



**RESEARCH**

# **The Rise of the Silver Economy: Global Implications of Population Aging**

[WORLD ECONOMIC OUTLOOK - April 2025 – Chapter 2](#)

CEPR Economics of Longevity and Ageing – Athens – June 17-18

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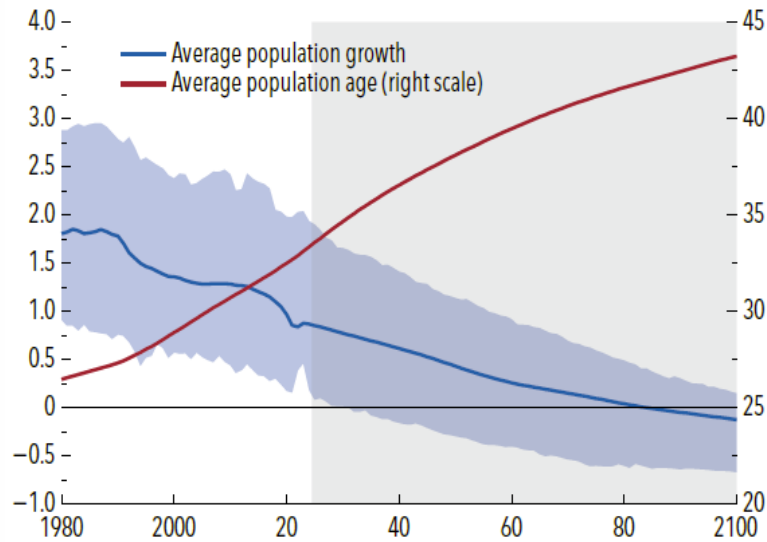
# Rapid global demographic shifts, hitting all regions with uneven pace

*Declining fertility is slowing down growth of the world's population*

*... while the "silver economy" is rising as older populations increase everywhere.*

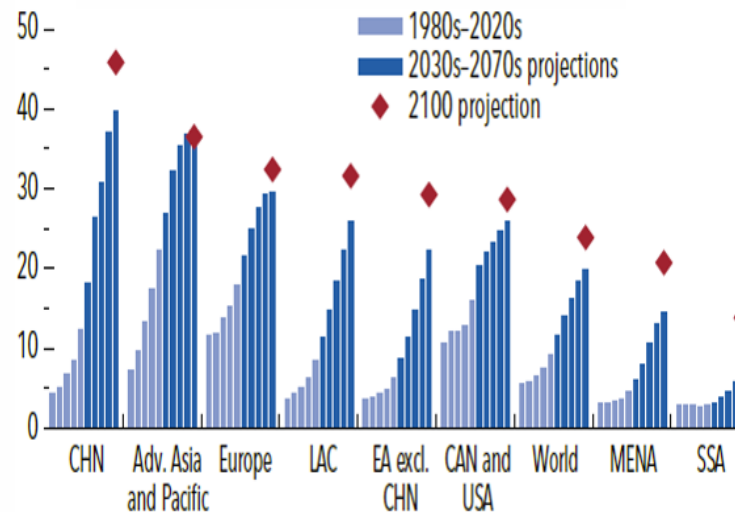
*Both forces are precipitating rapid demographic shifts across the world*

**Global population aging**  
(percent, left axis; years, right axis)



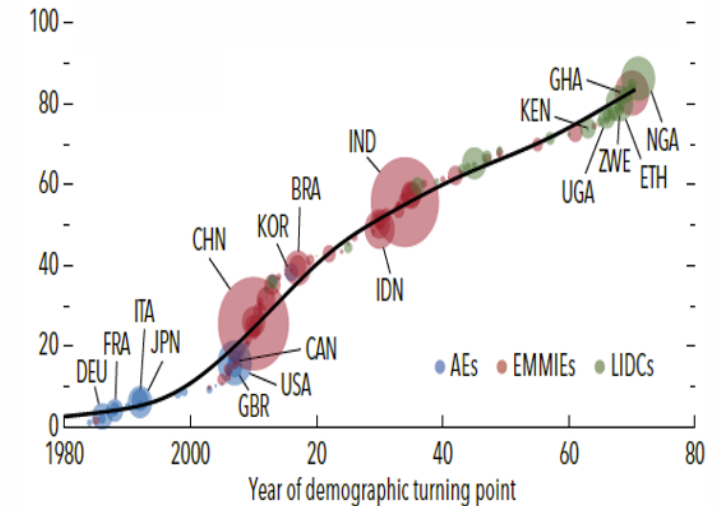
Sources: UNWPP; and IMF staff calculations.  
Note: The area shaded in blue denotes the interquartile range for population growth across all countries.

**Share of 65+ in total population**  
(percent)



Sources: UNWPP; and IMF staff calculations.  
Note: The bars denote the share of the older population (ages 65 and above) in the total population by the end of the respective decade. Data labels in the figure use International Organization for Standardization (ISO) country codes. AEs = advanced economies; Adv. Asia and Pacific = advanced Asia and Pacific; EA = emerging Asia; EMMIEs = emerging market and middle-income economies; excl. = excluding; LAC = Latin America and the Caribbean; LIDCs = low-income and developing countries; MENA = Middle East and North Africa; SSA = sub-Saharan Africa.

**Cumulative share of countries with declining working-age populations**  
(percent)

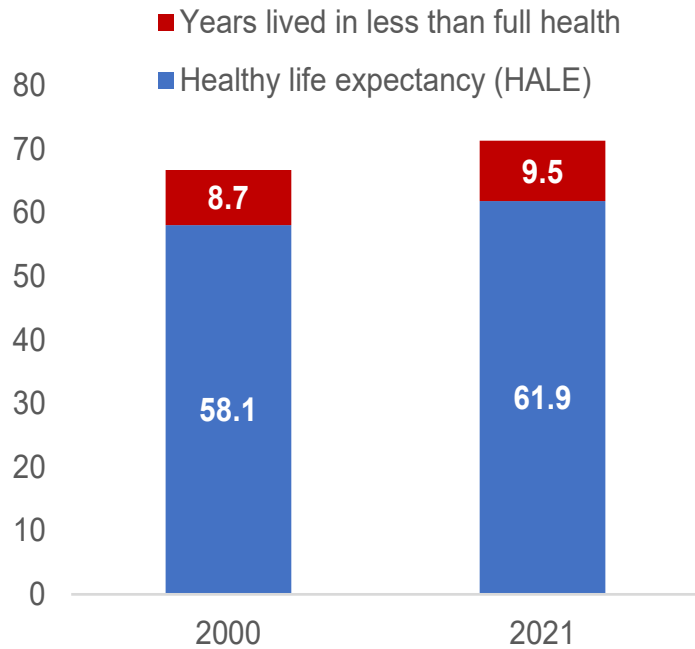


Sources: UNWPP; and IMF staff calculations.  
Note: A demographic turning point marks the year when the share of the working-age population (ages 15–64) peaks and starts to decline. Bubble size indicates the country's population relative to the global population in the year of its demographic turning point.

# Healthy aging along rising longevity can offer a silver lining

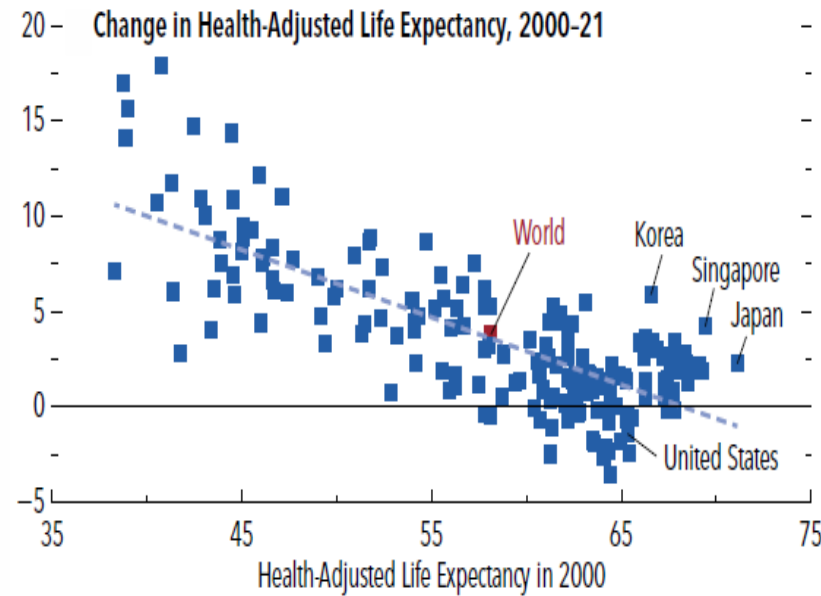
- Individuals are not only living for longer but generally also aging in better health.
- Healthy aging could mitigate the economic effects from population aging.

World Life Expectancy, 2000-21



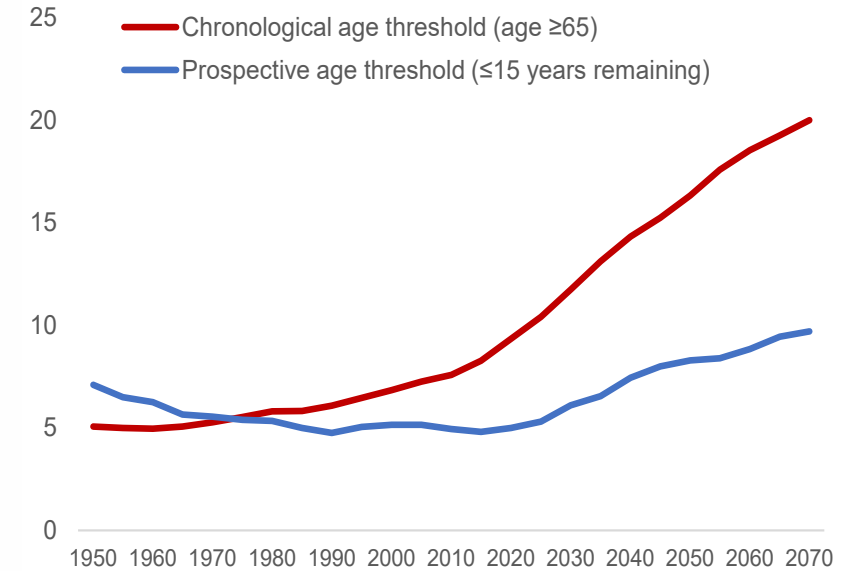
Sources: World Health Organization; IMF staff calculations.  
Note: World average is population-weighted, based on 183 countries.

Health-adjusted life expectancy (years)



Sources: WHO; and IMF staff calculations.  
Note: World average is population-weighted, based on 183 countries.

World Old-Age Dependency Ratio, 1950-2070



Sources: UNPP 2024; Wittgenstein Centre; and IMF staff calculations.

## Questions

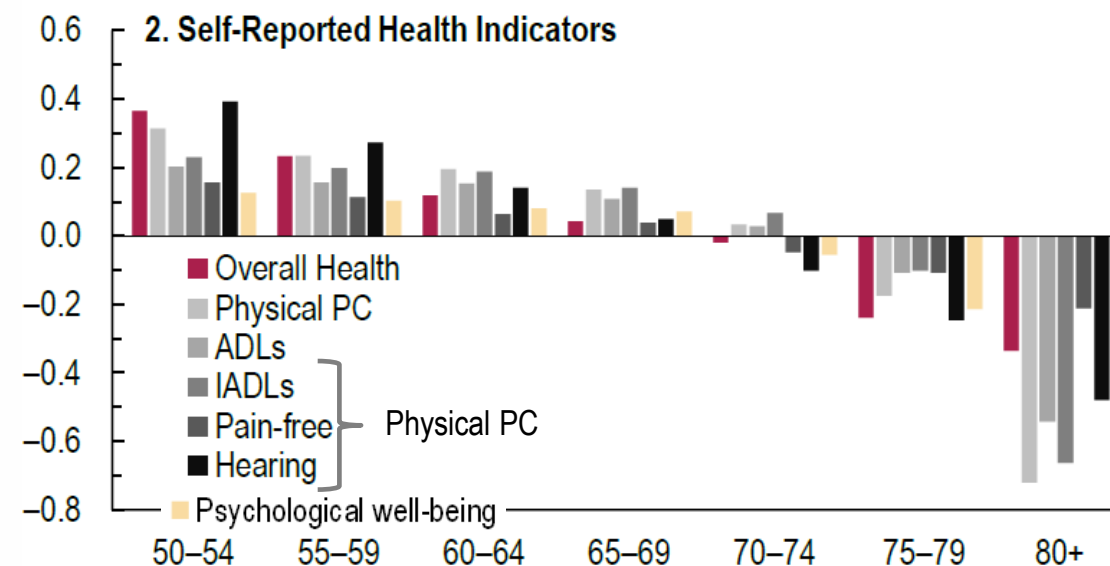
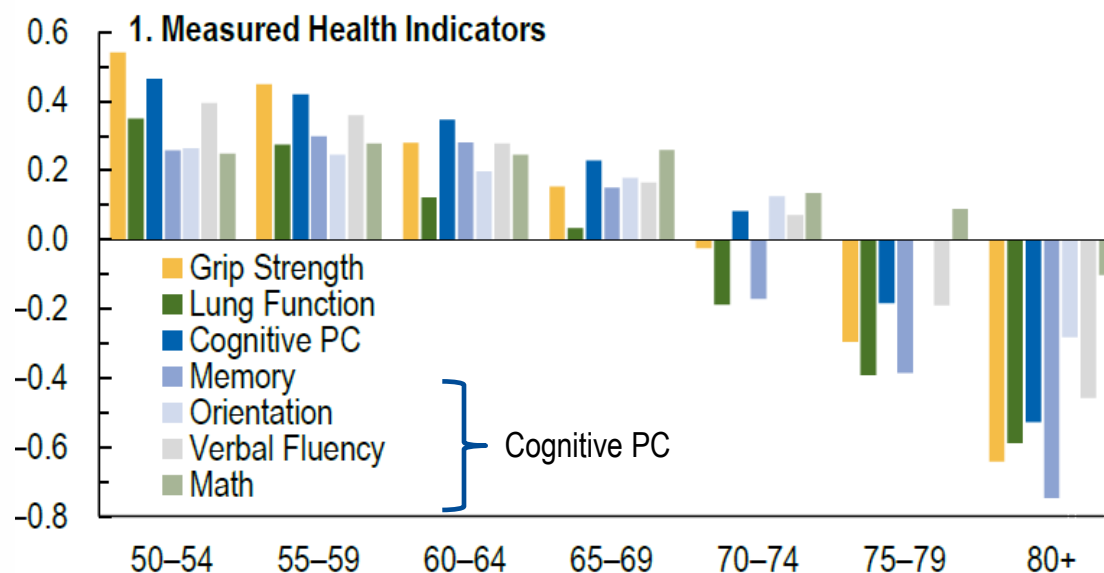
- *Healthy aging:*
  - **Is there evidence of healthy aging** alongside increasing life expectancy? **Yes; cohort effect particularly strong for cognitive capabilities.**
  - Has it **improved labor market outcomes for older individuals**? **Yes (labor supply and earnings).**
- *Economic implications of global population aging:*
  - What are the likely implications of population aging for growth, interest rates, fiscal and external balances amid uneven demographic trends? **Substantial slowdown (-1.1pp in 2025-50); decline in r but increase in r-g; divergent NFA positions.**
  - To what extent **can healthy aging offset** the impact of population aging? **~1/4 to 1/3 over 2025-50.**
- *The role of policies:*
  - **How can policies help** countries navigate the global demographic transition?  
**Comprehensive (yet feasible) policy effort to boost labor supply could offset 3/4 (1/3) drag from demographics in 2025-50 (2025-2100).**

# 1. Healthy aging and labor market outcomes

# Is there evidence of healthy aging, and does it impact labor market outcomes?

**Micro survey data focused on older-age individuals** (~1 million; 50+ years old; 29 AEs and 12 EMs; 2000-22):

- Measured and self-reported health: Physical, cognitive, and mental health
- Chronic diseases (e.g., diabetes, heart disease, Alzheimer) and health behaviors (e.g., smoking, physical inactivity).
- Employment: Labor force status; work hours/weeks; earnings.
- Individual socio-economic characteristics: Age; gender; rural/urban location; education; wealth.



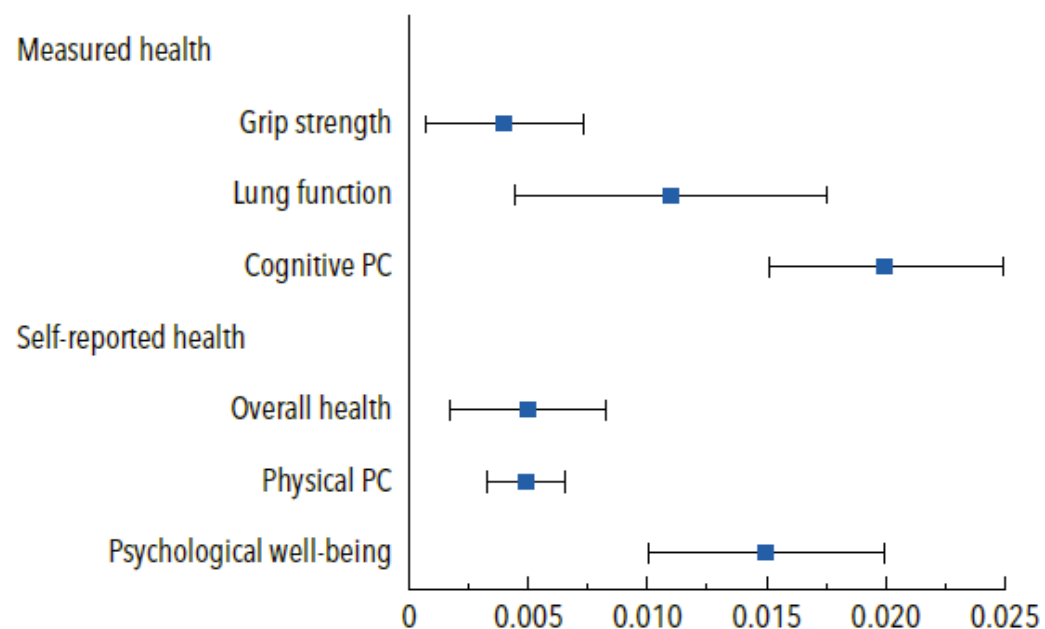
Sources: Gateway to Global Aging Data; national microdata sources; and IMF staff calculations.

Note: Health scores have been standardized to mean zero and standard deviation one and averaged across different age groups. Cognitive PC is the first principal component of the memory, orientation, verbal fluency, and math cognitive functions. Physical PC is the first principal component of activities of daily living (ADLs), instrumental activities of daily living (IADLs), pain frequency, and hearing.

# We find broad-based evidence of healthy aging...

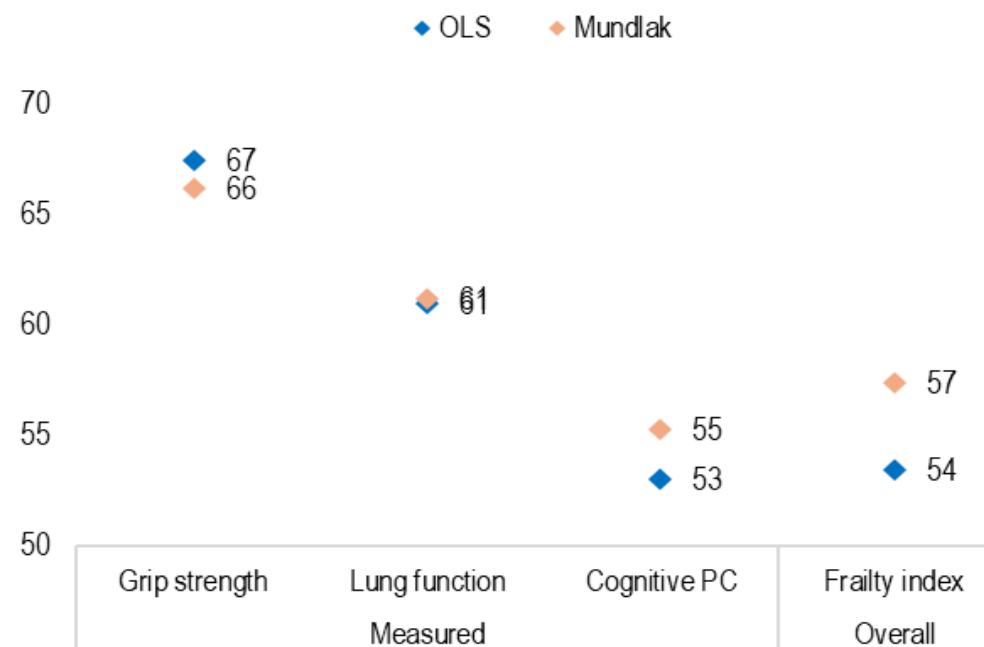
- Significant cohort effect for a range of physical, cognitive, and mental health indicators ([Table](#))
- Gains particularly prominent for cognitive functions.

## Healthy aging trends, 2000-22 (regression estimates, trend coefficient)



Sources: Gateway to Global Aging Data; national microdata sources; and IMF staff calculations.  
 Note: The figure shows the coefficient from ordinary least squares regressions of health indicators of individuals ages 50 and older on the survey year, with individuals' age, gender, education, household wealth, and country fixed effects controlled for. Squares represent point estimates, whereas bars represent 90 percent confidence intervals. PC = principal component.

## Over 2000-22, Age 70 became the new... (Age-equivalent healthy aging gains)



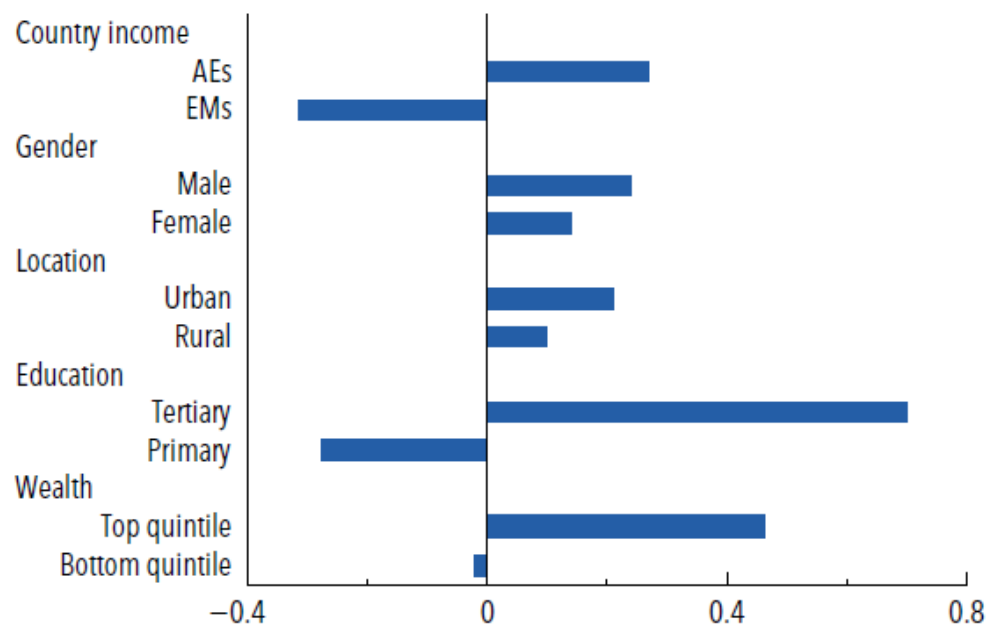
Sources: Gateway to Global Aging Data; national microdata sources; and IMF staff calculations..  
 Note: This figure shows age-equivalent gains, measured as the coefficient on year of birth (trend improvement effect) multiplied by the number of years in our time sample (2022-2000) and divided by (coefficient on age minus coefficient on year of birth).

## ... but wide health disparities persist

- Sizable health disparities across countries and socioeconomic groups. (FEs)
- Faster healthy aging improvements in EMs relative to AEs; but similar pace across socioeconomic characteristics.

### Cognitive health inequalities

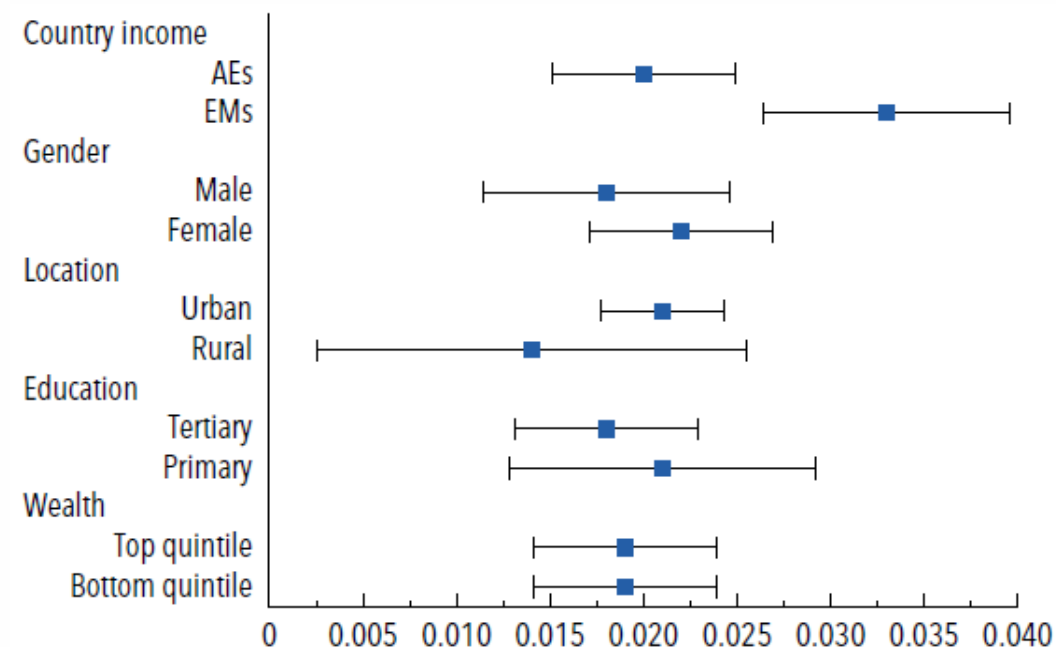
(cognitive health score, average)



Sources: Gateway to Global Aging Data; national microdata sources; and IMF staff calculations.  
 Note: The figure shows average health cognitive scores of individuals ages 50 and older by socioeconomic group. Cognitive health score is the first principal component of cognitive indicators, standardized to mean zero, standard deviation one. T-tests indicate that the differences in means are statistically significant for all socioeconomic categories. AEs = advanced economies; EMs = emerging markets.

### Heterogeneity in cognitive health trends

(regression estimates, trend coefficient)



Sources: Gateway to Global Aging Data; national microdata sources; and IMF staff calculations.  
 Note: The figure shows estimates from ordinary least squares regressions of cognitive health score of individuals ages 50 and older on the survey year, by socioeconomic group, with individuals' age, gender, education, wealth, and country fixed effects controlled for. Squares represent point estimates, whereas surrounding bars represent 90 percent confidence intervals. Cognitive health score is the first principal component of cognitive indicators, standardized to mean zero, standard deviation one. AEs = advanced economies; EMs = emerging markets.

# Does healthy aging improve labor market outcomes for older workers?

Better health is associated with higher:

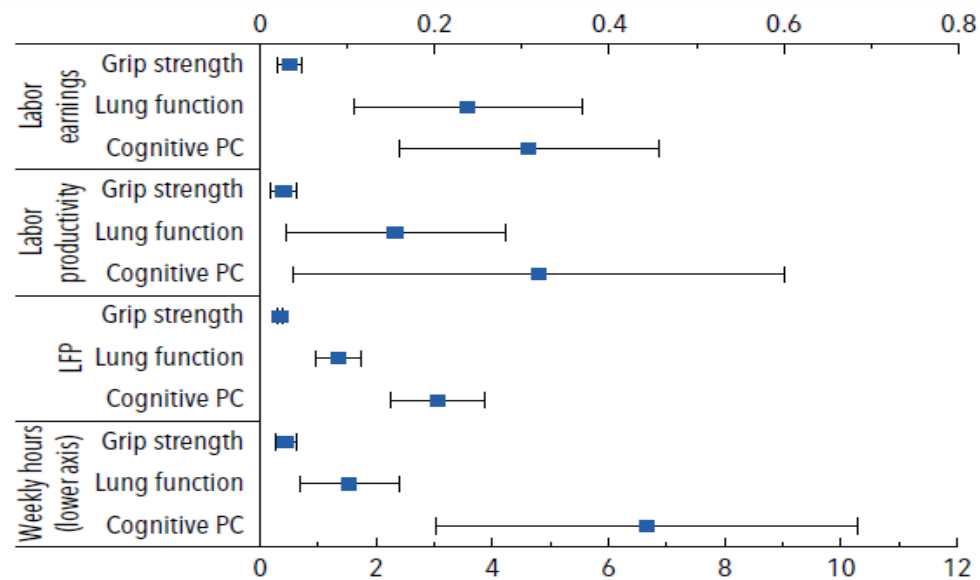
- Labor earnings: Total earnings and labor productivity (hourly wage).
- Labor supply: Extensive margin (LFP, work, unemployment, retirement age) and intensive margin (hours/weeks worked).

**IV assumption:** Some chronic diseases cases are random (controlling for health behaviors – exercise, smoking, drinking). (1S)

- Robustness: Augmented Inverse Propensity Score (AIPW); country-year fixed effects.

## Effect of healthy aging on labor market outcomes

(2SLS regression coefficients)

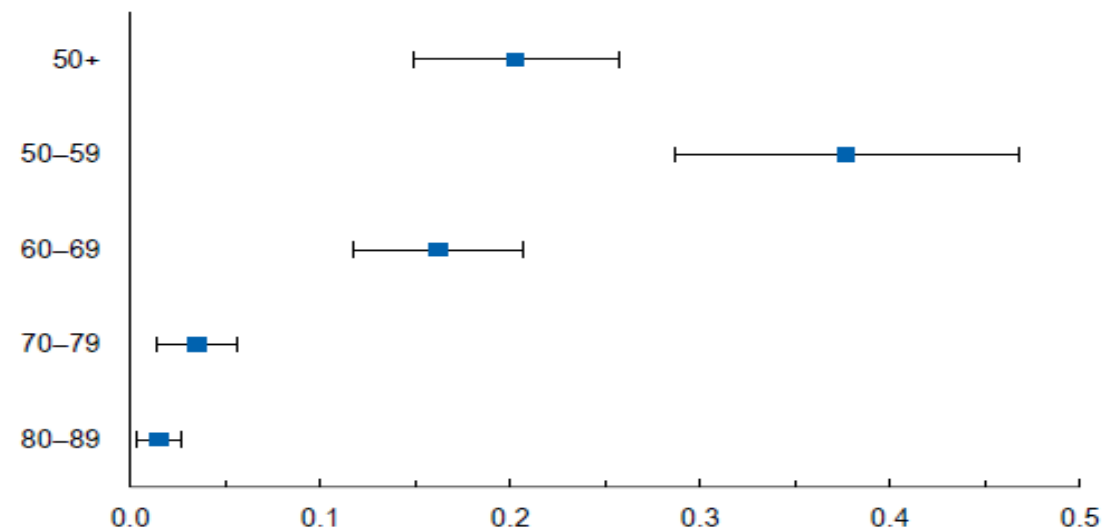


Sources: Gateway to Global Aging Data; national microdata sources; and IMF staff calculations.

Note: The figure shows estimates from two-stage least squares regressions of labor market outcomes of individuals ages 50 and older on health indicators (one at a time, instrumented by chronic diseases), with individuals' age, gender, education, wealth, and country fixed effects controlled for. Squares represent point estimates, whereas surrounding bars represent 90 percent confidence intervals. The coefficients are rescaled to reflect the estimated impact of "healthy aging" (health trends) over 10 years. PC = principal components; LFP = labor force participation.

## Heterogeneous effects of cognitive health on labor force participation, by age group

(2SLS regression coefficients)



Sources: Gateway to Global Aging Data; national microdata sources; and IMF staff calculations.

Note: This figure shows the coefficient from the second stage of a two-stage least squares regression of labor force participation (dummy variable) on the first principal component of cognitive health indicators, instrumented by the incidence of chronic diseases and with individuals' socio-economic characteristics (age, gender, education, wealth), lifestyle factors (underweight, obesity, physical inactivity, smoking), the survey year, and country fixed effects controlled for. Squares represent the point estimate whereas surrounding bars represent the 90 percent confidence interval. The coefficients are re-scaled to reflect the estimated impact of 'healthy aging' (health trends) over 10 years.

## **2. Economic implications of global population aging**

# Model baseline: The impact of aging within and across economies

## Global OLG Model (Auclert, Malmberg, Martenet, and Rognlie, 2024):

- Global: 25 economies including the world's largest (EMs: China, India, Hungary and Poland).
- Country-specific demographic, income-by-age and wealth-by-age profiles.
- Policy variables: Retirement age; social security spending; other fiscal spending; labor taxes.
- Model extended:
  - 26<sup>th</sup> block: 44 LICs with demographic turning point after 2040. Altogether 2/3 of global economy and population.
  - Age-productivity profiles that incorporate *healthy aging* trends—informed by empirical analysis.
  - Country-specific, time-varying TFP profiles (convergence dynamics + impact of younger populations on TFP).
  - Imperfect integration of *China, India* and *LIC bloc* in global capital markets (interest rate wedge).

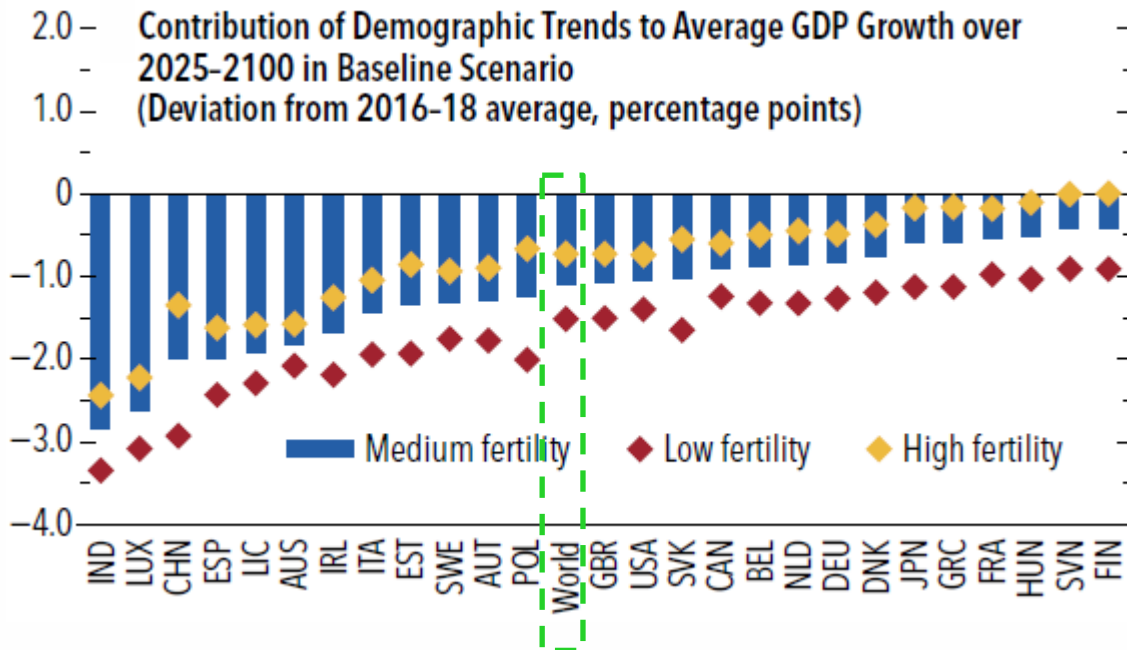
## Baseline:

- Demographic trends from 2024 UNWPP (fertility, mortality, and migration).
- Effective retirement ages increase by 1 month per year over 60 years (except India and LIC bloc).
- Public debt as per WEO projections up to 2029; stable thereafter.

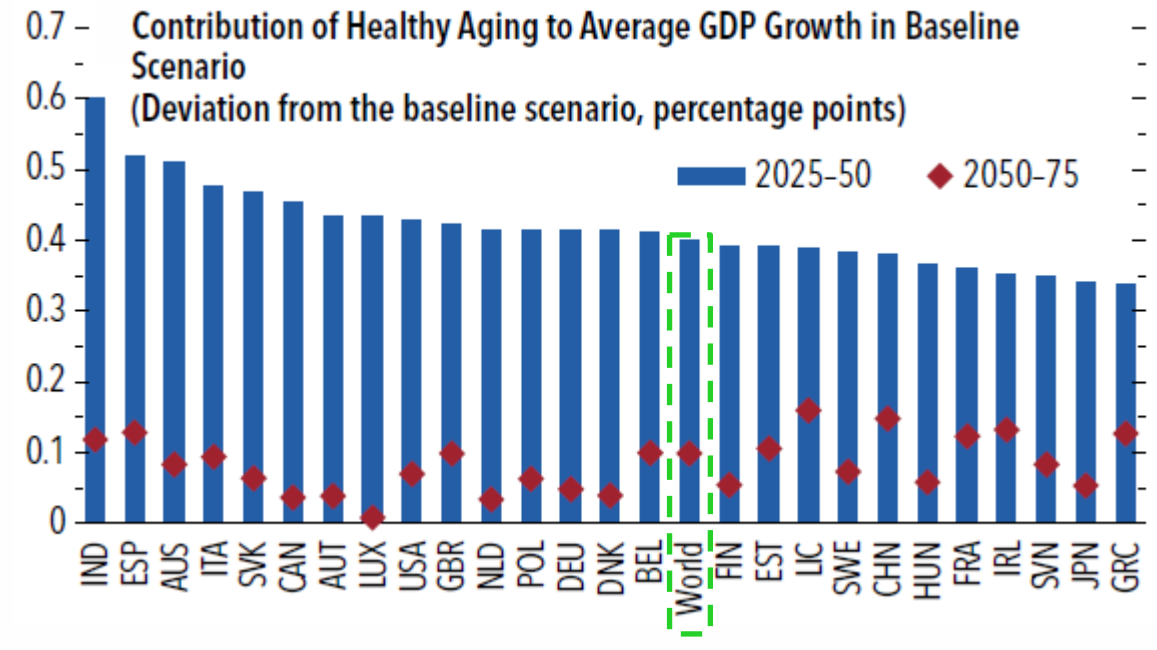
# The role of health aging and demographics in the baseline

- Drag from demographic forces substantial but highly heterogenous.
- Contribution to growth from ongoing healthy aging trend (~¼ of gains in 2000-22) sizable.

## Demographic trends



## Healthy aging



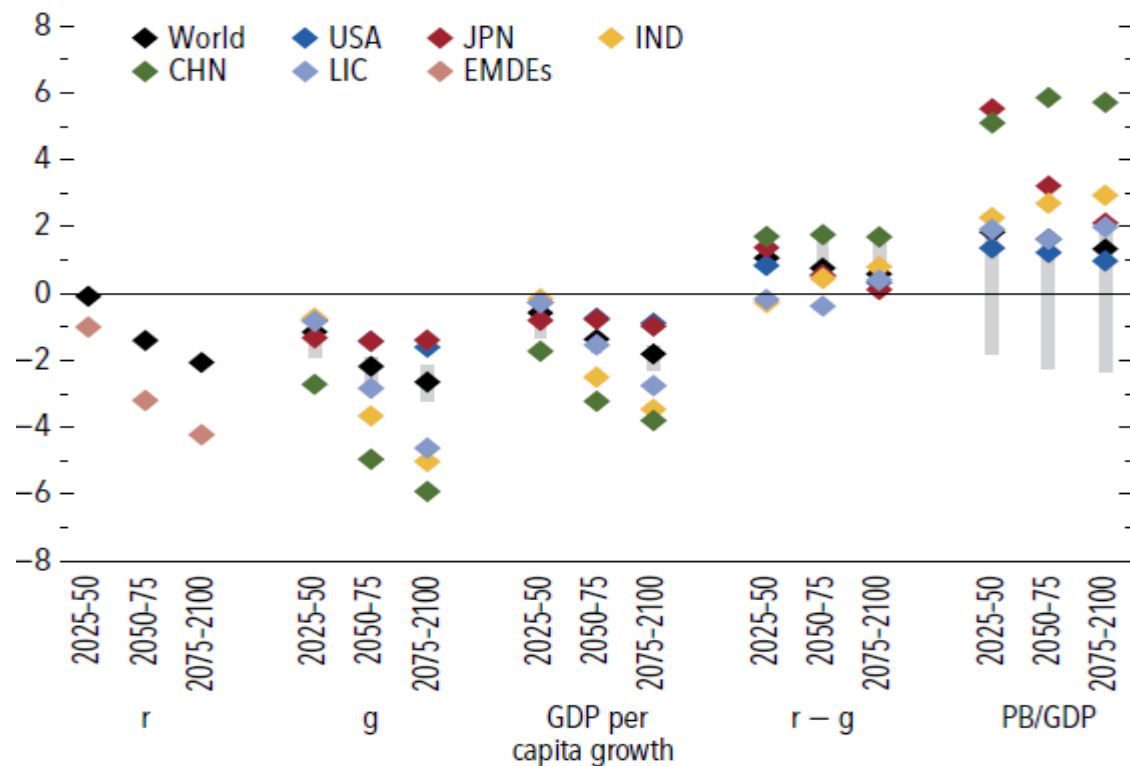
Source: IMF staff calculations.

Note: The bars and diamonds denote annual averages over the reported periods. The values for "World" denote averages for the economies included in the model. Data labels in the figure use International Organization for Standardization (ISO) country codes. LIC = bloc of low-income countries.

# Growth is expected to slow down, with higher fiscal pressures

## Baseline Projections: Growth, Interest Rates, and Primary Balances

(Deviation from 2016–18 average, percentage points)



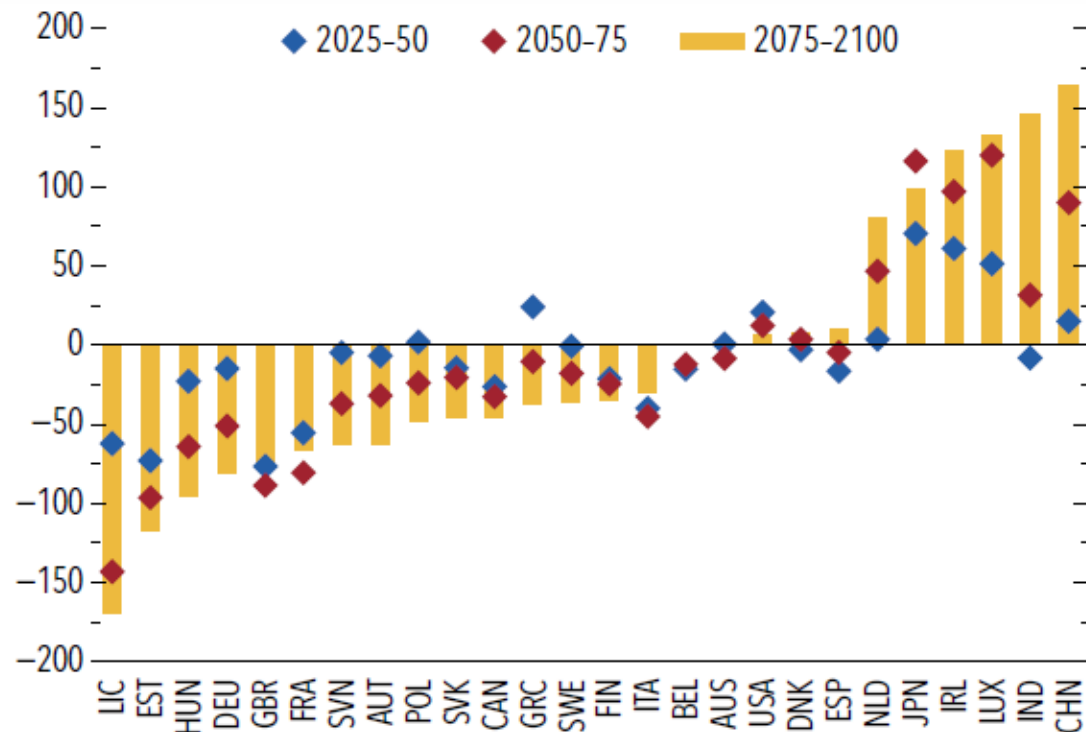
- Projected *growth* decline, with significant cross-country heterogeneity.
- Demographics-induced downward pressure on *interest rates* expected to continue going forward.
- Projected upward movement in *r-g* ...
- ... requiring more fiscal effort in about half of the model economies, including the world's largest.

Source: IMF staff calculations.

Note: Diamonds mark the annual average over the reported periods. Grey bars denote interquartile ranges. A positive value for PB/GDP indicates a country would need a higher primary balance in the reported period than it had, on average, in 2016–18 to keep its debt ratio stable beyond 2029. The values for “World” denote averages for the economies included in the model while the values for “EMDEs” denote averages for China, India, and the LIC bloc. Data labels in the figure use International Organization for Standardization (ISO) country codes. EMDEs = emerging market and developing economies; g = GDP growth rate; LIC = bloc of low-income countries; PB = primary balance; r = interest rate.

# Capital flows and net foreign asset positions are also expected to adjust

**Baseline Projections: Net Foreign Assets**  
(Deviation from 2016–18 average, percent of GDP)



Uneven demographic trends contribute to divergent NFA positions:

- Large EMs would accumulate foreign assets (2050-2100)...
- while many AEs would be decumulating assets.

With a young population, LICs would attract capital flows (worsening NFA position), a trend that reverses around 2070.

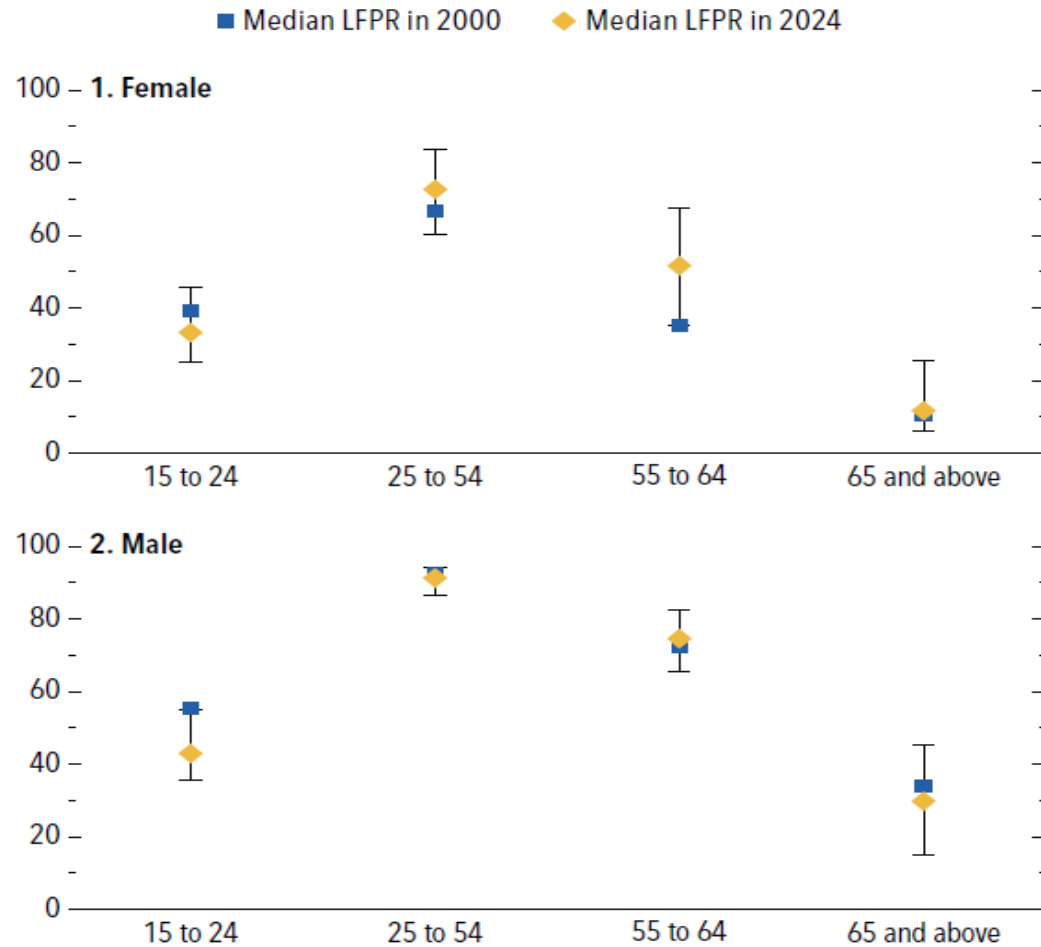
Source: IMF staff calculations.

Note: The bars and diamonds denote annual averages over the reported periods. Data labels in the figure use International Organization for Standardization (ISO) country codes. LIC = bloc of low-income countries.

# **3. The role of labor supply policies**

# Labor supply policies to boost growth amid population aging

## Labor Force Participation by Age Group (Percent)



## Focus on three policy areas:

1. Boosting the human capital of older individuals
2. Extending working lives as life expectancy rises
3. Narrowing gender gaps in labor force participation

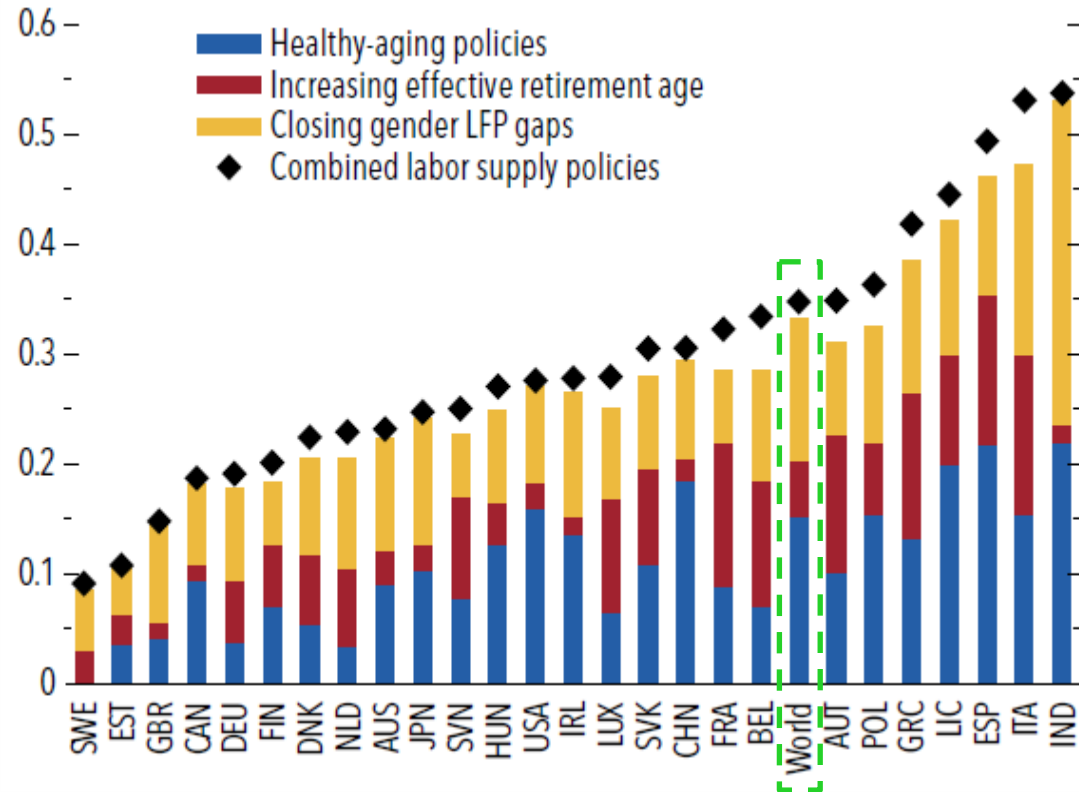
Sources: ILO; UNWPP; and IMF staff calculations.

Note: The whiskers indicate 2024 interquartile ranges across countries. LFPR = labor force participation rate.

# Labor supply policies could mitigate demography's drag on growth...

## Average Impact of Labor Supply Policies on GDP Growth over 2025–2100

(Deviation from the baseline scenario, percentage points)



Source: IMF staff calculations.

Note: The bars (markers) represent the deviations from the baseline scenario when each labor policy is implemented in isolation (all labor policies are implemented together). The sum of the values for the individual policies does not necessarily coincide with the value for the combined policy scenario because of interactions between the policies. The value for "World" denotes the average for the economies included in the model. Data labels in the figure use International Organization for Standardization (ISO) country codes. LFP = labor force participation; LIC = bloc of low-income countries.

## Policy scenarios:

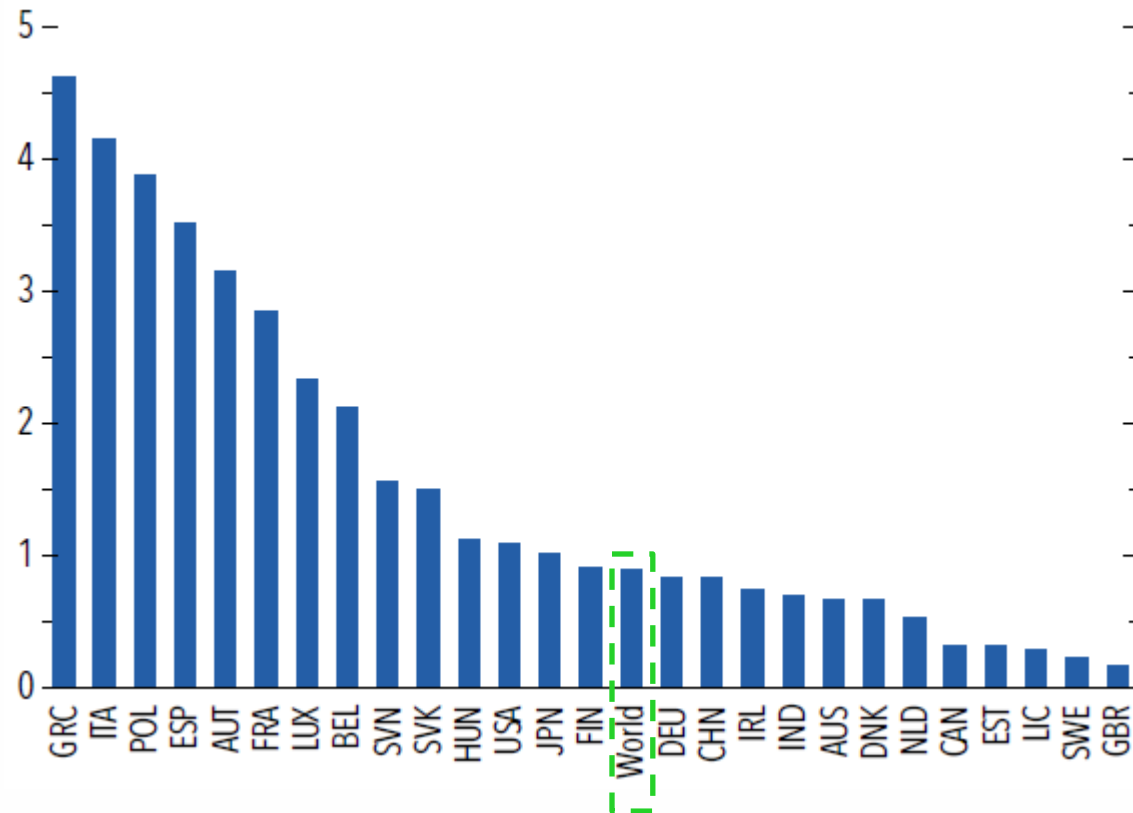
1. Assumes **health policies** would reduce cross-country differences with respect to the frontier by one-fourth.
2. Assumes **faster increases in effective retirement age**, relative to the baseline. Further alignment with prospective old-age thresholds (Sanderson and Scherbov 2010; Kotschy and Bloom 2023).
3. Narrowing country-specific **gender gaps** in LFP by three-fourths by 2040.

**Combined scenario** could offset 3/4 drag from demographics over 2025-250 (1/3 over 2025-2100)

(Additional results)

## ... and create come fiscal space

**Additional Fiscal Space in Combined Policy Scenario**  
(Deviation from the baseline scenario, percentage points of GDP)



Source: IMF staff calculations.

Note: The figure shows the fiscal gains under the combined policy scenario due to higher effective labor supply and improved old-age dependency ratio relative to the baseline; see Online Annex 2.3.3 for further details. Because the magnitude of the gains varies over the transition, the figure reports the average gain over 2025–2100. The value for “World” denotes the average for the economies included in the model. Data labels in the figure use International Organization for Standardization (ISO) country codes. LIC = bloc of low-income countries.

Fiscal impact:

1. Direct impact on *PB*.
2. Indirect impact through *r-g*.

Additional fiscal space:

- Heterogenous effects across economies.
- Net fiscal gains likely smaller due to direct budgetary cost of some policy measures.

(Additional results)

# **4. Summary of findings and policy implications**

# Summary and policy implications

- **Sharp change in the age structure of economies** at asynchronous pace.
- **Functional capacity of older individuals has improved over time**—although disparities persist.
  - Healthy aging associated with improved labor market outcomes for older workers (labor supply and earnings).
- **Under current policies, population aging is expected to depress global economic growth and strain public finances.**
  - Healthy aging partly offsets demography's drag on growth.
  - Significant cross-country variation amid uneven pace of aging; continued divergence in NFA positions.
  - Despite lower interest rates, many countries will need larger fiscal effort to stabilize debt levels.
- **A host of policies would help mitigate the impact of global population aging :**
  - ***Improving human capital and labor outcomes of older workers:*** Preventive health policies, throughout lifecycle; training and skill development; flexible work arrangements and workplace adaptation to foster 'age-friendly' jobs.
  - ***Incentivizing longer careers,*** gradually increasing the effective retirement age.
  - ***Reducing labor participation gaps:*** Foster female labor force participation (without further discouraging fertility).



# **World Economic Outlook April 2025**

**THANK YOU!**

# Extra Slides

# We find broad-based evidence of healthy aging...

Online Annex Table 2.2.1. Trends in Healthy-Aging and Other Socioeconomic Determinants of Health

	Measured Health			Self-Reported Health		
	Grip Strength	Lung Function	Cognitive PC	Overall Health	Physical PC	Psych. Well-Being
	(1)	(2)	(3)	(4)	(5)	(6)
Year	0.004** (0.002)	0.011** (0.004)	0.020*** (0.003)	0.005** (0.002)	0.005*** (0.002)	0.015*** (0.003)
<i>Socio-Economic Controls:</i>						
Age	-0.035*** (0.001)	-0.028*** (0.001)	-0.026*** (0.001)	-0.020*** (0.001)	-0.025*** (0.002)	-0.014*** (0.002)
Male	1.345*** (0.025)	0.761*** (0.03)	0.009 (0.029)	0.041* (0.02)	0.036** (0.015)	0.045** (0.018)
Upper Secondary Education	0.064*** (0.013)	0.097*** (0.031)	0.362*** (0.034)	0.217*** (0.024)	0.127*** (0.019)	0.191*** (0.021)
Tertiary Education	0.081*** (0.016)	0.225*** (0.024)	0.625*** (0.042)	0.422*** (0.038)	0.227*** (0.027)	0.309*** (0.033)
(Log) Household Wealth	0.019*** (0.002)	0.017*** (0.003)	0.029*** (0.004)	0.035*** (0.005)	0.024*** (0.004)	0.040*** (0.003)
Constant	-7.200** (3.548)	-21.642** (8.958)	-39.385*** (6.267)	-8.416* (4.199)	-8.533*** (3.020)	-30.601*** (6.142)
Observations	460,240	217,702	382,424	731,020	628,733	345,479
R <sup>2</sup>	0.612	0.341	0.381	0.204	0.129	0.176
Number of Countries	38	24	34	41	34	30
Country FE	✓	✓	✓	✓	✓	✓

Sources: Gateway to Global Aging Database; national microdata sources; and IMF staff calculations.

Note: The estimations come from ordinary least-squares regressions of health indicators of individuals ages 50 and older on the survey year, with individual's age, gender, education, household wealth, and country fixed effect. Standard errors are clustered at the country level controlled for. FE = fixed effect

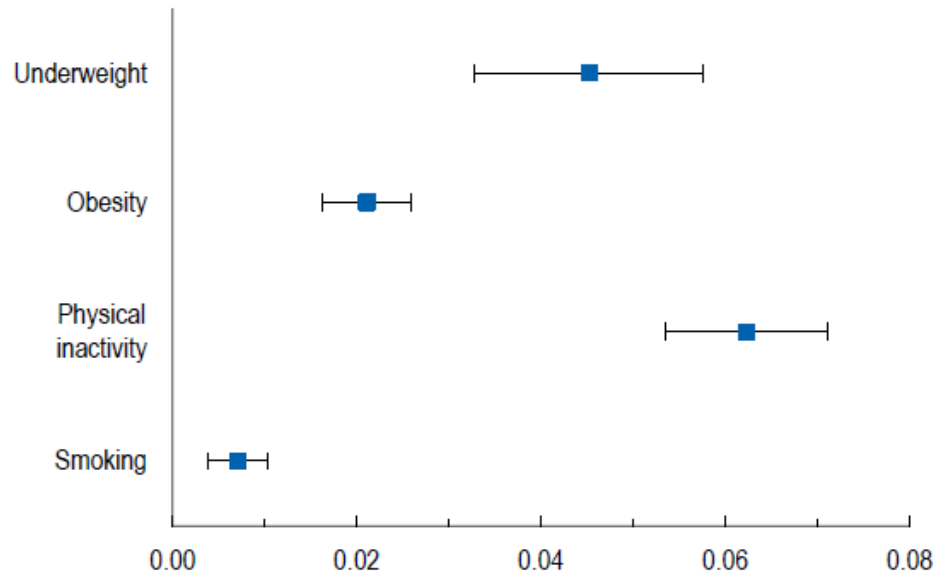
\*\*\* p < 0.01; \*\* p < 0.05; \* p < 0.1.

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# Does healthy aging improve labor market outcomes for older workers?

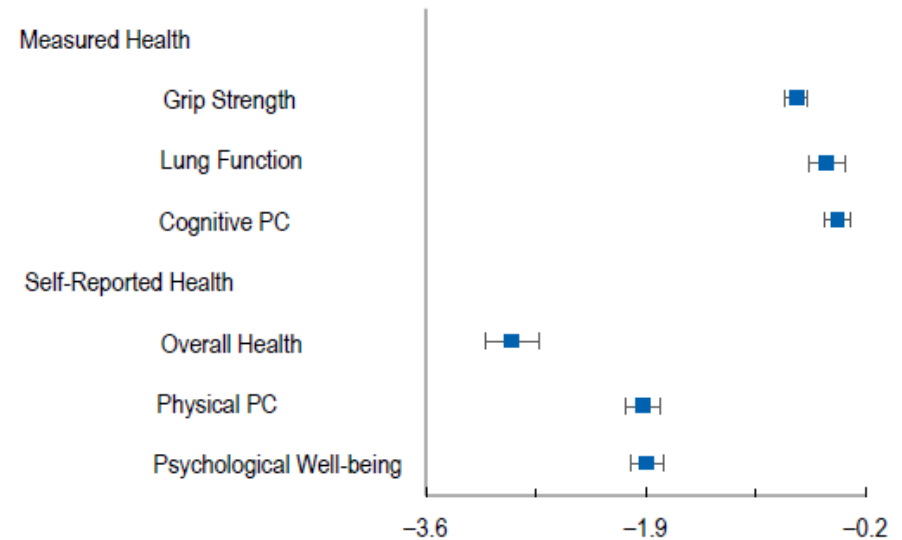
- IV: Chronic diseases that are unexplained by socioeconomic characteristics and health behaviors ([back](#))

Online Annex Figure 2.2.4. Impact of Lifestyle Factors on Overall Health Frailty  
(Regression coefficients)



Sources: Gateway to Global Aging Data; national microdata sources; and IMF staff calculations.  
 Note: This figure shows the coefficient from an ordinary least squares regression of the health frailty index (measured on a 0-1 scale) of individuals ages 50 and older on different lifestyle factors, with individuals' socio-economic characteristics (age, gender, education, wealth), the survey year, and country fixed effects controlled for. Squares represent the point estimate whereas surrounding bars represent the 90 percent confidence intervals.

Online Annex Figure 2.2.5. Impact of Chronic Diseases on Health Indicators  
(Regression coefficient)



Sources: Gateway to Global Aging Data; national microdata sources; and IMF staff calculations.  
 Note: This figure shows the coefficient from the first stage of a two-stage least squares regression of health indicators of individuals ages 50 and older on the instrumental variable—the incidence of chronic diseases—with individuals' socio-economic characteristics (age, gender, education, wealth), lifestyle factors (underweight, obesity, physical inactivity, smoking), the survey year, and country fixed effects controlled for. Squares represent the point estimate whereas surrounding bars represent the 90 percent confidence intervals. PC = principal component.

# Does healthy aging improve labor market outcomes for older workers?

- Robustness: Augmented Inverse Propensity Score (AIPW) estimator (Jordà and Taylor, 2016).
- Assigns greater weight to health shocks that are less predictable.

(back)

Online Annex Table 2.2.5. AIPW Regressions: Effect of Chronic Disease Dummy on Labor Market Outcomes

	Extensive Margin		Intensive Margin		Total Earnings	Labor Productivity		Retirement Age
	LFP	Employment	Weekly hours	Weeks/year		Earnings/hr	Earnings/hr/wk	
	(1)	(2)	(3)	(4)		(6)	(7)	
<i>AIPW Average Treatment Effect:</i>								
Chronic Disease Dummy (Top 10)	-0.071*** (0.008)	-0.018*** (0.004)	-1.235*** (0.109)	-0.371*** (0.068)	-0.099*** (0.020)	-0.039** (0.021)	-0.014*** (0.010)	-0.590*** (0.067)
<i>OLS Estimate:</i>								
Chronic Disease Dummy (Top 10)	-0.080*** (0.007)	-0.030*** (0.007)	-0.880*** (0.307)	-0.256*** (0.083)	-0.064*** (0.015)	-0.018 (0.017)	-0.045* (0.022)	-0.416* (0.231)
Observations	565,640	205,315	198,418	124,139	93,893	77,412	44,460	285,809
Socio-Economic Controls	✓	✓	✓	✓	✓	✓	✓	✓
Lifestyle Controls	✓	✓	✓	✓	✓	✓	✓	✓
Country FE	✓	✓	✓	✓	✓	✓	✓	✓

Sources: Gateway to Global Aging Database; national health surveys; and IMF staff calculations.

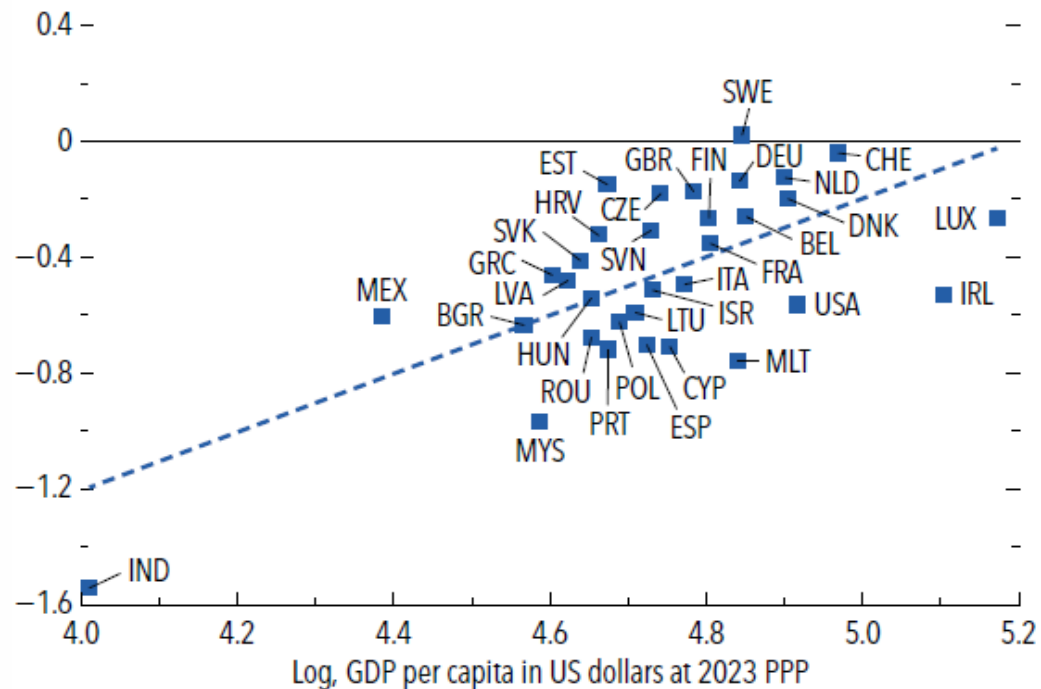
Note: The estimations come from regressions of labor market outcomes of individuals ages 50 and older on a dummy indicator of chronic diseases, with socioeconomic characteristics (age, gender, education, household wealth), lifestyle factors (dummy indicators for smoking, physical inactivity, obesity, and underweight), the survey year, and country fixed effects controlled for. Standard errors are clustered at the country level. AIPW = augmented inverse propensity score weighting; FE = fixed effect; hr = hours; LFP = labor force participation; OLS = ordinary least squares; wk = week.

\*\*\* p < 0.01; \*\* p < 0.05; \* p < 0.1.

# Important cross-country differences in cognitive health scores

## Cross-country health differences

(cognitive health score, country fixed effects)



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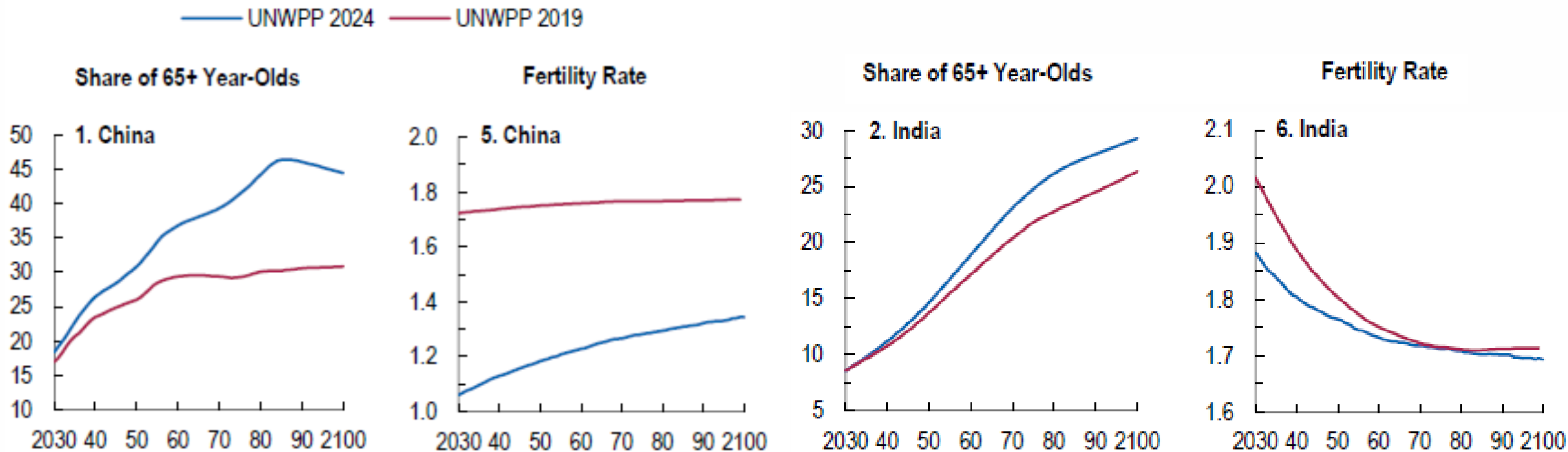
Sources: Gateway to Global Aging Data; national microdata sources; and IMF staff calculations.

Note: The vertical axis shows country fixed effects from ordinary least squares regressions of the cognitive health score of individuals ages 50 and older on the survey year, with individuals' age, gender, education, and household wealth controlled for. Cognitive health score is the first principal component of cognitive indicators, standardized to mean zero, standard deviation one. The regression sample period is 2000–22. Data labels in the figure use International Organization for Standardization (ISO) country codes. PPP = purchasing power parity.

# Demographic assumptions

Online Annex Figure 2.3.1. The Share of 65+ Year-Olds and Fertility Rates in Selected Countries across Different Vintages of UNWPP

(Percent; live births per woman)

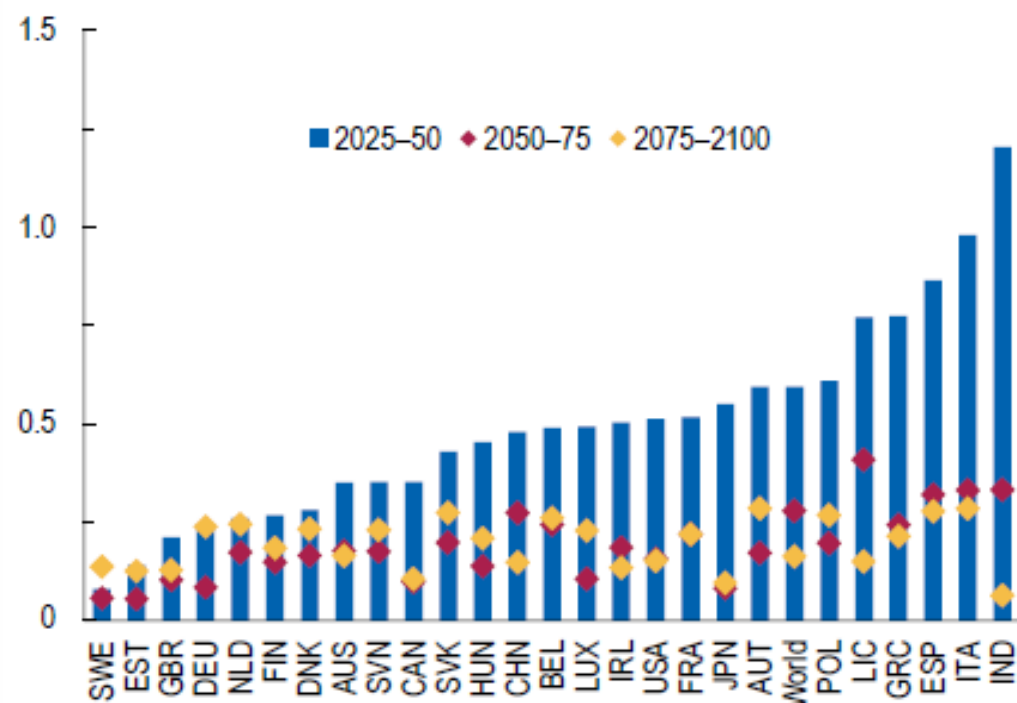


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## Additional simulation results

Online Annex Figure 2.3.3. Average GDP Growth Rate, Combined-Policy Scenario

(Deviation from the baseline scenario, percentage points)



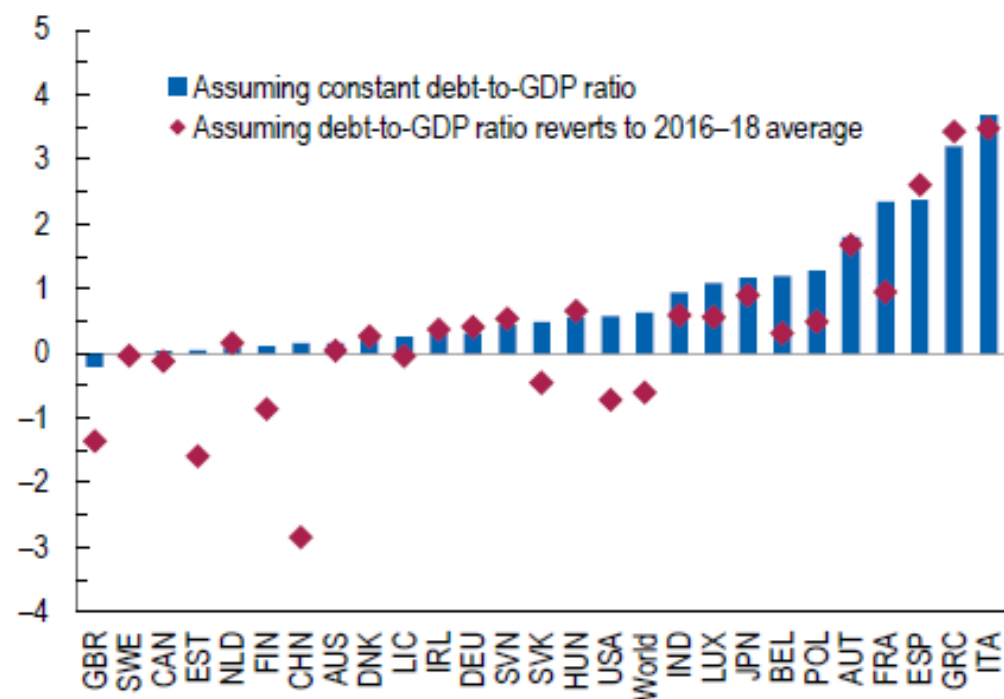
Source: IMF staff calculations.

Note: The bars and diamonds denote annual averages over the reported periods. The values for "World" denote averages for the economies included in the model. Data labels in the figure use International Organization for Standardization (ISO) country codes. LIC = bloc of low-income countries.

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Online Annex Figure 2.3.4. Additional Fiscal Space over 2025-40, Combined-Policy Scenario

(Deviation from the baseline scenario, percent of GDP)



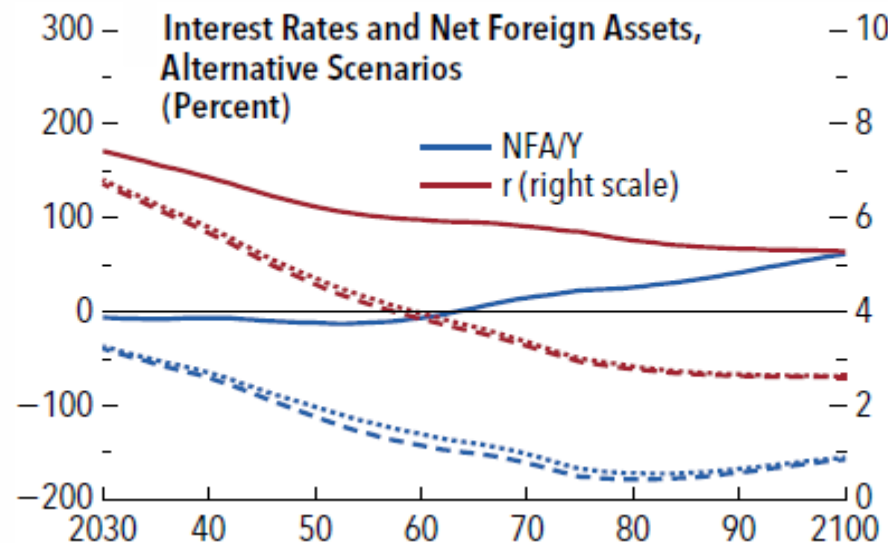
Source: IMF staff calculations.

Note: The figure shows the fiscal gains under the combined-policy scenario due to higher effective labor supply and improved old-age dependency ratio relative to the baseline. Because the magnitude of the gains varies over the transition, the figure reports the average gain over 2025-2040. The values for "World" denote averages for the economies included in the model. Data labels in the figure use International Organization for Standardization (ISO) country codes. LIC = bloc of low-income countries.

## Box 2.1 - Enhancing global financial integration to support growth in low-income countries

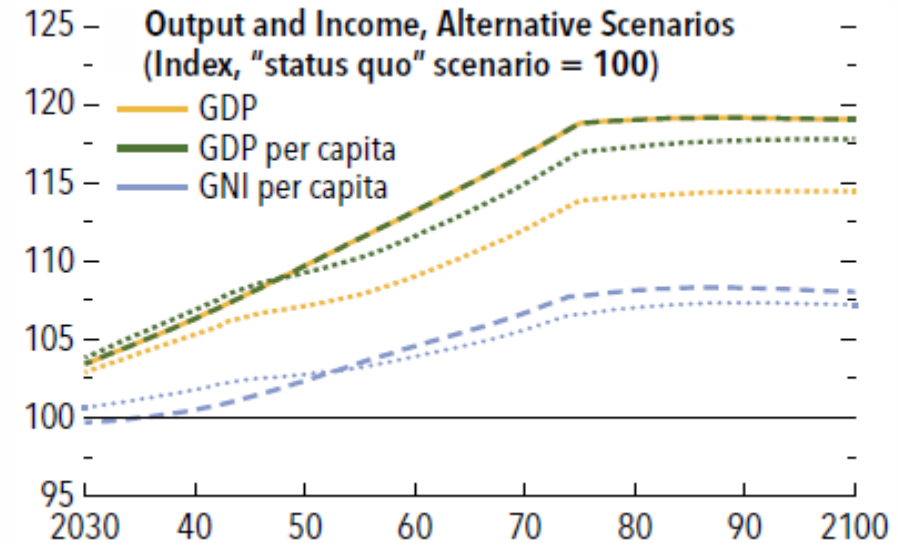
- Enhanced capital integration lowers borrowing costs, increases investment demand and capital inflows, and raises GDP per capita in low-income countries relative to “status quo” scenario with unchanged integration.

Low-Income Countries: Impact from Enhanced Financial Integration and Migration Outflows



Source: IMF staff calculations.

Note: In panel 1, solid lines denote “status quo” scenario. In both panels, dashed lines denote “enhanced financial integration” scenario and dotted lines denote “enhanced financial integration plus migration” scenario. GNI = gross national income; NFA/Y = net-foreign-assets-to-GDP ratio; r = interest rate.



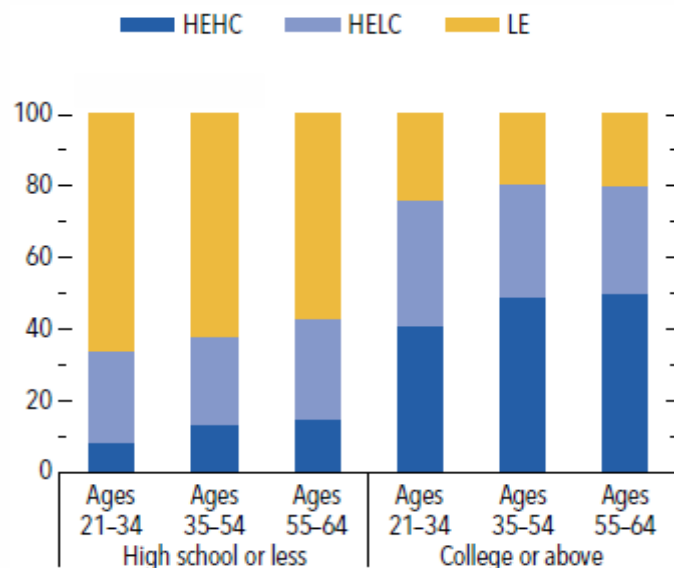
Source: IMF staff calculations.

Note: In panel 1, solid lines denote “status quo” scenario. In both panels, dashed lines denote “enhanced financial integration” scenario and dotted lines denote “enhanced financial integration plus migration” scenario. GNI = gross national income; NFA/Y = net-foreign-assets-to-GDP ratio; r = interest rate.

## Box 2.3 - AI and aging: Evidence from the US

*Impact of AI depends largely on education level, young and older workers alike.*

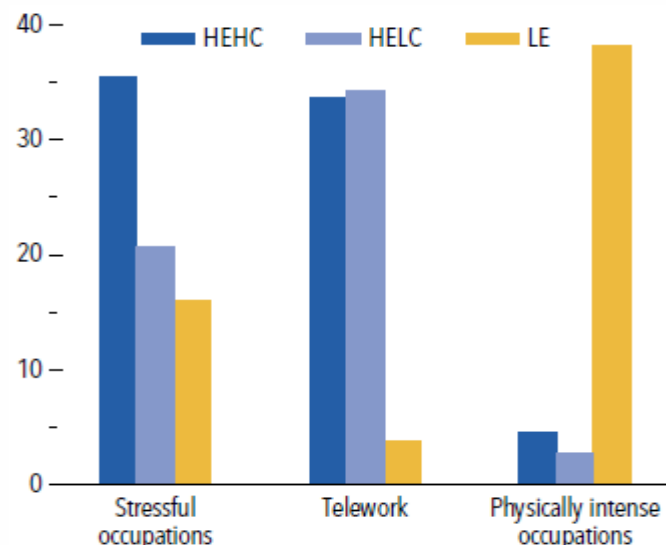
**Employment shares: AI exposure and complementarity**  
(percent)



Sources: United States CPS; and IMF staff calculations.  
Note: HEHC = high exposure, high complementarity; HELC = high exposure, low complementarity; LE = low exposure.

*AI-exposed jobs compatible with telework and less physically demanding, but can be more stressful.*

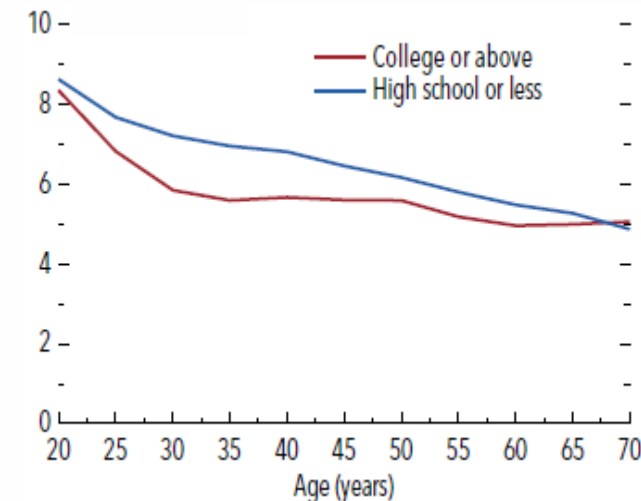
**AI exposure and age friendliness, age 55+**  
(share of surveyed workers, percent)



Sources: United States CPS; and IMF staff calculations.  
Note: The figure shows the share of workers who report their jobs having these characteristics, by occupation group. Data on working from home rely on survey data in 2023 and 2024; other variables consider the period 2010–19. HEHC = high exposure, high complementarity; HELC = high exposure, low complementarity; LE = low exposure.

*Probability to switch jobs or occupations decreases with age.*

**Workers' probability of transition across occupations, by age**  
(percent)



Sources: United States CPS; and IMF staff calculations.  
Note: The figure shows transitions across occupations measured using the four-digit US Census Bureau 2010 classification at a monthly frequency for the United States and the four-digit International Standard Classification of Occupations (ISCO) 2008 classification at a quarterly frequency for Brazil.