Life expectancy and healthy life expectancy 2016-2018



Statistics Jersey: www.gov.je/statistics

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Background

Period life expectancy (LE) at a given age for an area is the average number of years a person would live, if he or she experienced the particular area's age-specific mortality rates for that time period throughout his or her life.

Healthy life expectancy (HLE) is an extension of LE that combines mortality data with general health status data to produce estimates of the span of life that a person can expect to live in 'very good' or 'good' health.

Life expectancy

New-born males in Jersey could expect to live, on average, for 80.8 years if the current age-specific mortality rates applied to them throughout their life. New-born females could expect to live, on average, for nearly four years longer (84.6 years).

On average, a 65 year old male could expect to live for 19.4 more years, and a 65 year old female could expect to live for 21.8 more years.

Each of these figures are slightly higher than the most recent figures for England – see Table 1.

Table 1: Jersey (2016-2018) and England (2016-2018¹) period life expectancy (average mean age of death) for males and females

		Jersey	England
At birth	Male	80.8	79.6
	Female	84.6	83.2
At 65 years	Male	19.4	18.8
	Female	21.8	21.2

The statistical uncertainty on the at-birth life expectancy figures is +/- 0.6 years for Jersey, and +/- 0.1 years for England.

The **median** life expectancy gives the age in years at which half of a particular cohort will still be alive, assuming the current age-specific mortality rates applied to them throughout their life. Median life expectancies for males and females in Jersey are shown in Table 2.

Table 2: Jersey (2016-2018) and England (2016-2018¹) median life expectancy for males and females

	Jersey	England
Males	83.5	81.8
Females	85.8	85.1

¹https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/lifeexpectancies/datasets/natio nallifetablesenglandreferencetables

Life expectancy across time

Life expectancy for both males and females has increased slightly since the beginning of the decade, but the increase is not statistically significant.





Healthy life expectancy

Applying the proportion of each gender and age group who self-report 'very good' or 'good' health to the life expectancy methodology provides the number of years a person can expect to live in 'very good' or 'good' health. This is presented in the table below, both as a number of years, and as a proportion of the total life expectancy.

The at-birth healthy life expectancy figures for Jersey can be considered accurate to + / - 3 years.

Table 3: Jersey healthy life expectancy for males and females, and proportion of remaining life expectancy in 'very good' or 'good' health (2016-2018)

	-	Healthy life expectancy (average years lived in 'very good' or 'good' health)	Proportion of remaining life expectancy in 'very good' or 'good' health
At birth	Males	66.4	82%
	Females	70.2	83%
At 65 years	Males	12.6	65%
	Females	14.5	66%





Healthy life expectancy comparison with England

The method of data collection for proportions of people reporting 'good' or 'very good' health is different in Jersey (a paper self-completion questionnaire) compared to England (an interviewer led survey). Therefore caution should be taken when interpreting the results below (see Note 4 for further detail). The most recent available data for healthy life expectancies in England at the time of publication were for 2015-2017.

Life expectancy, and particularly healthy life expectancy, is generally higher in Jersey than in England, for both males and females (see Note 4).



Figure 3: Life expectancy and healthy life expectancy, Jersey (2016-2018) versus England (2015-2017)

Notes

- 1. Jersey's age-specific mortality rates (ASMRs) are applied to estimates of Jersey's population by age and gender using an abridged life table methodology.
- 2. Information on people's health status is obtained through the Jersey Opinions and Lifestyle survey, which samples a random, representative group of Jersey's population each year.
- 3. Due to small numbers underlying both ASMRs and health status by age, data from three years (2016, 2017 and 2018) are aggregated to calculate life expectancies and healthy life expectancies.
- 4. It should be noted that the proportion of people reporting 'very good' or 'good' health will be subject to some known biases.
 - a. Firstly, the Jersey Opinions and Lifestyle survey (JOLS) which collects the data is a self-completion questionnaire. This could lead to over-estimation of 'good' or better health, as the method of data collection may exclude those persons who are in poorer health and perhaps more so than in England where the equivalent method of data collection involves face-to-face interview. For this reason, any comparison and interpretation of healthy life expectancy in Jersey with England should be done with caution.
 - b. Secondly, JOLS only captures persons living in private households, and excludes communal establishments such as care homes, most likely giving rise to an over-estimation of health life expectancy in years and as a proportion of remaining life, as is also the case for England's method of collection.