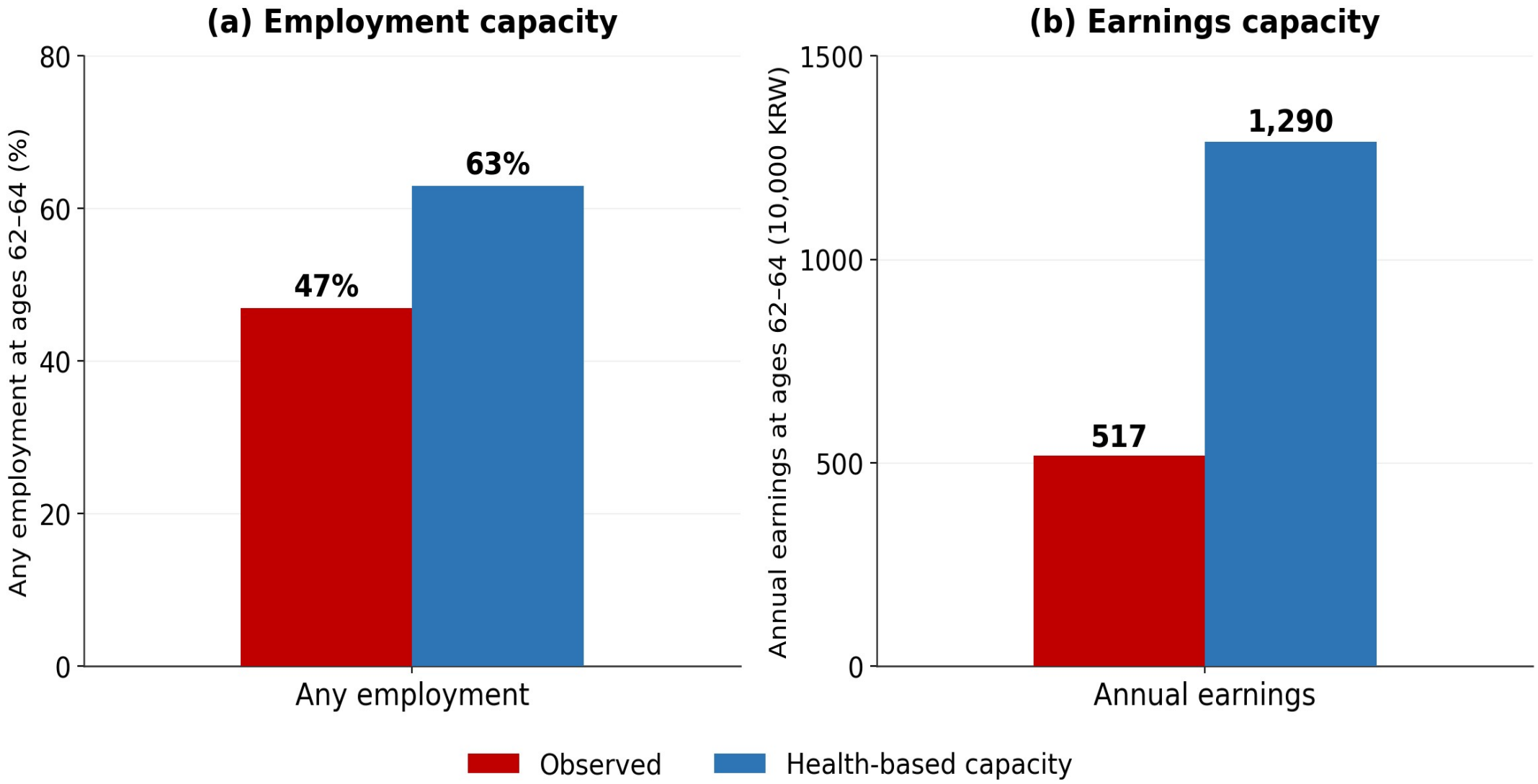
Newer cohorts are healthier at the same age



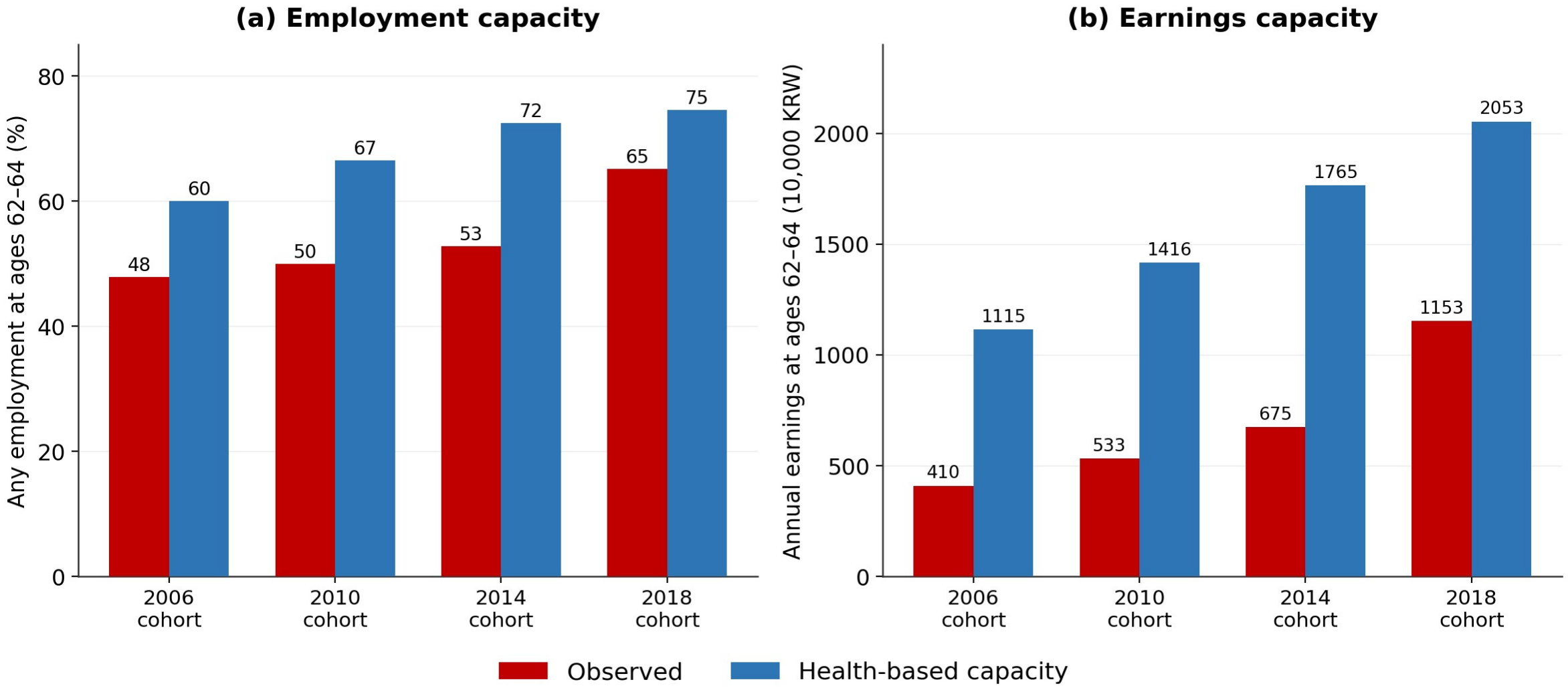
Newer cohorts work more and earn more



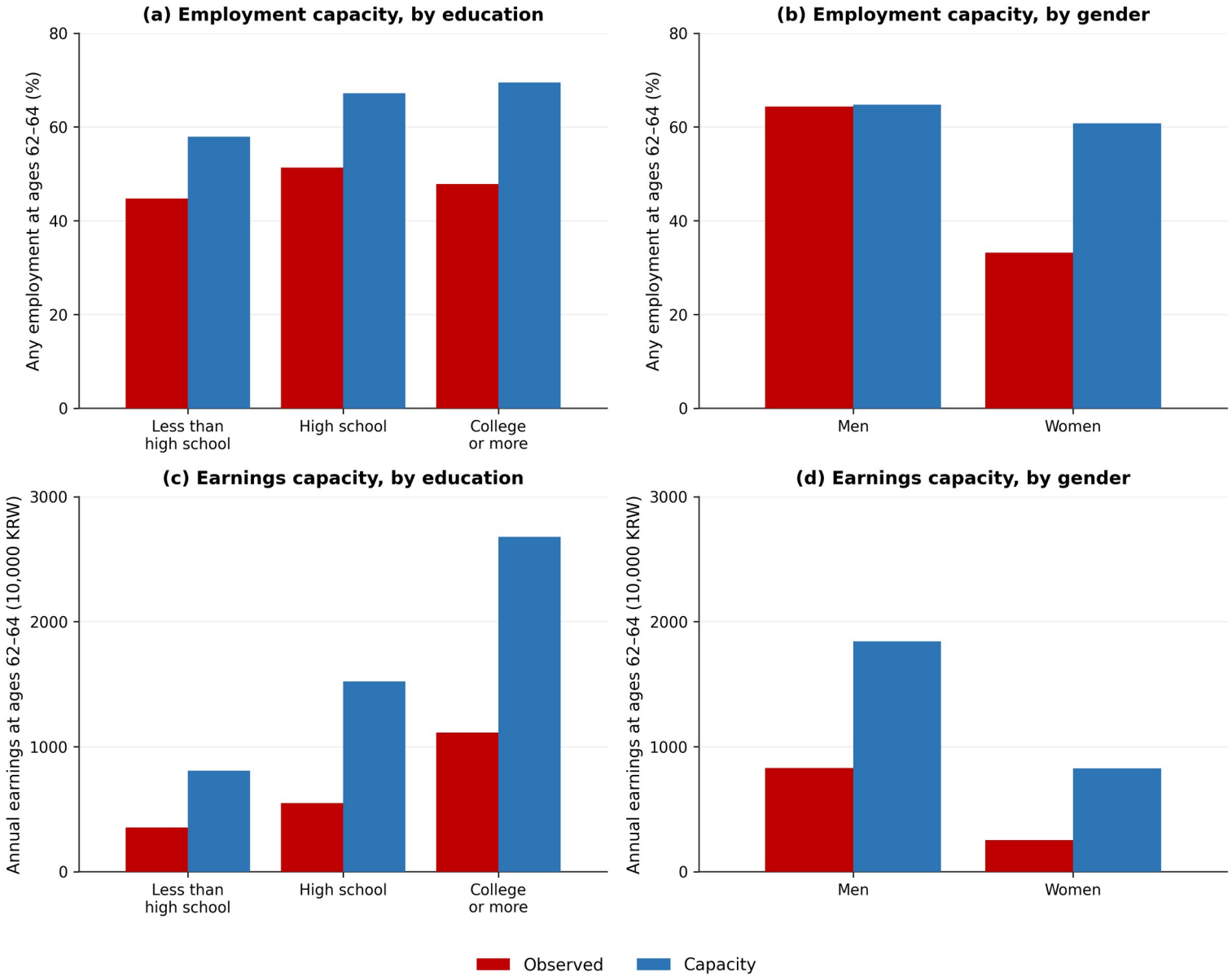
Older Koreans could work and earn more than observed



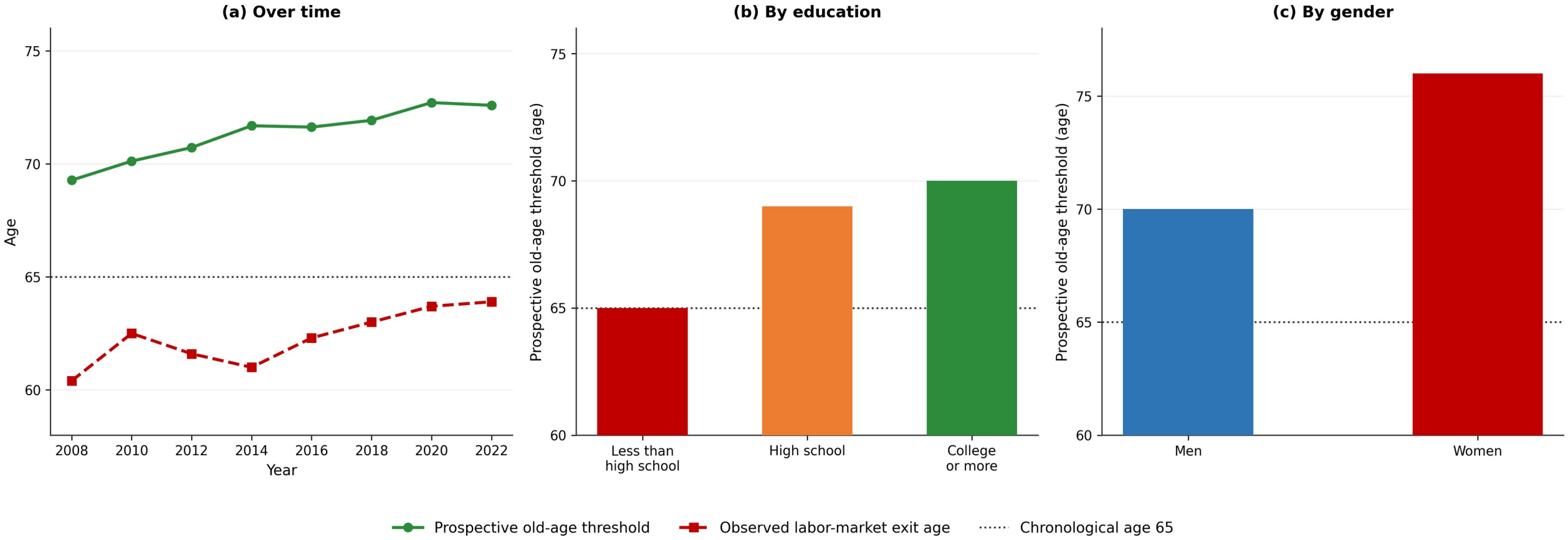
Later cohorts reach 62–64 with more capacity



Capacity is unequal by education and gender



"Old age" by longevity rises — and is unequal



Conclusions & Policy Implications

Newer cohorts are healthier and more capable

- Better health, higher employment and earnings at the same age

Capacity stays unused, and unevenly

- Widest employment gap for women; widest earnings gap by education

A uniform pension age is not neutral

- Longevity-based old age differs by education and gender

Policy should reflect these disparities

- Design for unequal opportunity, earnings capacity, and longevity

Thank You

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