Lincolnshire JSNA: Life Expectancy

What do we know?

Summary

Life expectancy at birth across Lincolnshire (2008/10) is 78.7 years for males and 82.4 years for females. Both are similar to the England averages of 78.6 years for males and 82.6 years for females.

Life Expectancy across Lincolnshire has continued to reflect the national picture.

However there are variations across the county - these differences are particularly noticeable at ward level.

Not only are there differences in life expectancy between the most deprived and least deprived areas but also people from less disadvantaged areas spend more years disability free.

Facts and figures

Life expectancy across Lincolnshire and nationally has continued to increase, with the latest data for 2008/10, showing that males are expected to live to 78.7 years and females to 82.4 years. Male life expectancy in Lincolnshire is higher than both the England (78.6 years) and East Midlands (78.4 years) averages, in comparison female life expectancy is less than the England average (82.6 years) and equal to the East Midlands (82.4 years). In addition the gap between male and female life expectancy is narrowing.

Life expectancy does vary across the county, based on the 2008/10 data:

- For males, the lowest life expectancy is in Lincoln at 77.2 years, whereas South Kesteven records a male life expectancy of 79.9 years.
- For females, the lowest life expectancy is in Lincoln at 81.3 years, whereas North Kesteven records a female life expectancy of 83.5 years.

The gaps in life expectancy are even more apparent at ward level (1999-2003), for example:

- For males the lowest life expectancy is in Gainsborough South West in West Lindsey at 71.7 years and the highest in North Hykeham Moor in North Kesteven at 84.2 years, 12.5 years difference.
- For females in Park Ward in Lincoln, life expectancy is 74.6 years, compared to Hykeham Forum Ward in North Kesteven 92.3 years, 17.7 years difference.

Disability-free Life Expectancy (DFLE) figures at birth and at age 65 are Office of National Statistics (ONS) experimental 1999-2003 values, provided at Middle Super Output Area (MSOA) level only, consequently as the numbers are small at MSOA level, these figures should be interpreted with caution. DFLE at birth figures are by gender, but DFLE at age 65 figures are for...
DFLE varies across the county, with a large difference shown within the City of Lincoln. The number of years people are expected to live disability-free beyond 65 years varies between 21.5 years in the northern edge of the city compared to 14.82 years in the area to the east of the city centre.

The England average for deaths amenable to healthcare aged <75 years all persons (2008/10) was 92.14 per 100,000, compared to the East Midlands rate of 93.74 per 100,000. The Lincolnshire figures are below both the national and regional rates at 88.67 per 100,000. Inequalities become more apparent between the local authorities across Lincolnshire, ranging between Boston at 109.44 per 100,000 to 76.40 per 100,000 in North Kesteven.

Place of death data (2008/10) shows that the highest percentage of people that die in their home or a care home is in South Kesteven (43.08%). The lowest number dying in their home or a care home is in South Holland at 36.74%.

**Trends**

Life expectancy has increased for both males and females in the period 2004/06 and 2008/10; however the increase has been faster for males (from 77.4 years to 78.7 years), an increase of 1.3 years, than females (from 81.6 years to 82.4 years) an increase of 0.8 years.

Under 75 all cause mortality shows that there has been a decrease between 2005/07 and 2008/10, from 298.7 (rate per 100,000) to 279.25 (rate per 100,000).

The data relating to DFLE is for the period 1999-2003 only and has not since been updated therefore no trend can be established. However the data does highlight differences across the county for DFLE, a key element of the Marmot Review (highlighting that not only are people from more deprived backgrounds more likely to die younger than those from less deprived areas, but they are also more likely to have a disability affecting their quality of life for a longer period of time).

Within the City of Lincoln the data shows a range between 21.5 years DFLE beyond 65 years in a MSOA to the north of the city compared to 14.82 years for those living in the area to the east of the city centre.

**Targets**

There are no current national targets, Public Service Agreements (PSA) targets from the previous government were:

- To increase the average life expectancy at birth in England to 78.6 years for men and to 82.5 years for women by 2010 (this will be based on 2009/11 data, due to be released in October 2012).

- To reduce the relative gap – i.e. percentage difference - in life expectancy at birth between the areas with the worst health and deprivation indicators and the England average by at least 10% by 2010 (from a baseline of 1995-1997).

These PSA targets were set by the Department of Health and published as part of the Government Spending Review in 2004. All age all cause mortality rates are used as an approximate measure.
for life expectancy, and are monitored as part of the PSA Delivery Agreement 18, published in 2007.

Targets based on All Age All Cause Mortality (AAACM) feature within NHS Lincolnshire's Public Health plans for 2011-2012.

**Performance**

Life expectancy in Lincolnshire (2008/10) is currently 78.7 years for males and 82.4 years for females, above the national target for males (78.6 years), but below for females (82.5 years).

The lowest life expectancy for males is in Lincoln at 77.2 years, compared to the highest in South Kesteven at 79.9 years, this compares to the East Midlands average of 78.4 years and the England average of 78.6 years.

The lowest life expectancy for females is in Lincoln at 81.3 years, compared to the highest in North Kesteven at 83.5 years, this compares to the East Midlands average of 82.4 years and the England average of 82.6 years.

The data submitted for the AAACM targets show that for both males and female life expectancy has been increasing across Lincolnshire. In the period 2008/10:

- Males had a life expectancy of 78.7 years (above the national average of 78.6 years),
- Females had a life expectancy of 82.4 years (below the national average of 82.6 years)
**What is this telling us?**

**Summary**

In order to address inequalities in life expectancy we will need to consider interventions that take into account wider determinants of health, such as those highlighted within Marmot and the Public Health White Paper.

**Local views**

There does not appear to be any direct consultation with communities on life expectancy however disease related consultation such as Coronary Heart Disease health inequalities would be linked.

A consultation with the public has been undertaken for the development of the Lincolnshire Joint Health and Wellbeing Strategy, many of the areas of work discussed will have the potential to have a positive impact on improving life expectancy.

**National and local strategies**

- A Healthy Lincolnshire
- Public Health White Paper 2010
- Lincolnshire Joint Health and Wellbeing Strategy (due to be published September 2012)

**Current activity and services**

We continue to implement the recommendations highlighted by the Health Inequalities National Support Team (HINST) from their visit in October 2010. These recommendations will help to improve life expectancy across the county, focusing on improving the health of those with poorest health and will be based around clinical targeting of conditions amenable to healthcare.

**Key inequalities**

Addressing the variation in life expectancy across the county is a key health inequality issue. As well as providing programmes and services to improve life expectancy overall, they will narrow the gap between the most and least deprived areas of Lincolnshire. We also want to increase the number of years people live free of disability. Currently, health inequalities indicate that not only do people from more deprived areas die younger, but they also spend more years suffering from a disability.

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**Key gaps in knowledge and services**
The information on the LRO site does not take into account the Indices of Multiple Deprivation (IMD) linked to life expectancy or provide information at Lower Super Output Area. Further investigation is needed into female life expectancy.

**Risks of not doing something**

The gap between the most and least deprived will grow leading to greater health inequalities.

There is a danger we will not continue to get a year-on-year improvement in life expectancy, so fall behind the rest of England.

Healthcare and social care costs continue to rise if we do not continue to work systematically to address long term conditions in order to increase the number of years people live disability-free.

**What is coming on the horizon?**

The Lincolnshire Joint Health and Wellbeing Strategy will aim to bring together partner agencies to improve health outcomes, it is hoped that these will have a positive impact on life expectancy.

**What should we be doing next?**

Develop a greater understanding of health inequalities across the county in order to inform future action.