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3 August 2025

Online at https://mpra.ub.uni-muenchen.de/126184/
MPRA Paper No. 126184, posted 10 Oct 2025 02:08 UTC

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Abstract:

Life expectancy is a key indicator of population health and societal well-being, reflecting the combined effects of socioeconomic conditions, healthcare systems, lifestyle behaviors, and public policy interventions. This literature review synthesizes existing research on the determinants of life expectancy across European countries, highlighting the interplay between income, education, employment, healthcare access, and preventive health strategies. Evidence indicates that higher socioeconomic status, equitable healthcare provision, and effective public health policies contribute to increased longevity, while disparities in these factors exacerbate differences in life expectancy both within and between countries. The review also identifies gaps in the literature, particularly the need for integrated analyses that examine the combined effects of socioeconomic, healthcare, and policy determinants, as well as intra-country disparities. Findings from this review provide insights for researchers and policymakers seeking to enhance population health and reduce health inequities across Europe.

Keywords: Life expectancy, Europe, socioeconomic determinants, healthcare systems, public health policy

INTRODUCTION

Life expectancy is a fundamental indicator of population health and overall societal well-being, reflecting the combined effects of socioeconomic conditions, healthcare quality, lifestyle behaviors, and public policy interventions. Across Europe, life expectancy has generally increased over the past decades, yet notable disparities remain both between and within countries. These differences are influenced by a complex interplay of factors, ranging from income inequality and educational attainment to the accessibility and efficiency of healthcare systems. Understanding the determinants of life expectancy is crucial not only for academic inquiry but also for guiding policymakers in designing effective interventions that can reduce health inequities and improve the quality of life for European populations (Gazilas, 2024; WHO Regional Office for Europe, 2024).

Recent research highlights the critical role of socioeconomic conditions in shaping health outcomes. Countries with higher levels of income and more equitable wealth distribution tend to achieve higher average life expectancies, while nations characterized by significant economic disparities often experience lower longevity and higher rates of preventable mortality (O'Donnell, van Doorslaer, Wagstaff, & Lindelow, 2024). Education similarly exerts a profound influence on life expectancy, as higher levels of educational attainment are associated with healthier behaviors, improved access to healthcare, and enhanced capacity to

navigate health systems effectively (Vogt, 2024). These findings underscore the importance of considering social determinants alongside medical and behavioral factors when analyzing trends in longevity.

In addition to socioeconomic conditions, the structure and performance of healthcare systems play a pivotal role in determining life expectancy. Public spending on health, when allocated efficiently, has been shown to correlate strongly with improvements in population longevity, particularly when investment is directed toward preventive services and primary care (OECD, 2024; Nixon & Ulmann, 2024). Access to timely and high-quality healthcare services reduces the prevalence of preventable and treatable conditions, contributing to more equitable health outcomes across populations (Steel et al., 2025). Moreover, disparities in healthcare availability and quality can exacerbate existing inequalities in life expectancy, highlighting the need for policies that ensure equitable access to essential health services (Zheng, 2024).

Lifestyle factors and public health policies further influence life expectancy across European countries. Behavioral risks such as tobacco use, excessive alcohol consumption, poor diet, and physical inactivity remain significant contributors to mortality and morbidity (Vogt, 2024). Evidence suggests that countries implementing comprehensive public health measures, including smoking bans, alcohol regulation, and obesity prevention programs, experience measurable improvements in population health and longevity (Steel et al., 2025; WHO Regional Office for Europe, 2024). Comparative analyses indicate that policy-driven interventions, when combined with equitable healthcare systems and favorable socioeconomic conditions, can produce the most substantial gains in life expectancy.

Despite the extensive literature on life expectancy determinants, gaps remain in understanding the relative contributions of different factors and how they interact. While numerous studies have examined socioeconomic and healthcare influences separately, fewer investigations have integrated these dimensions with behavioral and policy-related determinants in a comprehensive framework. Moreover, cross-country comparisons often focus on averages without adequately addressing subnational disparities, leaving important questions about inequality and targeted interventions unanswered. This literature review aims to synthesize existing research on life expectancy in Europe, highlighting the interplay of socioeconomic, healthcare, lifestyle, and policy factors while identifying areas for future research and policy attention (Gazilas, 2024; Steel et al., 2025; Eurostat, 2025).

By critically evaluating the existing body of work, this review seeks to provide a nuanced understanding of the determinants of life expectancy in European countries. The findings are intended to inform both academic discourse and practical policy-making, offering insights into how societies can address health inequities, optimize healthcare investments, and implement effective public health strategies to improve longevity and overall well-being across the continent.

SOCIOECONOMIC DETERMINANTS OF LIFE EXPECTANCY

Socioeconomic conditions are among the most influential factors shaping life expectancy across European countries. Income levels, wealth distribution, and social inequality directly affect access to nutrition, healthcare, housing, and other resources essential for maintaining good health. Evidence suggests that populations in countries with higher average incomes and

lower income inequality experience significantly higher life expectancy, whereas those in nations with greater disparities face increased mortality rates and lower longevity (Gazilas, 2024; O'Donnell, van Doorslaer, Wagstaff, & Lindelow, 2024). Beyond material resources, education plays a critical role in promoting longevity. Individuals with higher educational attainment are more likely to adopt healthier lifestyles, utilize preventive healthcare services effectively, and make informed decisions regarding their well-being. Studies indicate that education can mediate the effects of income inequality by enabling individuals to access better employment opportunities and healthcare resources, ultimately contributing to longer life spans (Vogt, 2024).

Employment conditions and social protection mechanisms also shape life expectancy outcomes. Job security, labor market regulations, and social safety nets reduce economic stress and vulnerability, which are known determinants of both physical and mental health (Gazilas, 2024). For example, countries with comprehensive welfare programs tend to show higher longevity even among lower-income populations, suggesting that social policies can partially mitigate the negative effects of economic disadvantage. Additionally, geographic disparities, such as urban-rural differences, influence access to healthcare services, quality education, and healthy living environments, contributing to variations in life expectancy across regions within the same country (Eurostat, 2025).

Collectively, these findings demonstrate that socioeconomic factors do not operate in isolation but interact with one another and with broader societal structures. Income, education, and employment conditions work together to create environments that either promote or hinder longevity. Recognizing the interplay between these elements is essential for understanding the persistence of health inequalities in Europe and for designing interventions that address the root social causes of differences in life expectancy. These insights form a critical foundation for considering how healthcare systems and public policies can be tailored to improve outcomes for all populations, particularly those historically disadvantaged by socioeconomic factors (O'Donnell et al., 2024; Gazilas, 2024).

HEALTHCARE SYSTEM DETERMINANTS OF LIFE EXPECTANCY

The structure, accessibility, and quality of healthcare systems play a pivotal role in shaping life expectancy across European countries. Investment in healthcare, particularly when allocated efficiently toward primary care and preventive services, has been consistently linked to improvements in population longevity (OECD, 2024; Nixon & Ulmann, 2024). Countries that prioritize universal access to essential health services tend to experience lower rates of preventable and treatable mortality, demonstrating the importance of both coverage and quality in promoting long-term health outcomes (Steel et al., 2025). Beyond financial investment, the organization and distribution of healthcare resources significantly affect the capacity of systems to respond to population needs. Regions with well-staffed hospitals, comprehensive primary care networks, and advanced medical infrastructure consistently report higher life expectancy compared to areas where healthcare access is limited or unevenly distributed (Zheng, 2024).

Healthcare disparities within and between countries further illustrate the impact of systemic factors on longevity. Populations facing barriers to accessing timely medical care, whether

due to geographic isolation, economic constraints, or administrative hurdles, often exhibit higher mortality rates and lower overall life expectancy (WHO Regional Office for Europe, 2024). Preventable and treatable conditions, including cardiovascular disease, infectious diseases, and certain cancers, remain major contributors to these disparities, highlighting the necessity of effective healthcare delivery and early intervention programs. Additionally, research suggests that countries with stronger health system governance, better resource allocation, and transparent monitoring mechanisms are more successful in reducing mortality and promoting equitable health outcomes (OECD, 2024).

Preventive health initiatives and public health campaigns also influence life expectancy by reducing exposure to risk factors and encouraging healthier behaviors. Vaccination programs, routine health screenings, and chronic disease management strategies are associated with substantial reductions in avoidable deaths, emphasizing the importance of proactive healthcare rather than solely reactive treatment (Steel et al., 2025; WHO Regional Office for Europe, 2024). The integration of these strategies within a broader system that supports both population-level and individual-level care is critical for maximizing longevity. Overall, evidence from European countries underscores that robust, accessible, and efficiently managed healthcare systems are essential for achieving high life expectancy, particularly when combined with social policies that address underlying socioeconomic inequalities (Zheng, 2024; Nixon & Ulmann, 2024).

POLICY AND LIFESTYLE FACTORS AFFECTING LIFE EXPECTANCY

Life expectancy in Europe is not determined solely by socioeconomic conditions or healthcare systems; lifestyle behaviors and public health policies play a critical role in shaping longevity outcomes. Behavioral risk factors such as tobacco use, excessive alcohol consumption, poor dietary habits, and physical inactivity are significant contributors to morbidity and mortality, accounting for a substantial portion of preventable deaths across the continent (Vogt, 2024). The prevalence of these behaviors varies across countries and is often influenced by cultural norms, economic conditions, and the effectiveness of public health interventions. Evidence indicates that populations engaging in healthier lifestyle practices, supported by education and community programs, tend to exhibit higher life expectancy and reduced rates of chronic disease.

Public health policies targeting these behavioral risk factors have proven effective in improving population health outcomes. Smoking bans, restrictions on alcohol sales, taxation on unhealthy products, and national campaigns promoting physical activity and balanced diets have been associated with measurable improvements in longevity (Steel et al., 2025; WHO Regional Office for Europe, 2024). For example, countries implementing comprehensive tobacco control strategies have experienced significant declines in smoking-related mortality, contributing to overall gains in life expectancy. Similarly, alcohol regulation and obesity prevention programs have been linked to reductions in associated chronic diseases, highlighting the potential of policy-driven interventions to shape long-term health trajectories.

The effectiveness of these policies is often amplified when combined with strong healthcare systems and equitable social structures. Interventions are more successful in promoting longevity when individuals have access to quality healthcare, preventive services, and

education that supports informed health choices. Cross-country comparisons reveal that nations with integrated strategies addressing both lifestyle factors and systemic health inequalities consistently achieve higher life expectancy and lower disparities among population groups (Steel et al., 2025; Eurostat, 2025). Conversely, countries that implement policies in isolation, without addressing underlying socioeconomic or healthcare inequalities, often see more limited improvements in longevity.

Moreover, policy responses to emerging health challenges, such as rising obesity rates and lifestyle-related chronic diseases, are increasingly recognized as essential components of public health planning. The adoption of evidence-based interventions, monitoring their impact, and adjusting strategies to reflect population needs are central to ensuring that policy initiatives effectively contribute to life expectancy gains. Overall, the literature underscores that lifestyle factors and public health policies are inextricably linked to longevity, operating alongside socioeconomic determinants and healthcare system performance to influence the health and well-being of European populations (Vogt, 2024; WHO Regional Office for Europe, 2024; Steel et al., 2025).

RESEARCH GAPS AND FUTURE DIRECTIONS

Despite the extensive body of literature examining determinants of life expectancy in Europe, several gaps remain that warrant further investigation. While socioeconomic factors, healthcare systems, and lifestyle behaviors have been studied extensively, there is a relative paucity of research integrating these dimensions into a comprehensive framework that captures their interrelated effects on longevity. Most studies focus on individual determinants in isolation, limiting our understanding of how combinations of income inequality, education, healthcare access, and lifestyle behaviors collectively shape life expectancy outcomes across different European contexts (Gazilas, 2024; Vogt, 2024).

Another notable gap concerns the evaluation of public health policies and interventions. Although there is evidence that initiatives such as smoking bans, alcohol regulations, and obesity prevention programs can improve longevity, comparatively few studies systematically assess the long-term effectiveness of these policies across multiple countries. Research often relies on short-term outcomes or single-country case studies, leaving questions about scalability and applicability to broader European populations unanswered (Steel et al., 2025; WHO Regional Office for Europe, 2024). Furthermore, there is limited analysis of how policy interventions interact with socioeconomic and healthcare factors to produce synergistic or, in some cases, counterproductive effects.

Geographic and demographic disparities within countries also remain underexplored. Urban-rural differences, regional variations in healthcare infrastructure, and the differential impact of social policies on vulnerable populations are areas that require more granular analysis. Understanding these intra-country disparities is crucial for designing targeted interventions that can reduce inequities in life expectancy (Eurostat, 2025; O'Donnell et al., 2024).

Future research should prioritize longitudinal and comparative studies that integrate socioeconomic, healthcare, and policy dimensions to provide a more holistic understanding of life expectancy determinants. Additionally, evaluating the effectiveness of integrated policy interventions, considering both population-wide and subgroup-specific outcomes, can inform

strategies to maximize longevity gains while minimizing health inequalities. Advancements in data availability, including harmonized European datasets and real-time health monitoring systems, offer opportunities to address these gaps and support evidence-based policy-making (OECD, 2024; Zheng, 2024).

By focusing on these research directions, scholars and policymakers can develop more comprehensive strategies to improve life expectancy, reduce disparities, and enhance the overall health and well-being of European populations. Bridging these gaps will not only advance academic understanding but also provide actionable insights for designing interventions that address the multifaceted determinants of longevity.

CONCLUSION

Life expectancy in Europe is shaped by a complex interplay of socioeconomic conditions, healthcare system performance, lifestyle behaviors, and public policy interventions. The literature consistently demonstrates that higher income levels, lower economic inequality, and greater educational attainment contribute to longer life spans, highlighting the central role of social determinants in shaping population health outcomes (Gazilas, 2024; O'Donnell, van Doorslaer, Wagstaff, & Lindelow, 2024; Vogt, 2024). Access to quality healthcare, efficient allocation of resources, and preventive health services further support longevity, ensuring that populations receive timely interventions that reduce preventable and treatable mortality (OECD, 2024; Nixon & Ulmann, 2024; Steel et al., 2025; Zheng, 2024).

Lifestyle behaviors and public health policies complement these factors by influencing the prevalence of risk factors such as smoking, alcohol consumption, poor diet, and physical inactivity. Evidence indicates that countries implementing comprehensive public health strategies experience measurable improvements in life expectancy, particularly when these initiatives are integrated with equitable healthcare systems and social support structures (Vogt, 2024; Steel et al., 2025; WHO Regional Office for Europe, 2024). The effectiveness of such policies underscores the importance of coordinated, multifaceted approaches that address both individual behaviors and systemic determinants of health.

Despite significant progress in understanding the determinants of life expectancy, notable research gaps remain. Limited studies have fully integrated socioeconomic, healthcare, and policy dimensions into a comprehensive framework, and cross-country analyses often overlook intra-country disparities and vulnerable populations. Future research should prioritize longitudinal, comparative studies that evaluate the combined effects of these factors, while leveraging increasingly available European health data to inform evidence-based policy interventions (Eurostat, 2025; OECD, 2024; Zheng, 2024).

In summary, life expectancy in Europe is influenced by a dynamic and interdependent set of factors. Socioeconomic conditions, healthcare system quality, lifestyle behaviors, and policy interventions collectively determine longevity outcomes, and addressing disparities requires integrated strategies that consider all these dimensions. By synthesizing existing research, this review highlights the critical pathways through which societal structures, healthcare provision, and public health initiatives shape life expectancy, providing valuable insights for policymakers, researchers, and public health professionals seeking to enhance health and

well-being across European populations (Gazilas, 2024; Steel et al., 2025; WHO Regional Office for Europe, 2024).

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