
Subject: Births and Breastfeeding Profile 2025
Date of report: 12 March 2026

Introduction

This annual report contains the latest births and breastfeeding statistics for Jersey, for the calendar year 2025. Data is drawn primarily from hospital computer systems (TRAK/Maxims) and the child health database server (Careplus), alongside information from the superintendent registrar.

It includes key statistics on:

- birth numbers
- birth rates
- birth weights
- C-section rates
- Breastfeeding patterns

The report provides a comprehensive overview of these indicators to offer insights into maternal and infant health in Jersey.

Additionally, it examines how these trends have evolved over time within Jersey and, where appropriate, compare the findings with data from England to provide wider context and highlight similarities or differences.

New Indicators Included

This year, the births and breastfeeding profile incorporates new indicators, including information on:

- babies' first feed: which is the first milk that a baby receives after birth
- time series analysis of percentage of breastfeeding at 6-8 weeks
- time series analysis of total percentage of C-section deliveries by age of mother

The 2025 Jersey Opinions & Lifestyle Survey (JOLS) included a series of questions about breastfeeding in the community, capturing public awareness, attitudes, and levels of support. Data from these questions have been included in the report, along with time series where appropriate.

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Births and Breastfeeding 2025

A total of **711** births to Jersey resident mothers were recorded in **2025**

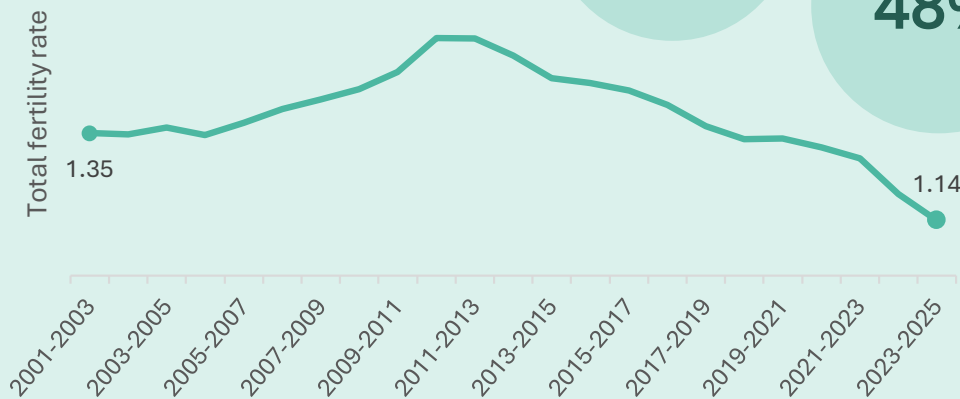


Nearly half of all deliveries were **C-sections** (2023-2025)

48%

The total fertility rate is declining over time,

averaging **1.14** births per women in 2025



30-34 year old women had the **highest** age-specific fertility rate



35% of mothers were aged **35 years and over** at delivery

Around **1 in 10** babies were born **preterm** (before 37 weeks)

2% of full-term births in Jersey were classified as **'low' birthweight**



84%

of babies were breastfed **at discharge** from maternity care

Breastfeeding is **improving** over time



71%

of babies were breastfed **at 6-8 week** review

Two thirds of adults **strongly agree** that women should feel **supported** to breastfeed in public

Almost a quarter of workers had access to a **private breastfeeding space**

Births

A total of 711 births to Jersey resident mothers were recorded in 2025, the lowest annual number in the data held since 1995.

The number of live births in 2025 was slightly lower than the previous year (720 in 2024), and 37% lower than the latest peak in birth numbers seen in 2012 (1,124).

Figure 1. Annual number of live births (1995 to 2025)



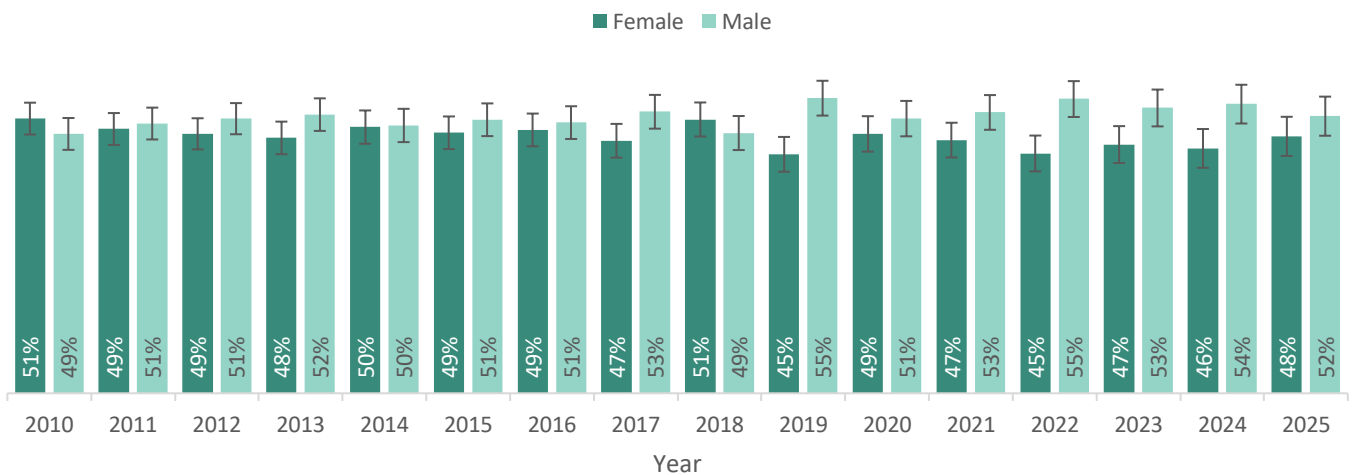
Source: TRAK/Maxims/Careplus

Sex of Baby at Birth

Of the 711 live births recorded in Jersey, 342 babies (48%) were female and 369 (52%) were male. The sex ratio was 1,079 males per 1,000 females, compared to 1,053 in England and Wales in 2024.¹

Over the preceding decade, whilst there have been fluctuations in the actual numbers of boys and girls born each year to Jersey resident mothers, the relative proportions (48% female, 52% male) have been similar over time (Figure 2).

Figure 2. Percentage of live births by sex of baby (2010 to 2025)



Source: TRAK/Maxims/Careplus

¹ Births in England and Wales - Office for National Statistics, available from www.ons.gov.uk

Place of Birth

In 2025, majority (95%) of births took place at the Jersey General Hospital. Unplanned home births² represented less than 1%³ of all live births to Jersey resident mothers.

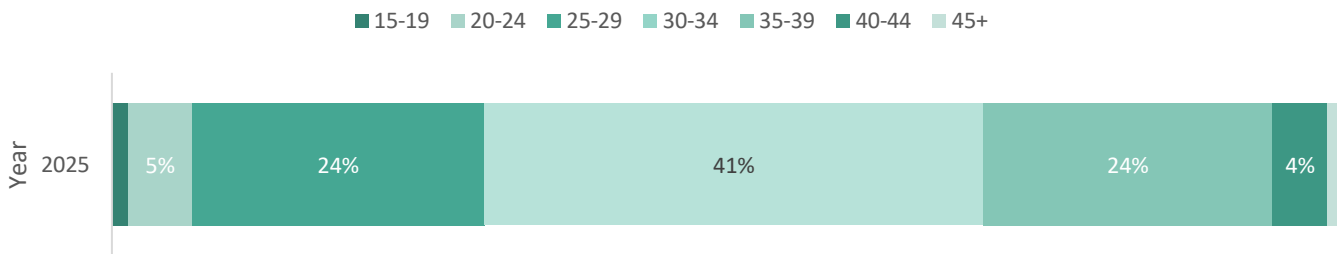
10 babies (around 1% of all live births) were born to Jersey resident mothers in hospitals in the UK in 2025. This is similar to the number of births that have occurred outside of Jersey each year since 2017.

Delivery Statistics

Among live births to Jersey resident mothers:

- around 1 in 10 (6%) were classified as preterm, occurring before 37 weeks' gestation
- just over (54%) of all births were first births, with just under one third (29%) second births, and the remaining 17% being third or later births
- for first time mothers, just under a quarter (24%) were aged 25 to 29 years, over two-fifths (41%) were aged 30 to 34 years, and just under one quarter (24%) were aged 35 to 39 years (Figure 3)

Figure 3. Percentage of first live births by age of mother (2025)



Source: Maxims/Careplus

Birth Weight

A baby's weight at birth can be influenced by several factors, including the gestational age at which the child is born, the health of the mother, and genetics.

In 2025:

- 6% of all live births to Jersey resident mothers (40 babies) were classified as being of low birth weight⁴
- 1% of all live births were recorded as being of very low birth weight⁵
- 2% (12 babies) of full-term live births (born after 37 weeks gestation) were classified as low birth weight.⁶ This proportion hasn't changed significantly since 2012 and is similar to that seen in England in 2024 (3.0%).⁷

Multiple Births

In 2025, ten Jersey resident mothers had a multiple live birth (e.g. twins or triplets). The rate of maternities with multiple live births in Jersey was 14.1 per 1,000 births in 2025 (Figure 4). For comparison, in England and Wales the rate was 13.8 per 1,000 births in 2024.⁸

² The home birth service was suspended in 2024 and has not yet resumed

³ The place of birth was not recorded for 28 babies

⁴ 'Low birthweight' is a term used to describe babies who are born weighing less than 2500g

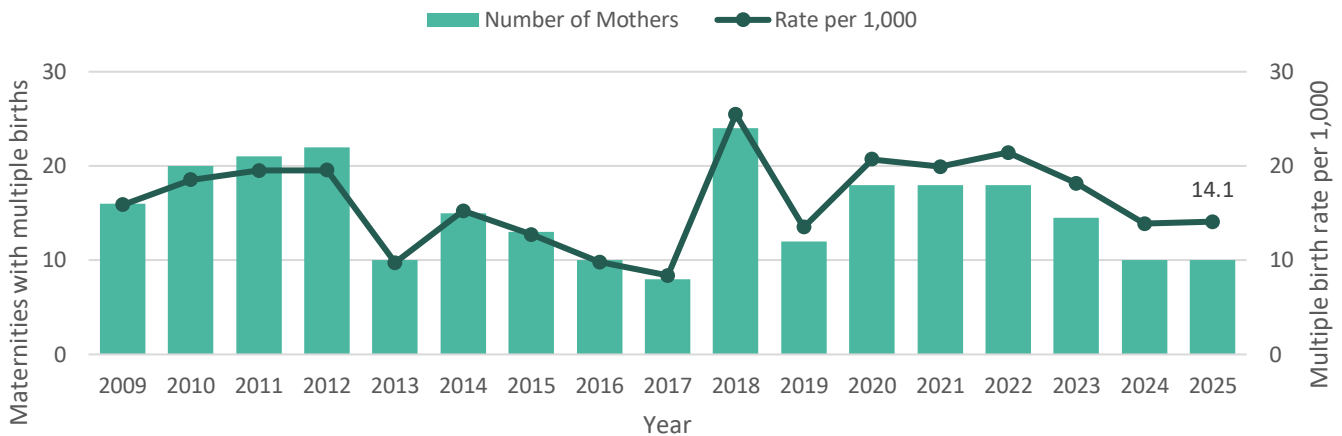
⁵ 'Very low birthweight' is a term used to describe babies who are born weighing less than 1500g

⁶ Live births with a recorded birth weight under 2500g and a gestational age of at least 37 complete weeks

⁷ [Low birth weight of term babies](http://www.fingertips.phe.org.uk), available from www.fingertips.phe.org.uk

⁸ [Multiple births](http://www.ons.gov.uk), available from www.ons.gov.uk

Figure 4. Maternities with multiple live births and multiple birth rate per 1,000 maternities (2009 to 2025)



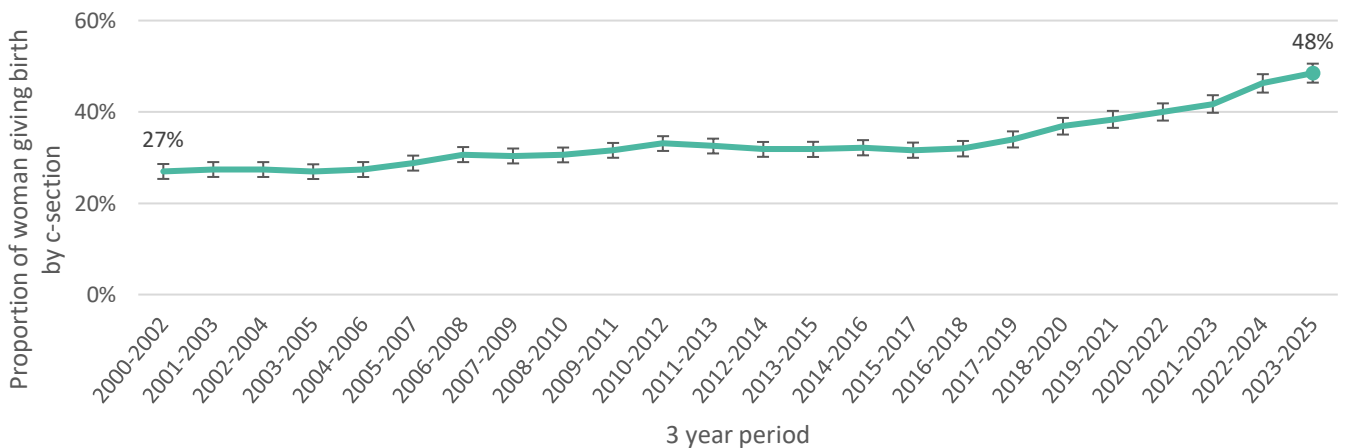
Source: TRAK/Maxims/Careplus

Caesarean Sections (C-Sections)

During the three-year period 2023-2025, around 1 in 2 (48%) of all live births to Jersey resident mothers were delivered by C-section. The C-section rate has almost doubled since 2000-2002, when around 1 in 4 births (27%) were by C-section (Figure 5).

The proportion of births by C-section in Jersey was higher than in England, where 41% of births in 2023-2024 were by C-section.⁹

Figure 5. 3-yearly percentage of women giving birth by C-section (2000-2002 to 2023-2025)



Source: TRAK/Maxims/Careplus

C-sections can either be an emergency (urgent) or elective (planned). In Jersey, during years 2023-2025:

Of mothers giving birth for the first time:

- 32% were delivered by an emergency (urgent) C-section
- 19% were delivered by elective (planned) C-section

Of mothers giving birth for the second time:

- 20% were delivered by an emergency (urgent) C-section
- 28% were delivered by elective (planned) C-section

⁹ [C-Section](http://www.fingertips.phe.org.uk), available from www.fingertips.phe.org.uk

Table 1. Percentage of women giving birth by C-section type and birth order (2023-2025)

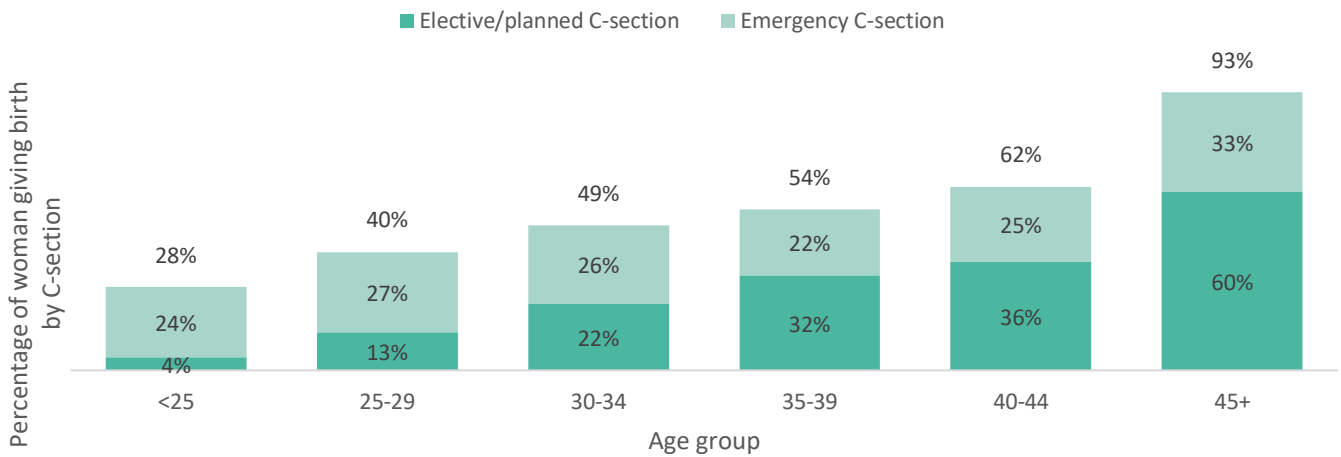
	First Births	Second Births	Third or more Births	Overall % of C-sections
Emergency (urgent) C-section	32%	20%	15%	25%
Elective (planned) C-section	19%	28%	26%	23%
Total	51%	48%	41%	48%

Source: TRAK/Maxims/Careplus

The proportion of C-section deliveries in Jersey increased with the mother’s age. Figure 6 presents the types of C-section deliveries by age of mother, including the overall percentage of C-section deliveries.

Around 1 in 8 (13%) mothers in Jersey aged 25-29 years delivered by an elective (planned) C-section, a smaller proportion compared to mothers aged 35-39 years (32%) and 40-44 years (36%).

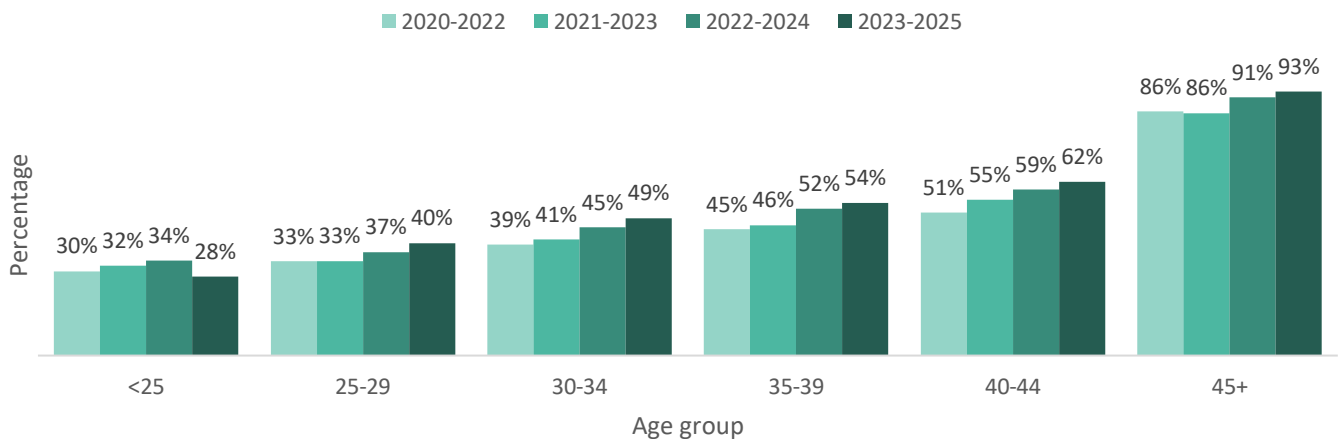
Figure 6. Proportion of deliveries by C-section type and age of mother (2023-2025)



Source: TRAK/Maxims/Careplus

From 2020-2022 to 2023-2025, the percentage of mothers aged 25 and over having either an emergency (urgent) or elective (planned) C-section has increased, while mothers aged 24 and under have seen a slight decrease in the latest three-year period.

Figure 7. Total percentage of C-section deliveries by age of mother (2020-2022 to 2023-2025)



Source: TRAK/Maxims/Careplus

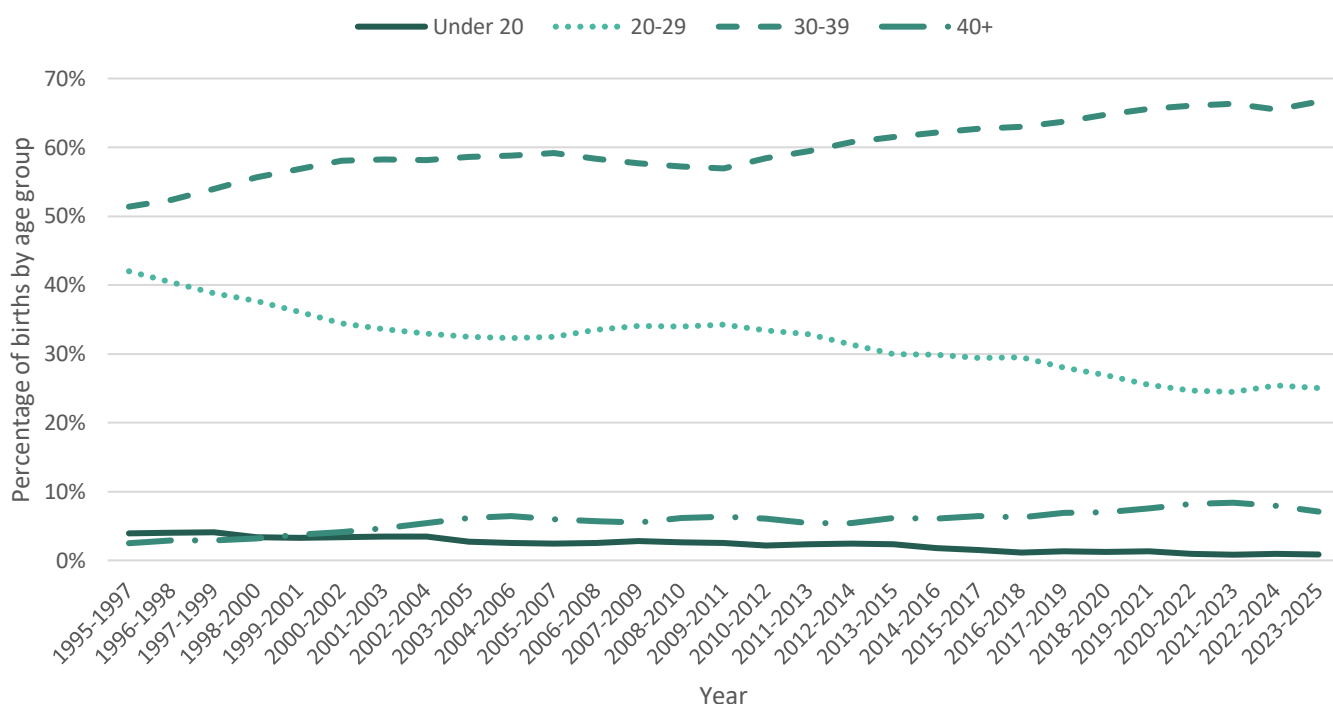
Age of Mothers at Delivery

The average age of mothers giving birth in Jersey in 2025 was 33 years. For comparison, in 2024 the average age of women giving birth in England and Wales was 31 years.¹⁰

In Jersey, the proportion of births to younger mothers (aged 20-29) has been declining; the percentage of overall mothers aged 20 to 29 years fell from 42% in 1995-1997 to 25% in 2023-2025.

Meanwhile, the proportion of births to mothers in older age groups has increased since 1995-1997; between 1995-1997 and 2023-2025, the percentage of mothers aged 30 to 39 years rose from 51% to 67%, while births to mothers aged 40 and over increased from 2% to 7%.

Figure 8. Proportion of births by age-group (1995-1997 to 2023-2025)



Source: TRAK/Maxims/Careplus

Mothers aged 35 and over

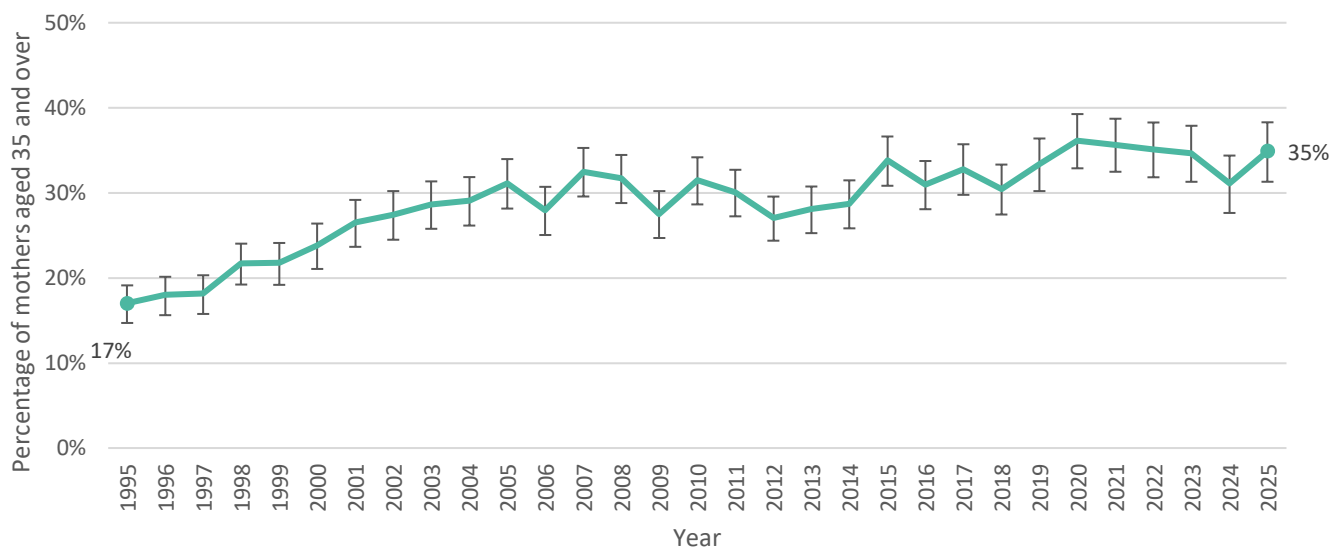
The percentage of mothers giving birth aged 35 years and over in Jersey was 35% in 2025. This has doubled from 17% in 1995.

The percentage of mothers giving birth aged 35 and over in England and Wales was lower than in Jersey, at 26% in 2024.¹¹

¹⁰Births in England and Wales - Office for National Statistics, available from www.ons.gov.uk

¹¹Percentage of deliveries to women aged 35 years or above, available from www.fingertips.phe.org.uk

Figure 9. Proportion of mothers aged 35 years and over at time of birth (1995 to 2025)



Source: TRAK/Maxims/Careplus

Teenage Mothers (Under 18)

Over the last two decades (2000 to 2025), births to teenage mothers under 18 have consistently accounted for less than 1% of all births in each three-year period. Comparing to the latest data in England, 0.6% of births were to mothers aged 17 and under in 2023-2024.¹²

Birth Rates

Crude Birth Rate

The crude birth rate is the total annual number of live births per 1,000 people in the population overall.

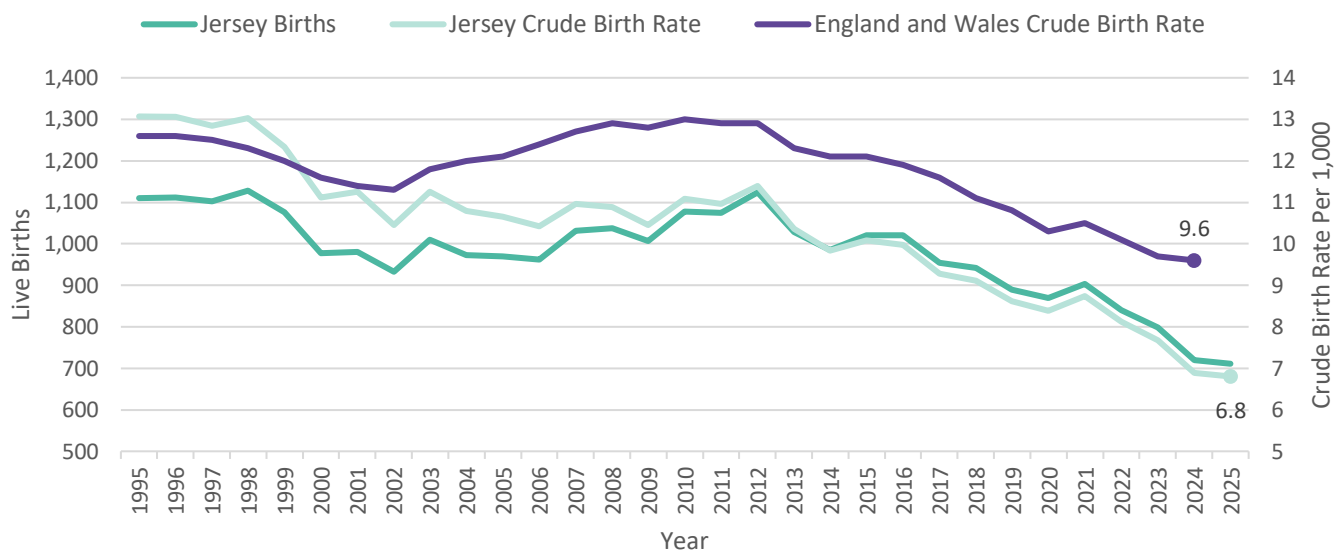
- in 2025, the crude birth rate in was 6.8 live births per 1,000 population
- there has been a continuing decline since 2012 when the birth rate was 11.4 births per 1,000 population (Figure 10)
- the crude birth rate in England and Wales was higher than in Jersey, at 9.6 live births per 1,000 total population in 2024¹³

It is important to note that the crude birth rate is affected by the population structure, therefore the general and total fertility rate are more informative measures for understanding births relative to the population of reproductive age.

¹² [Teenage mothers](http://www.fingertips.phe.org.uk), available from www.fingertips.phe.org.uk

¹³ [Births in England and Wales](http://www.ons.gov.uk), available from www.ons.gov.uk

Figure 10. Crude birth rate (1995 to 2025)



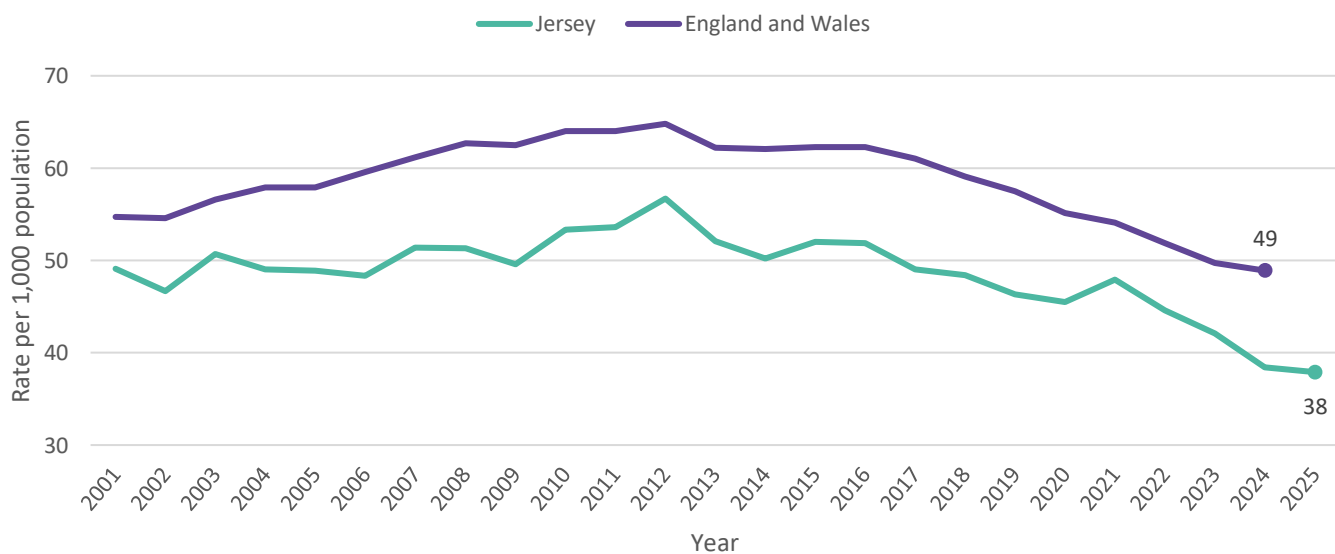
Source: TRAK/Maxims/Careplus

General Fertility Rate (GFR)

The general fertility rate (GFR) is defined as the number of live births in a year per 1,000 women in the population who are aged 15-44 years¹⁴ (considered as potential “childbearing age”). Unlike the crude birth rate, the GFR is not affected by changes in the size of sub-groups of the population which generally would not bear children (e.g. pensioners, young children, men).

The GFR in Jersey in 2025 was 38 births for every 1,000 women of childbearing age. For comparison, the GFR in England and Wales was higher than in Jersey, at 49 births per 1,000 women of childbearing age in 2024.¹⁵

Figure 11. General fertility rate (2001 to 2025)



Source: TRAK/Maxims/Careplus

¹⁴ [General Fertility Rate Indicator Definitions and Supporting Information](http://www.fingertips.phe.org.uk), available from www.fingertips.phe.org.uk

¹⁵ [Births in England and Wales](http://www.ons.gov.uk), available from www.ons.gov.uk

Total Fertility Rate (TFR)

The total fertility rate (TFR) refers to the total number of children born to a woman in her lifetime if she were subject to the current rates of age-specific fertility in the population.

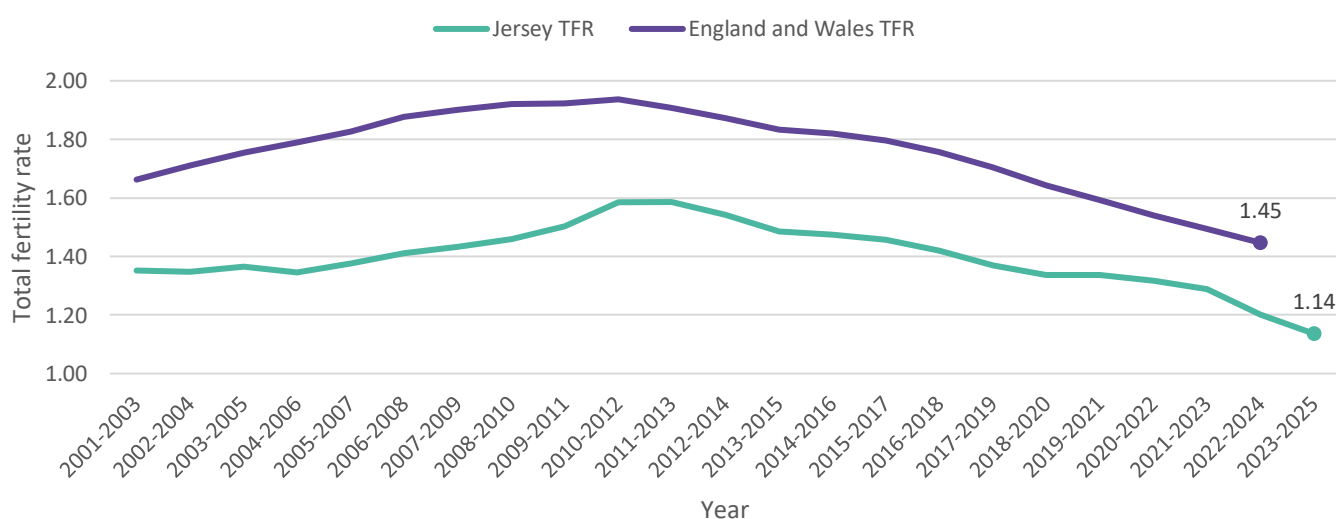
- the TFR in Jersey during the period 2023-2025 was 1.14 births per woman (Table 2), equivalent to around 1,140 births per 1,000 women. This is lower than the latest available 3-yearly rate for England and Wales,¹⁶ where the TFR was 1.45 births per woman (2022-2024, Figure 12)
- the latest TFR for Jersey is the lowest recorded in the data held from 2001 to 2025
- between 2001-2003 and 2011-2013, the total fertility rate (TFR) in Jersey had increased from 1.35 to 1.59. However, since this peak, the birth rate has been declining, meaning that Jersey's current birth rate is now below the general population replacement level of 2.1¹⁷ for high-income countries

Table 2. Calculation of the total fertility rate (2023-2025), as per ONS methodology¹⁸

Age of woman (years)	Estimated number of women in age group	Births to women in age group	Age specific birth rate = births to woman in age group/number of woman in age group
15-19*	7,930	20	0.00
20-24	7,350	116	0.02
25-29	8,450	443	0.05
30-34	10,130	895	0.09
35-39	10,790	591	0.05
40-44*	11,810	158	0.01
*Includes a small number of births to mothers aged under 15 and over 45		Sum	0.23
		TFR = Sum x5	1.14

Source: TRAK/Maxims/Careplus. Population: Statistics Jersey

Figure 12. Three-yearly total fertility rate (2001-2003 to 2023-2025)



Source: TRAK/Maxims/Careplus

¹⁶ [Births in England and Wales](https://www.ons.gov.uk), available from www.ons.gov.uk

¹⁷ [Replacement-level fertility rate](https://www.ons.gov.uk), Channel Islands - This means that, on average, each woman would need to have just over two children for the population size to remain stable over the long term, assuming no migration.

¹⁸ [User guide to birth statistics - Office for National Statistics](https://www.ons.gov.uk), available from www.ons.gov.uk

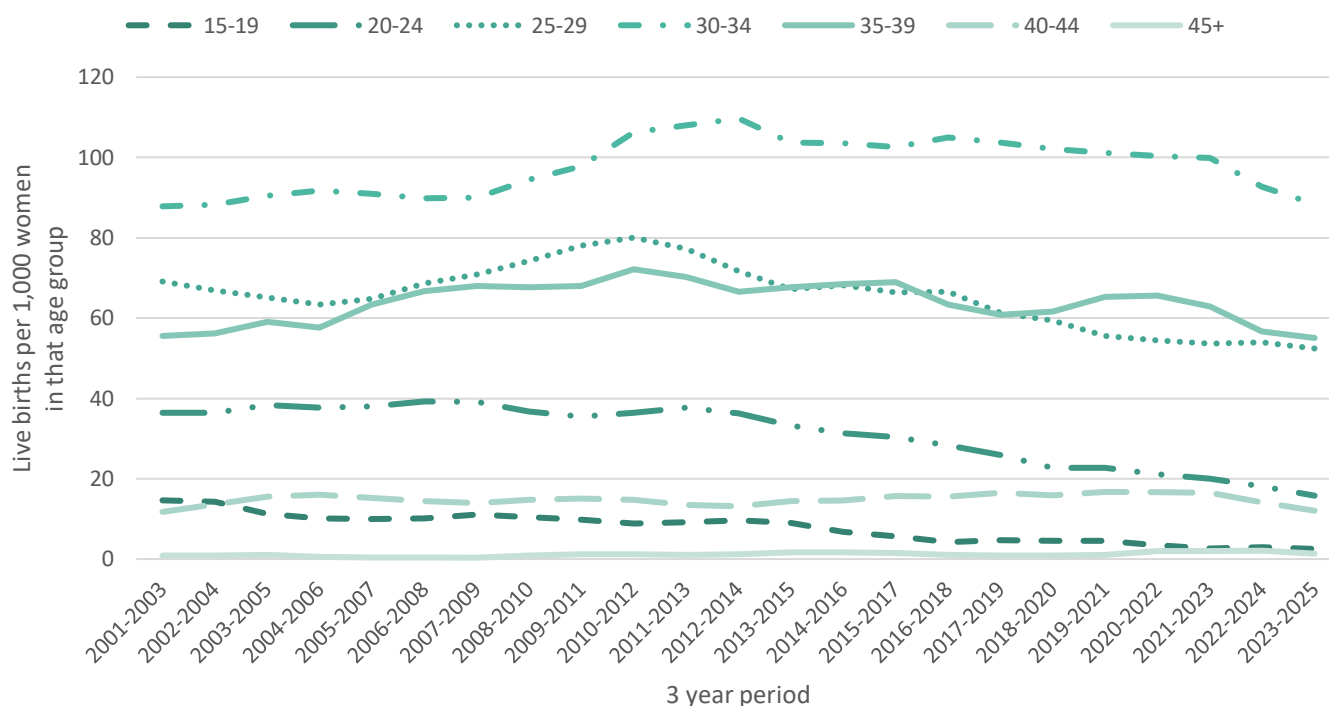
Age-Specific Fertility Rates

The age-specific fertility rate (ASFR) is the annual number of births to women of a specified age or age group per 1,000 women in that age group.¹⁹

Since 2001-2003, women aged 30-34 years have had the highest age-specific fertility rate in Jersey, whereas those aged 45 and over have had the lowest.

Fertility rates of women aged under 30 years have decreased since 2011-2013.

Figure 13. Three-year average age-specific fertility rates (2001-2003 to 2023-2025)



Source: TRAK/Maxims/Careplus

Breastfeeding

Baby First Feed

Breastfeeding is good for both mothers and babies, helping their health in both the short and long term. It is important that women are aware of these benefits when making feeding choices.

In Jersey in 2025, 72% of babies received breast milk (maternal or donor milk) for their first feed. This is the same rate reported in England for 2023-2024 (72%).²⁰

¹⁹ [Calculating Age-specific fertility rates \(ASFRs\)](https://www.ons.gov.uk), available from www.ons.gov.uk

²⁰ [Baby's first feed breastmilk](https://www.fingertips.phe.org.uk), available from www.fingertips.phe.org.uk

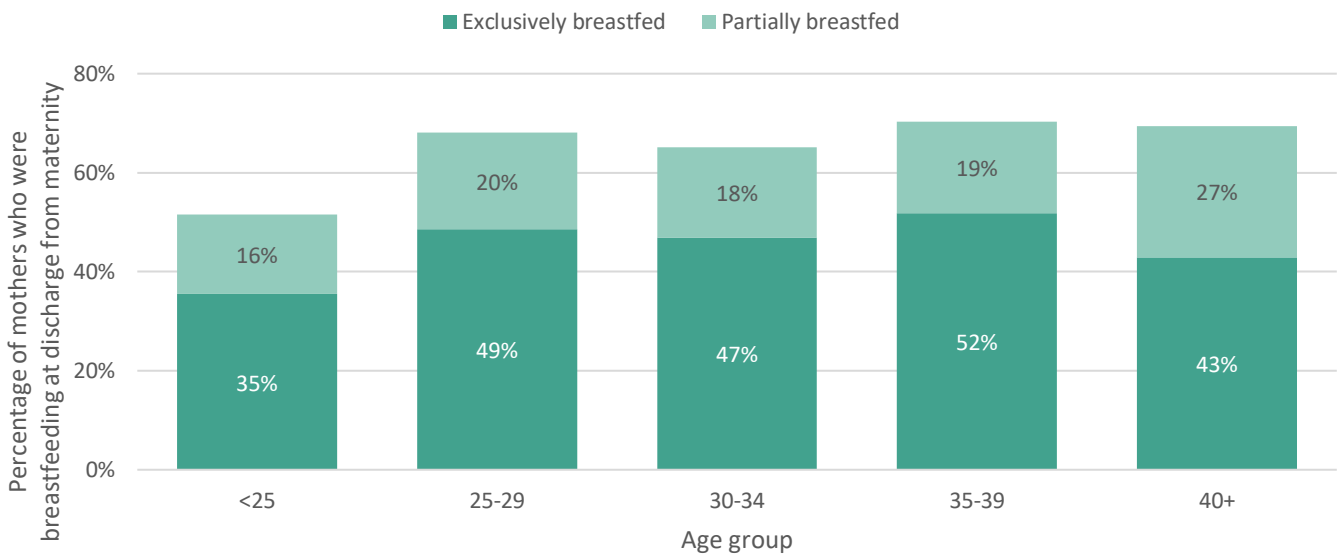
Breastfeeding at Discharge

Infant feeding method at discharge from maternity was captured for 79%²¹ of babies born in 2025. Of these, 84%²² were being breastfed at discharge from maternity in 2025.

Around half (48%) of mothers overall were recorded to be exclusively breastfeeding (babies receiving breast milk only) and a further 19% were mixed feeding (babies receiving both breast and formula milk).

Mothers aged 24 years and under had the lowest recorded rates of breastfeeding at discharge, in comparison to other age groups (Figure 14).

Figure 14. Percentage of mothers recorded as breastfeeding at discharge from maternity, by age (2025)



Source: Maxims/Careplus

Breastfeeding at 6-8 weeks

Infant feeding method at 6-8 weeks after birth was captured for almost all babies born in 2025 (97%). Of these, 71% were being breastfed 6-8 weeks after birth in 2025. When considering all babies born in 2025, 69% of babies were breastfed.

There has been a gradual increase over time in the proportion of mothers who continue to breastfeed at the 6-8-week review, from 45% in 2010 to 71% in 2025 (Figure 15).

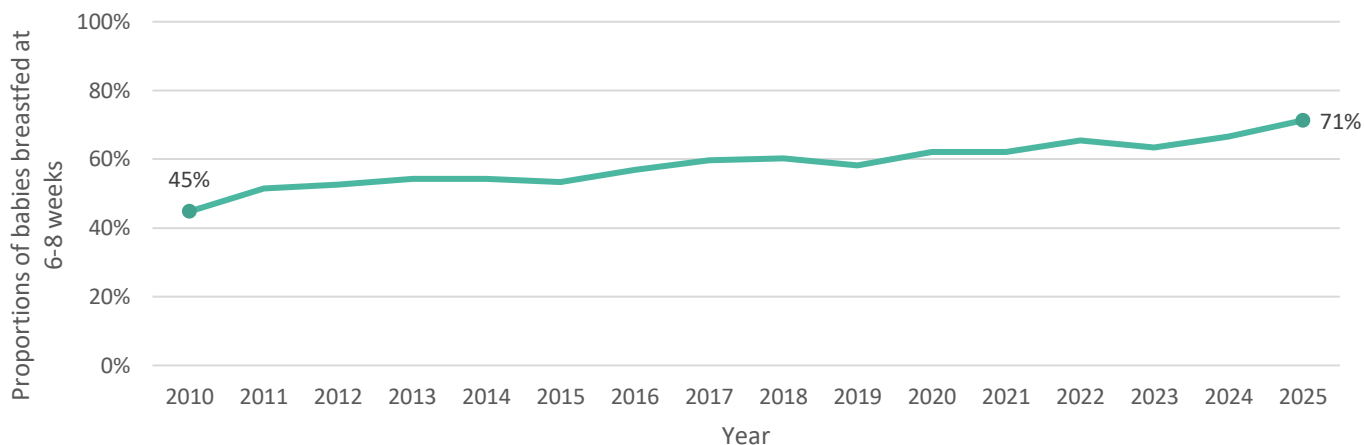
Jersey's breastfeeding rate at 6-8 weeks was higher than in England, where just 56% were being breastfed 6-8 weeks after birth in 2024-2025.²³

²¹ Feeding methods for 565 babies were recorded at discharge, completion rate of breastfeeding has varied over time.

²² The percentage of babies recorded as breastfeeding at discharge is calculated as a proportion of those for whom breastfeeding data were recorded. Historic data may differ from previous reports, as reports prior to 2023 reported rates calculated as a proportion of all babies born.

²³ [Breastfeeding prevalence at 6-8 weeks after birth](http://www.fingertips.phe.org.uk), available from www.fingertips.phe.org.uk

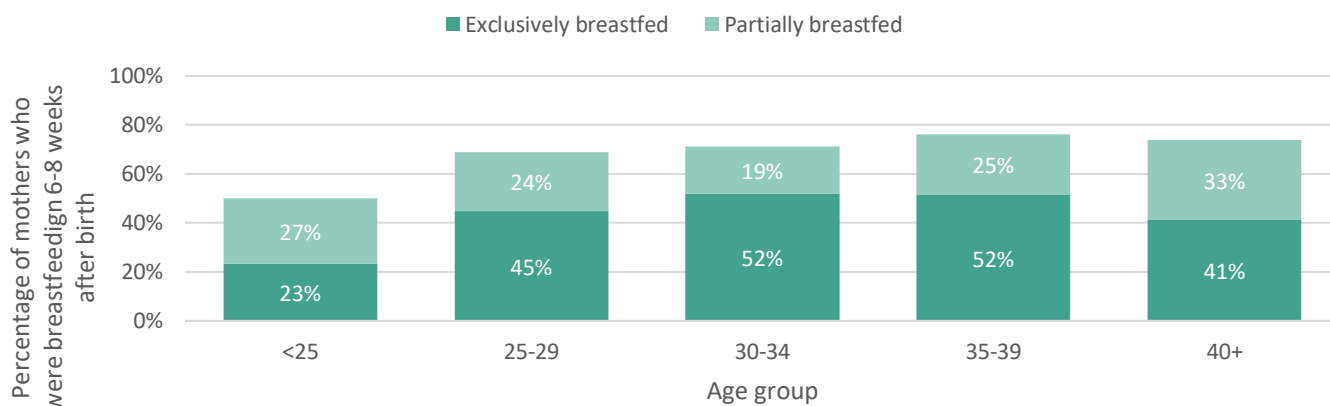
Figure 15. Proportion of babies being breastfed (exclusively or partially) at 6-8 weeks after birth (2010 to 2025)



Source: Careplus

At 6-8 weeks after birth, nearly half (48%) of mothers were exclusively breastfeeding and a further 23% were mixed feeding.

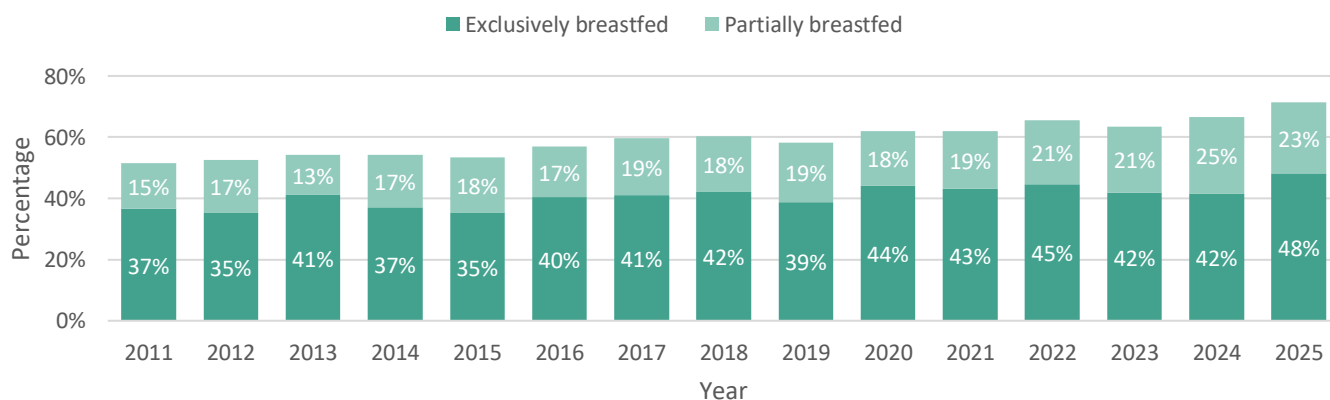
Figure 16. Percentage of babies recorded as breastfeeding at 6-8 weeks after birth, by age (2025)



Source: Careplus

The proportion of babies being exclusively breastfed at 6-8 weeks has increased over time, from 37% in 2011 to 48% in 2025. The proportion of babies being partially breastfed has also grown from 15% to 23% over the same period. (Figure 17)

Figure 17. Percentage of babies recorded as being breastfed at 6-8 weeks after birth (2011 to 2025)



Source: Careplus

Breastfeeding at 12 Month (Developmental Assessment)

- Family Nursing and Home Care (FNHC) health visitors carried out 699 12-month developmental checks for babies turning 9-12 months in 2025
- 28% were being breastfed at the 12-month developmental assessment
- for 21% of babies, the milk they were receiving was exclusively breastmilk, whilst 7% were receiving both breast and formula milk, as part of their diet

Breastfeeding Awareness, Attitudes and Support

In the 2025 Jersey Opinions & Lifestyle Survey (JOLS),²⁴ there were a series of questions asked regarding breastfeeding in the community.

The survey found that:

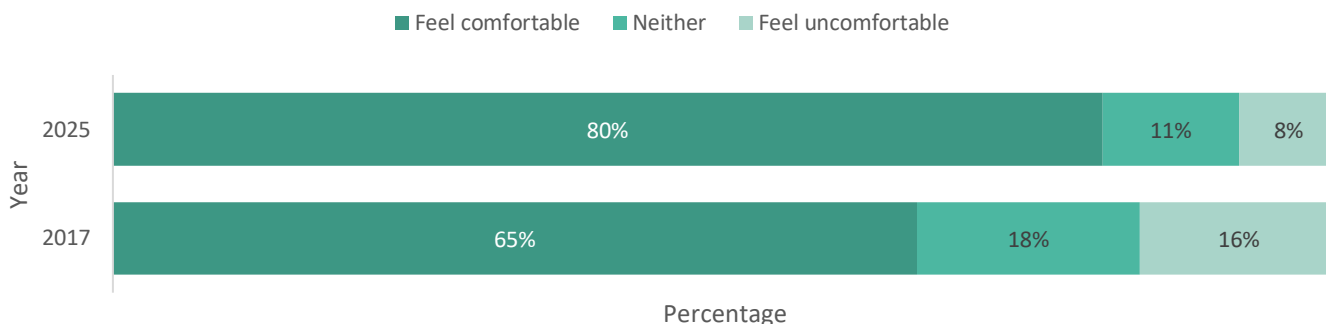
- nearly eight in ten respondents (79%) were aware women are allowed to breastfeed in public places, meaning around 1 in 5 respondents were unaware of this right
- two thirds (66%) of respondents strongly agree that women should feel supported to breastfeed in public, and a further 17% agree slightly. Very few respondents disagreed, but older people (aged 65 and over) most likely to express ambivalence that women should feel supported, with 20% saying they neither agree or disagree
- eight in ten (80%) adults agreed (slightly or strongly) that breastfeeding mothers should be allowed to feed in public without having to be hidden. Older adults were most likely to disagree with this statement; 9% of 55-64 year olds and 13% of 65+ year olds disagreed (slightly or strongly)
- eight in ten (80%) adults agreed they would feel comfortable if a mother breastfed her child near them, with females (83%) slightly more likely to agree than males (77%).
- just under half (46%) of respondents agreed there is a supportive environment for mothers to make their own feeding choices without feeling pressured
- adults with children were more likely to agree with all the given breastfeeding statements (around awareness, support and feeling comfortable around breastfeeding) than those without children
- around one in three (33%) workers reported having employers who provided rest breaks for breastfeeding mothers. Those who work in town were more likely to have employers that provided rest breaks for breastfeeding mothers
- almost a quarter (23%) of workers reported having employers who provided a private space²⁵ for breastfeeding mothers

²⁴ [Jersey Opinions & Lifestyle Survey 2025](#)

²⁵ Full question text: Does your employer provide breastfeeding mothers with a private and hygienic space which is safe and secure?

Attitudes toward breastfeeding in public have improved over time. When asked whether respondents agreed with the statement “I would feel comfortable if a mother breastfed her child near to me,” 4 in 5 (80%) respondents in 2025 agreed, compared with 2 in 3 (65%) in 2017 (Figure 18).

Figure 18. Proportion of those who “feel comfortable if a mother breastfed her child near to me” (2017 and 2025)

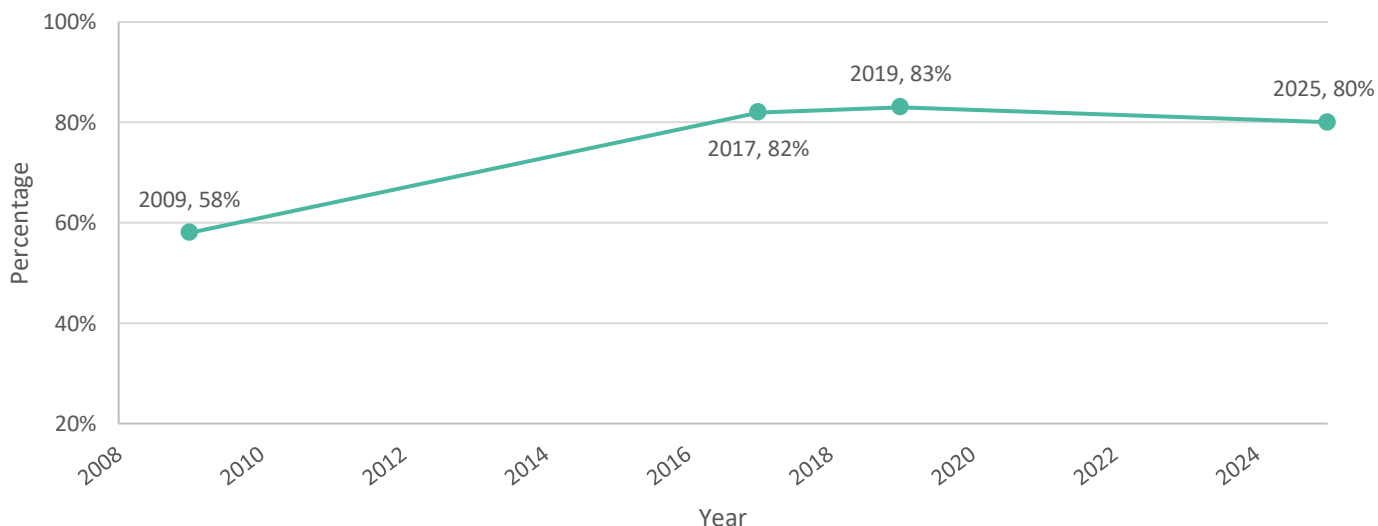


Source: Jersey Opinion and Lifestyle Survey (JOLS)

A question about attitudes towards breastfeeding in public has been asked several times in JOLS surveys over the years. These are compared in Figure 19, but please note that the question wording has varied slightly between the surveys (see notes below Figure 19).

People’s perception of mothers being allowed to breastfeed in public places has improved over time. Figure 19 show more recently a higher proportion of people finding it acceptable to breastfeed in public, with the latest proportion being 4 in 5 (80%).

Figure 19. Proportion agreeing that it is OK (acceptable) to breastfeed in public places (2009, 2017, 2019 and 2025)



Source: Jersey Annual Social Survey 2009 (JASS) and Jersey Opinion and Lifestyle Survey 2017 to 2025 (JOLS)

Notes: Full question text over time:

2009: Is it acceptable for a mother to breast-feed her child in any public place

2017 & 2019: It’s OK for women to breastfeed in public places

2025: Breastfeeding mothers should be allowed to feed in public without having to be hidden

A further breakdown of the JOLS breastfeeding findings is available here: [Jersey Opinions and Lifestyle Survey 2025 - Stakeholder reports | Statistics Jersey](#)

Hospital Admissions

During the period 2023-2025:

- around 460 children aged four years and under were admitted each year, on average, to hospital for emergency medical care
- around 195 individual infants (under the age of one) were admitted each year, on average to hospital for emergency medical care

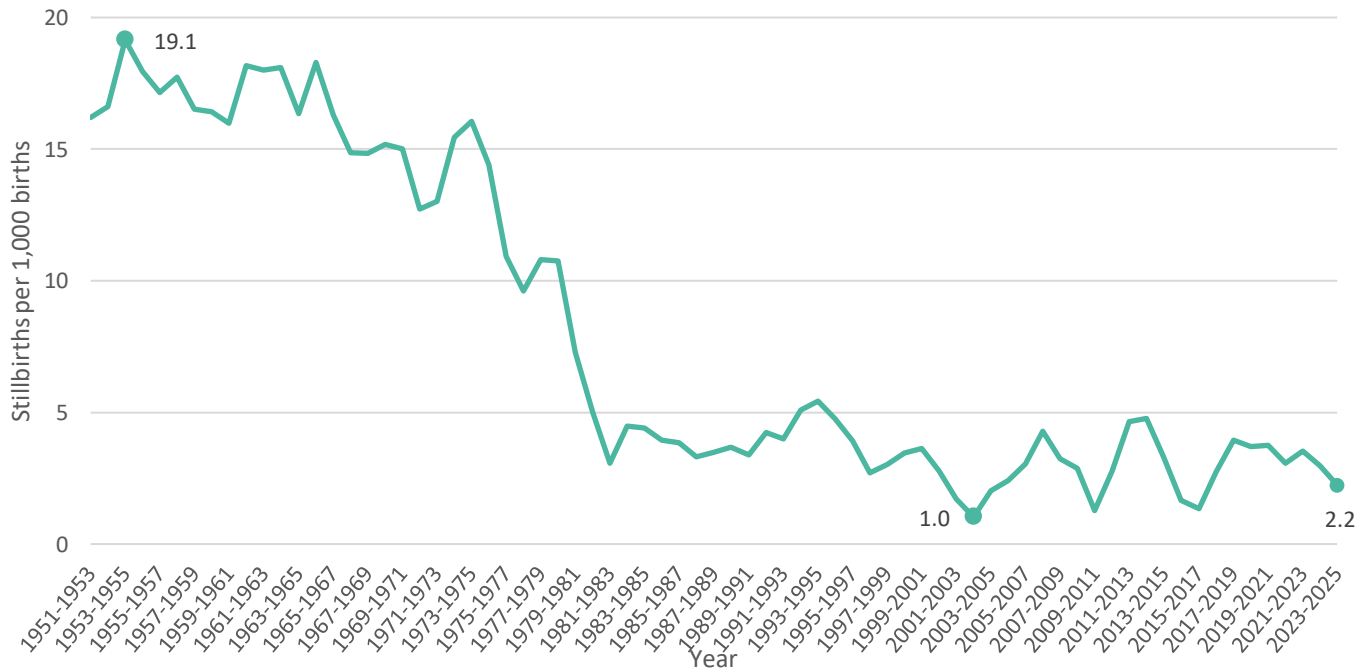
Mortality

Stillbirths

The stillbirth²⁶ rate in Jersey for the period of 2023-2025 was 2.2 per 1,000 births. This is lower than in England, where there were 3.9 stillbirths per 1,000 births in 2024.²⁷

There were 26 stillbirths in Jersey throughout the 10-year period of 2016 to 2025.

Figure 20. 3-year average stillbirth rate per 1,000 births (Jersey, 1951-1953 to 2023-2025)



Source: Superintendent registrar

²⁶ Stillbirth is the delivery, after the 24th week of pregnancy, of a baby who has died

²⁷ [Stillbirths rates in England](#)

Neonatal Deaths

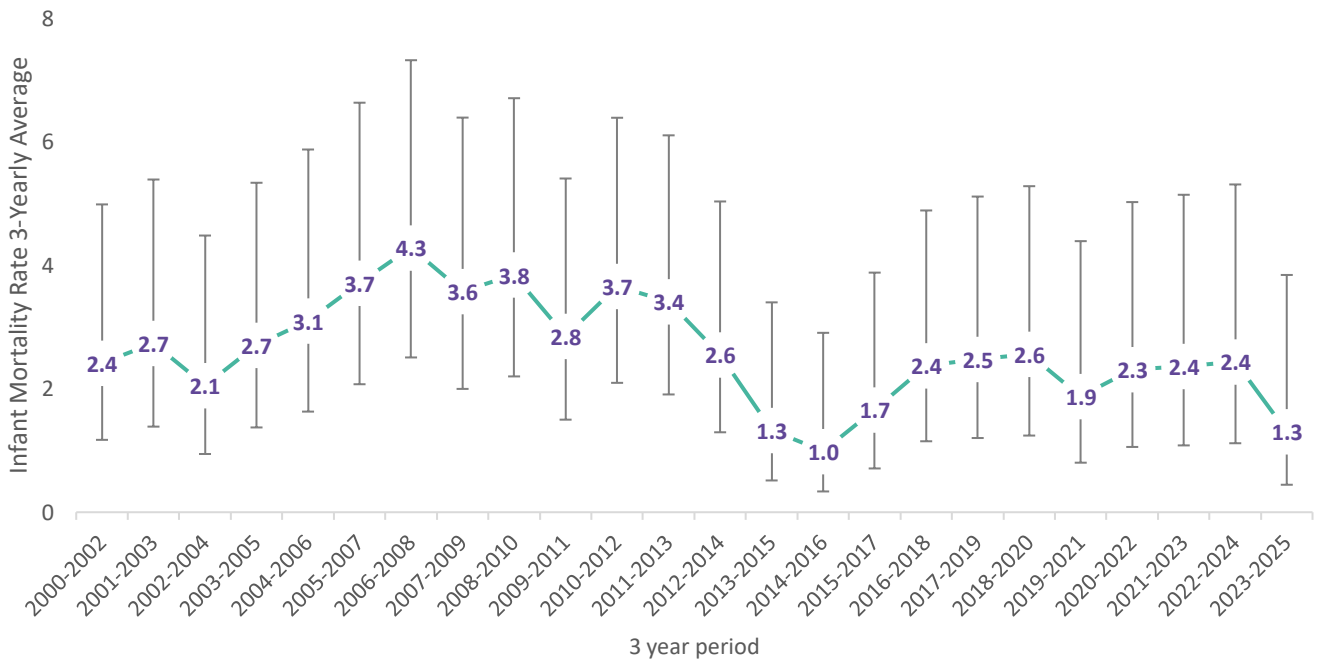
There were less than 10 neonatal deaths²⁸ in Jersey during the ten-year period 2016-2025.

Infant Mortality

The infant mortality²⁹ rate in Jersey was 1.3 deaths per 1,000 live births during the three-year period 2022-2024 (Figure 21).

For comparison, this is lower than in England where there was an infant mortality rate of 4.2 per 1,000 live births in 2022-2024.³⁰

Figure 21. 3-year average infant mortality rate per 1,000 live births (2000-2002 to 2023-2025)



Source: TRAK/Maxims/Careplus

Deaths of Children (Under 5)

There were less than 10 deaths to children under 5 years of age in Jersey during the three-year period 2023-2025, which has remained similar, over the last 10 years.

²⁸ Neonatal deaths are babies who were born after 24 weeks' gestation who died in their first 28 days of life

²⁹ Infant mortality is defined as all deaths occurring within the first year of life. The number of infants who die each year in Jersey is subject to variation from year to year; the data is therefore presented on a three-year rolling average basis

³⁰ [Infant mortality rate](http://www.fingertips.phe.org.uk), available from www.fingertips.phe.org.uk

Sources of Data

- all babies born in Jersey are offered a six-week check by a GP to check the baby's development. Babies are then seen again by a Family Nursing and Health Care (FNHC) visitor at a child health clinic for a 12-month developmental assessment
- birth and breastfeeding data (up to and including the six-week check) comes from the Child Health System, which is administered by the Preventative Programmes, Child Health Team. This system monitors a child's development and immunisation history throughout their childhood. Public Health Intelligence extracts data from this system for statistical purposes. Data on breastfeeding is also gathered by the Maternity Unit through TRAK and Maxims (hospital patient healthcare information systems), and/or by GPs
- data on caesarean sections comes from the Child Health System, together with data from the hospital systems TRAK and Maxims. Information on breastfeeding at the 12-month developmental assessment is provided by Family Nursing Home Care (FNHC). FNHC is a Jersey charity who provide nursing and home care in the community, they have a team of health visitors and work closely with the Government of Jersey to provide care for all families in Jersey
- figures on infant mortality use information from the notifications and registrations reported by Parish Registrars to the Superintendent Registrar, as required by the Marriage and Civil Status (Jersey) Law 2001

Methods

Population Estimates

This report uses estimates for yearly population figures between 2011 and 2024. These estimates were produced by Statistics Jersey. This report uses 2024 population estimates in lieu of 2025 estimates, which have not yet been produced by Statistics Jersey. Calculated rates might change from year to year as population estimates are updated.

Crude Rates

A crude rate refers to the number of events per 1,000 or 100,000 population.

Confidence Intervals and Statistical Significance

Confidence intervals have been used in this report to compare Jersey rates and numbers over time, and with those of England and Wales. Confidence intervals are a measure of the statistical precision of an estimate and show the range of uncertainty around the estimated figure. The confidence interval indicates the range within which the true value for the population as a whole can be expected to lie, taking natural random variation into account.

Confidence intervals are often expressed as a percentage whereby a population mean lies between an upper and lower interval. The 95% confidence interval is a range of values that one can be 95% confident contains the true mean of the population.

Comparisons between rates or over time have been tested to determine whether differences are likely to be statistically significant or the result of natural random variation. Only those differences deemed as statistically significant have been described in this report using terms such as 'increase', 'decrease', 'higher' or 'lower'.

Total Fertility Rate (TFR)

The TFR is affected both by the number of children women have across their child-bearing years as well as the specific timing. The TFR will decline if women start having fewer children overall and/or if women generally start delaying childbearing to later years.

Similarly, a rise in TFR would result from women having more children and/or women moving towards having children earlier in their life.

Feedback

If you would like to provide feedback, then please contact us on the following address or email us at: healthintelligence@gov.je

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