

HALTON JOINT STRATEGIC NEEDS ASSESSMENT (JSNA)

Life Expectancy & Healthy Life Expectancy (2025)

Life expectancy in Halton has stalled. This is the case for both men and women and when we look at life expectancy data at birth and at age 65. The exception to this is a slight increase in life expectancy at 65 for men.

Like many local authorities, as with England as a whole, healthy life expectancy has fallen. Across Cheshire & Merseyside, Halton has seen some of the highest percentage changes.

Undoubtedly the pandemic has been the single largest cause of this due to the 'extra' mortality from Covid-19 as a new disease. Whilst the fall in healthy life expectancy certainly started from 2020 onwards and has continued, the pandemic is not the only reason to account for it.

Healthy life expectancy uses mortality data like life expectancy data does. The difference is that it incorporates how people feel about their health and wellbeing as an important factor in the calculations.

Indeed we are likely to have more success increasing healthy life expectancy over the next decade by focusing efforts on the latter. That's because healthy life expectancy as a measure is much more sensitive to changes in self reported health than changes in life expectancy.

The clearest drivers of self reported poor health are chronic conditions and multimorbidity (having more than one long term health condition). In particular obesity and musculoskeletal (MSK) conditions. Over 80% of people with two or more conditions report they have poor health. Every common condition is more prevalent among those living in the most deprived areas. This is the case in Halton.

These conditions have the greatest impact on self-reported health for everyone in England, but the impacts are much greater for those living in the most deprived areas. As a result, it's unlikely to be possible to make meaningful progress to close the healthy life expectancy gap without prioritising tackling these conditions.

There needs to be a focus on multimorbidity not just single health conditions. Obesity and musculoskeletal conditions often occur together and can trigger or worsen other health problems, creating a complex web of health challenges, exacerbating feelings of poor health.



INTRODUCTION

The Kings Fund analysis shows that there have been two turning points in trends in life expectancy in England this century. From 2011, increases in life expectancy slowed after decades of steady improvement, prompting much debate about the causes. Then, in 2020, the Covid-19 pandemic was a more significant turning point, causing a sharp fall in life expectancy, the magnitude of which has not been seen since World War II. Many studies and data similarly highlight that in the decade leading up to the COVID-19 pandemic, a long-term trend of improving life expectancy stalled in all four UK nations.

Life expectancy can be calculated by using a summary of the measure of years of life based on mortality in a given year – is commonly used as an indicator of the health of an area and its population.

Life expectancy, in combination with other measures such as Gross Domestic Product (GDP) - a measure of the state of the economy, can help to capture the current prosperity of a country and its future potential. It is an important signal of social progress. Healthy life expectancy is also an important indicator, reflecting mortality rates and self-reported health in a given place and time.

Average female life expectancy is higher than average male life expectancy and this has been the case over time. The gender gap in 1841 was relatively small because of the high prevalence of infectious diseases in the 19th century which killed both sexes equally. In the late 19th and early 20th centuries, the gender gap in life expectancy started to widen, peaking at 6.4 years by 1969. Reasons for the widening gender gap included poor working conditions and smoking among males in contrast to improved life chances for females – for example, the lower risk of dying in childbirth and from tuberculosis, which affected women more than men.

Life expectancy varies greatly between regions and is affected by many factors. Behavioural risks to health such as smoking and poor diet; access and use of health care; wider socio-economic determinants such as income, education, housing and employment; geography; and other specific characteristics like sex, ethnicity, disability and social exclusion. Differences in these determinants may lead to inequalities in life expectancy between population sub-groups.

In recent years, life expectancy in Halton has fallen. Halton is a relatively deprived area of England and due to many factors mentioned above, along with the pandemic, it comes as no surprise that the data presents itself in line with recent trends. In this update we will see trends for life expectancy and healthy life expectancy relating to Halton, the North West and England.



Trends in Life Expectancy

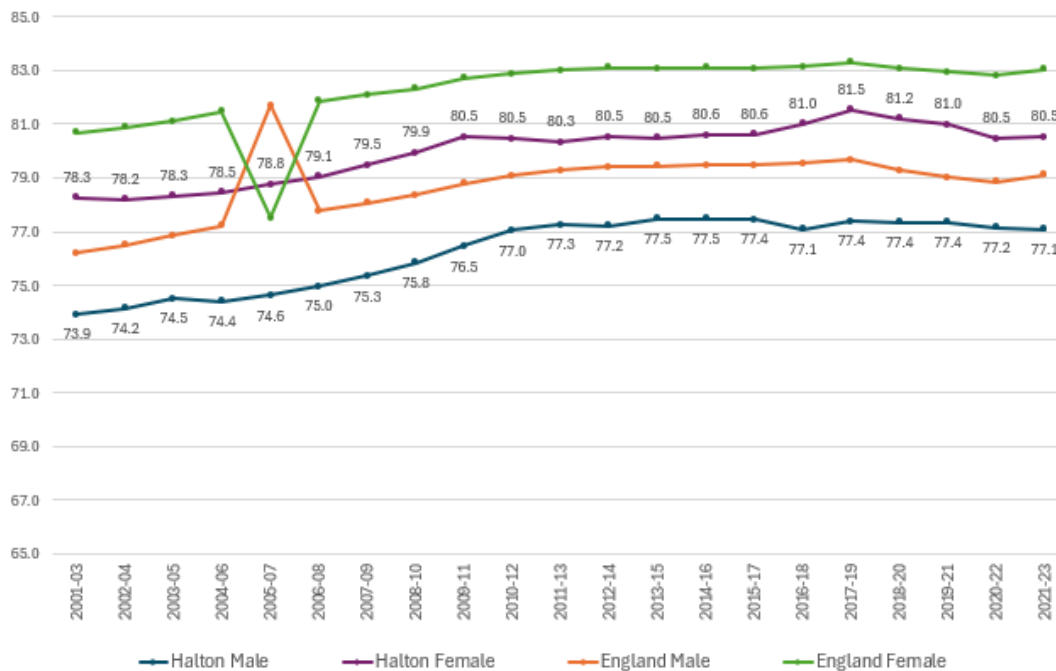
The two charts highlight the trend in life expectancy (LE) in Halton and England from 2001/03-2021/23. This data is from the Office for National Statistics (ONS) 2024, and shows the LE for males and females at birth and at aged 65+ years.

ONS data shows that as of 2021/23, LE in Halton for females was **80.5 years** and **77.1 years** for males. Compared to the same time, in England it was **83.1 years** for females and **79.1 years** for males. This is lower than the LE for pre-pandemic (2017/19) in Halton which was **81.5 years** for females and **77.4 years** for males. In Halton the reduction in LE has been more significant for females and for both genders more significant than the falls in LE for England during this same time.

For LE at 65 years in Halton, there has been some improvements from 2020/22 to 2021/23. For females, LE at age 65 in 2021/23 was **19.5 years** and **17.7 years** for males. Compared to the immediate pre-pandemic period of 2017/19 LE at aged 65 in 2021/13 was lower for females but the same for males i.e. male LE at age 65 in Halton has recovered to its immediate pre-pandemic period position but females LE at age 65 has not.

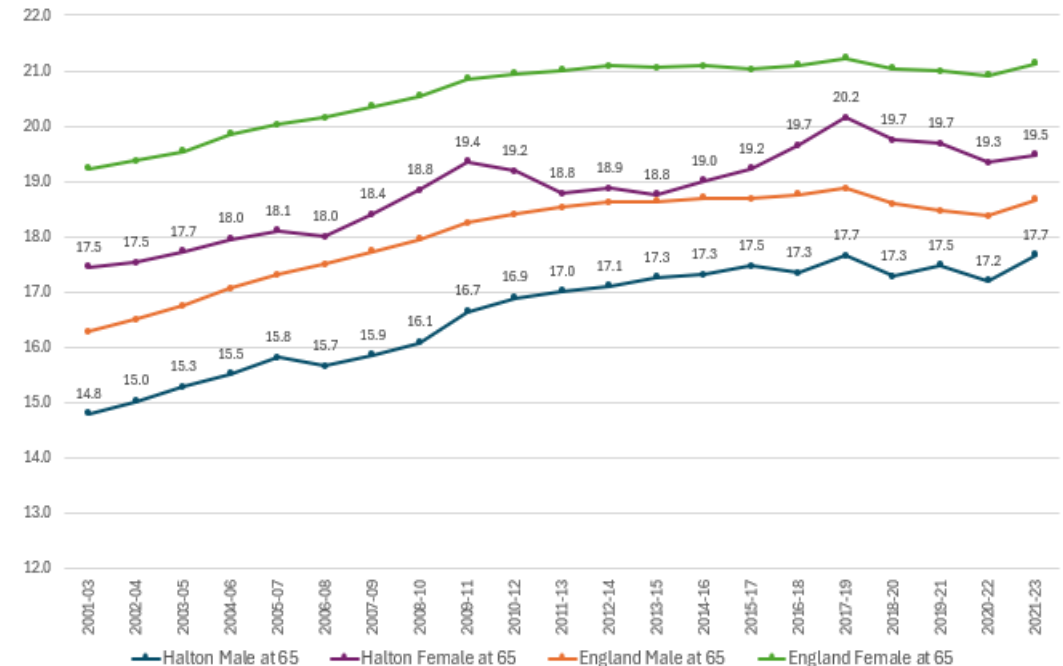
Life Expectancy in Halton and England for males and females (years)

Source: ONS 2024



Life Expectancy at 65 in males and females in Halton and England (Years)

Source: ONS 2024



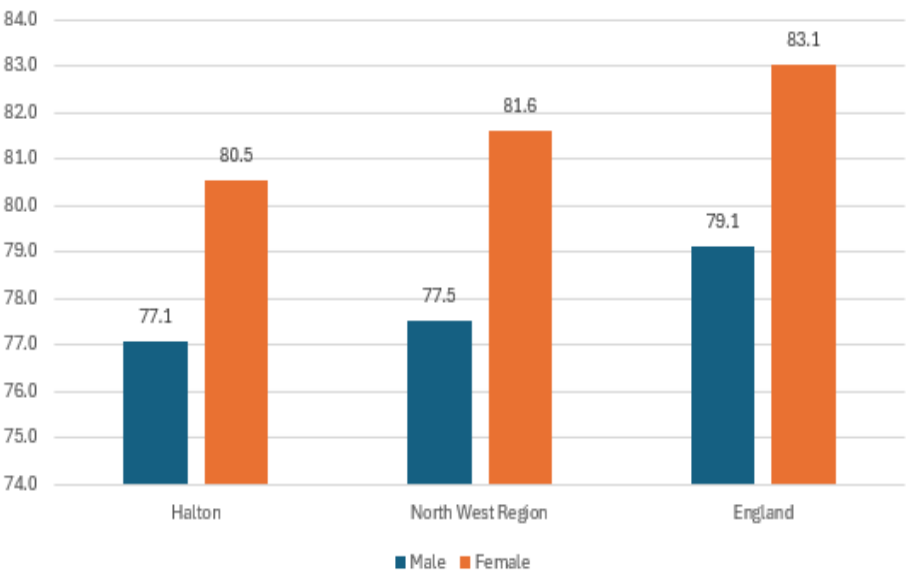
Life Expectancy in Halton, the North West and England

Both charts highlight the LE in Halton, the North West region and England. However, here we can see the LE for just 2021/23 for males and females in **Halton, the North West and England** comparatively (Fingertips, 2025).

LE, at both birth and aged 65, is lower in Halton than both the North West region and England. In all these areas LE is lower for males than females, both at birth and at age 65. In 2020 and 2021, the gap widened even more because mortality rates from Covid-19 were higher in males than females; with the fall in Covid-19 mortality thereafter, the gender gap has slowly been narrowing since. Here within both charts there is still a noted difference in Halton's LE at **77.1 years** in males and **80.5 years** for females. This is similar difference that is in the North west region and in England. However, at 65 years LE gap between males and females is closer at **17.7 years (M)** and **19.5 years (F)**. It is worth noting that the area in England with the highest LE at birth is Wokingham at 82.5 years (M) and Kensington and Chelsea 86.5 years (F). LE at 65 is highest in Richmond upon Thames at 20.5 years (M) and 23.2 years (F) for the same area.

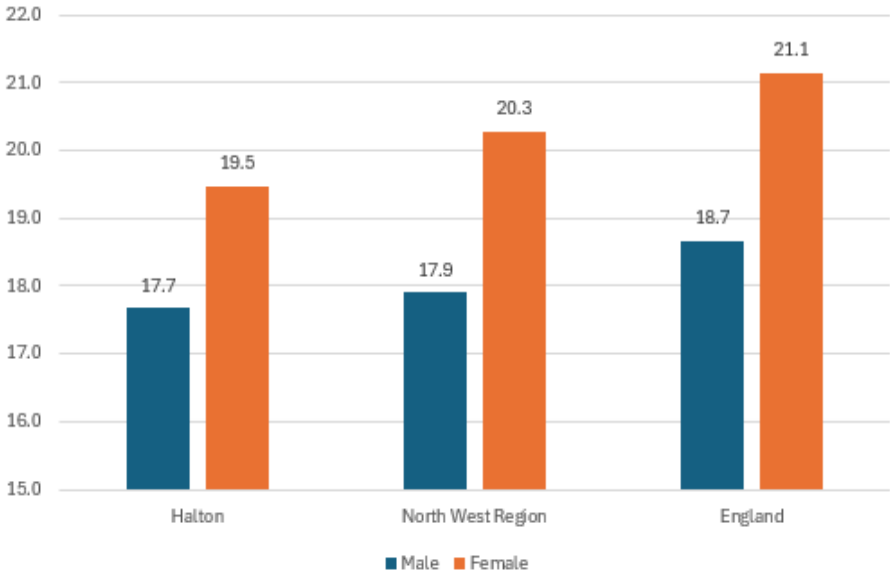
Life Expectancy at birth in Halton, the North West and England

Source: Fingertips 2025



Life Expectancy at 65 years in Halton, the North West and England

Source: Fingertips 2025

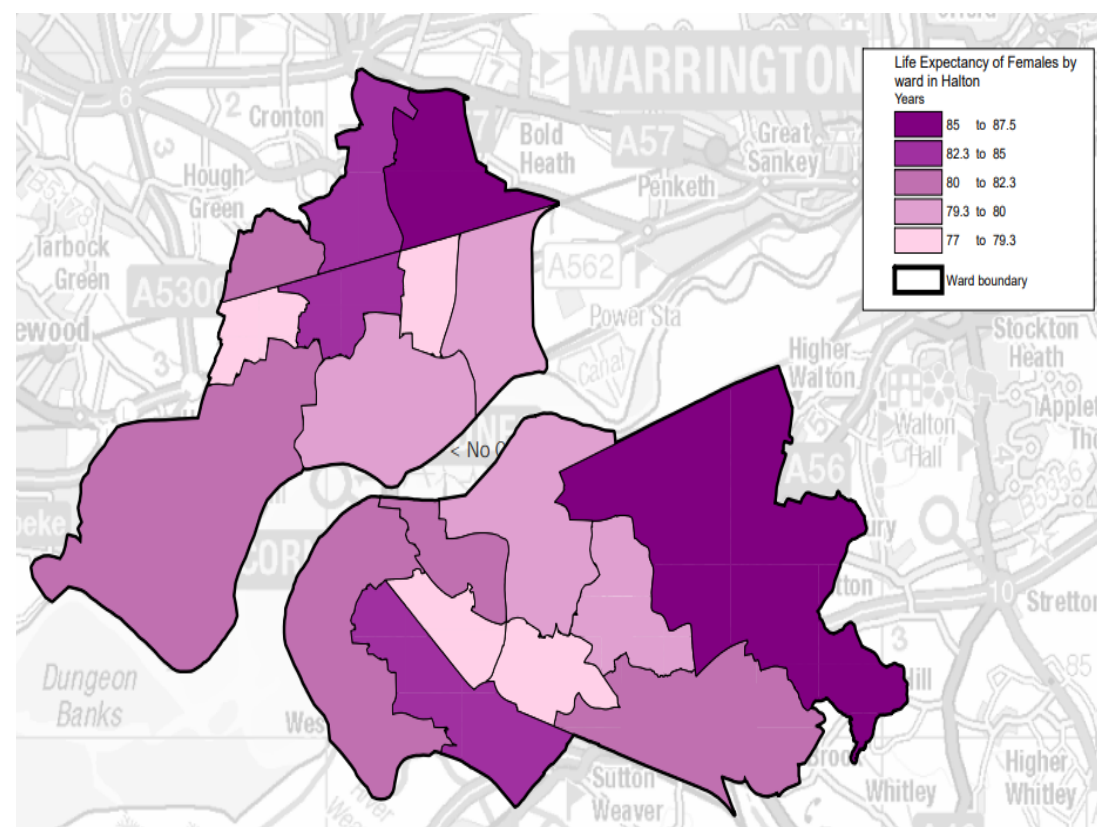
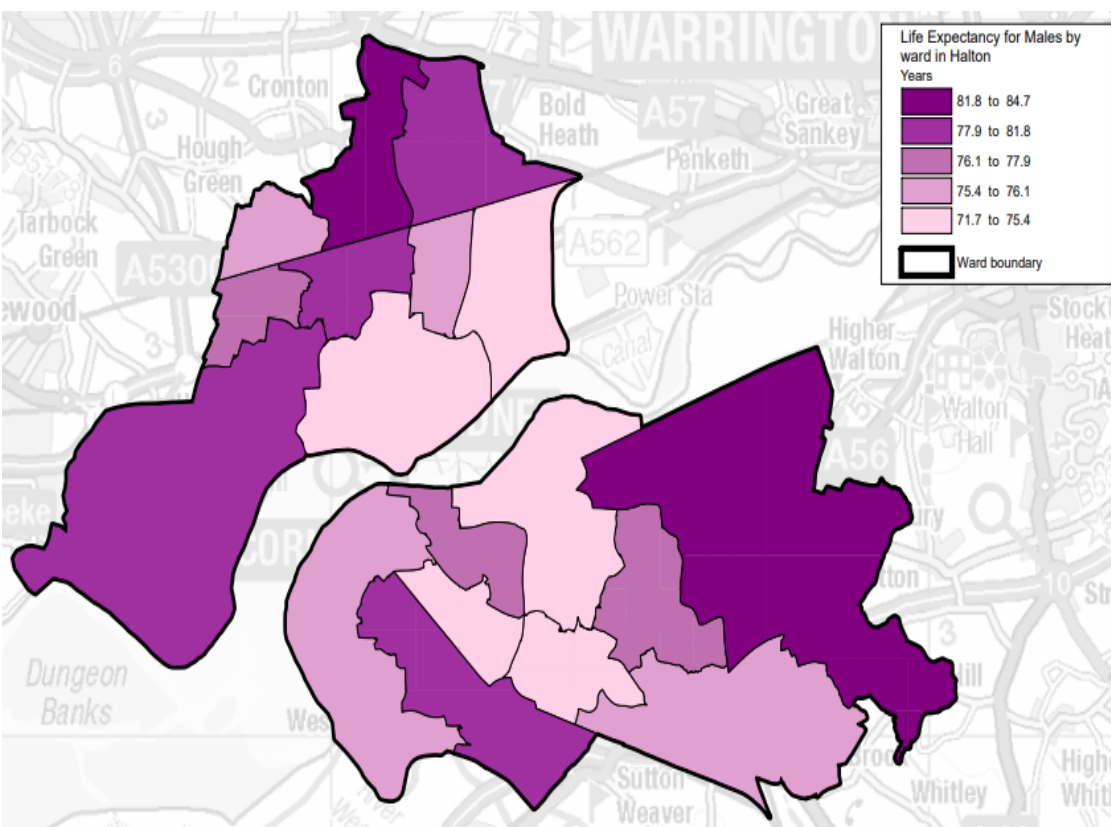


Life Expectancy in Halton, the North West and England

Here we have two maps. These maps highlight LE at birth for both males and females in Halton, by ward. As the maps both show, there is quite a lot of variation between wards.

The maps show the same data from the page previous. The dark purple indicates a higher LE, whereas the lighter purple indicates a lower LE. The LE for males and females can be seen on the table and the difference between the highest and lowest LE.

For males, the highest LE was in Daresbury, Moore and Sandymoor at 84.7 years, and the lowest was in Central & Westbank at 71.7 years— this is a 12.9 year difference. For females, LE was at its highest again in Daresbury, Moore & Sandymoor at 87.5 years, and lowest in Halton Lea at 77.0 years— a difference of 10.5 years. These ranges are quite varying and highlight the differences people just living in a different are may face.



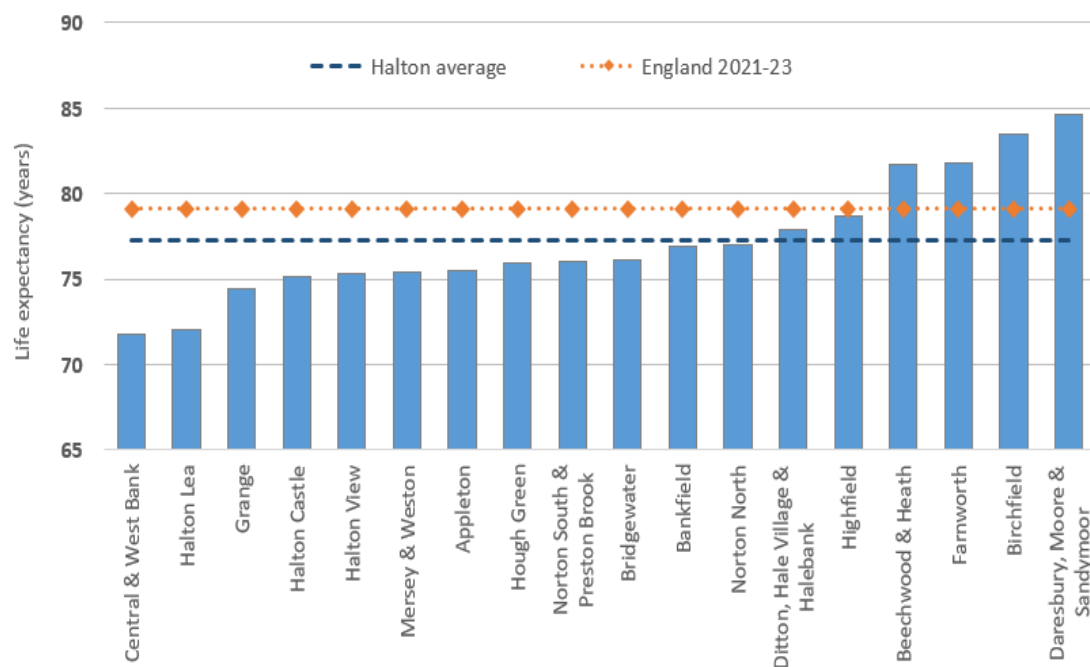
Life Expectancy for wards in Halton

The charts below show LE at birth by male and female in Halton's wards. Included in the charts are Halton's average LE at birth, and England's for 2021-23 in males and 2018-2020 in females. The data shows Halton's ward LE for 2020-24.

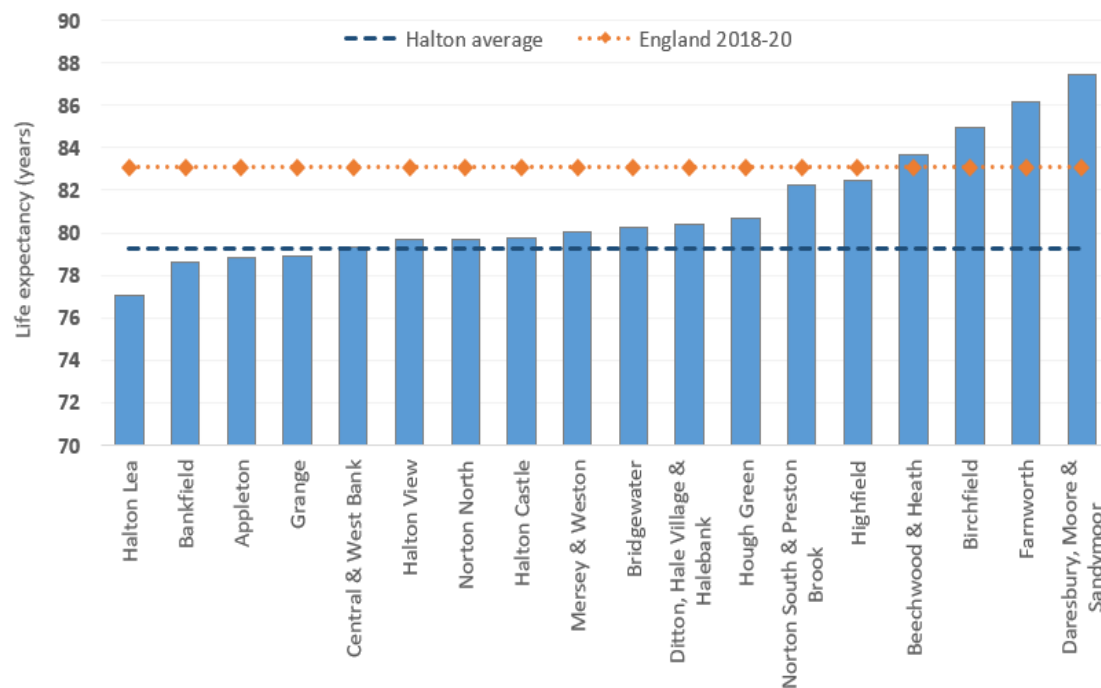
Notably, females in Halton have higher life expectancy in general compared to the males throughout the wards. Daresbury, Moore & Sandymoor have the highest LE for both males and females out of all wards in Halton. For males this is 84.7 years and females is 87.5 years. For males, Central & West Bank, has the lowest LE across all wards at 71.7 years. For females, the ward with the lowest LE at birth was Halton Lea at 77.0 years. However, from the charts it is evident that Halton Lea is also second lowest LE for males in Halton at 72.0 years.

There are differences between males and females is quite significant. Yet the differences between wards in Halton also varies quite a lot. For some wards, the LE is quite below the average for Halton and England.

Male life expectancy at birth by ward (years) 2020-24



Female life expectancy at birth by ward (years) 2020-24

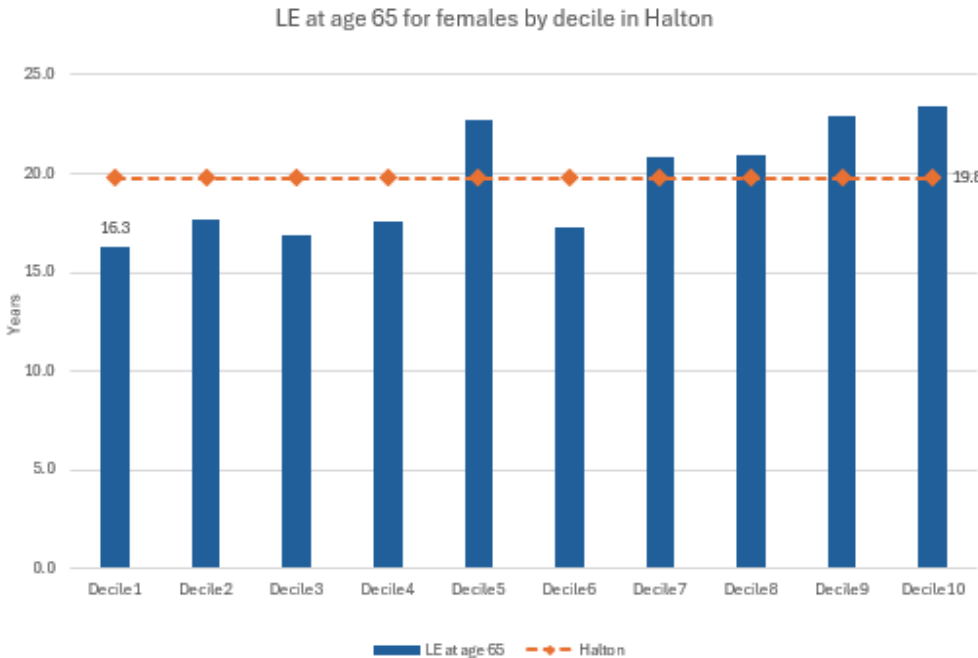
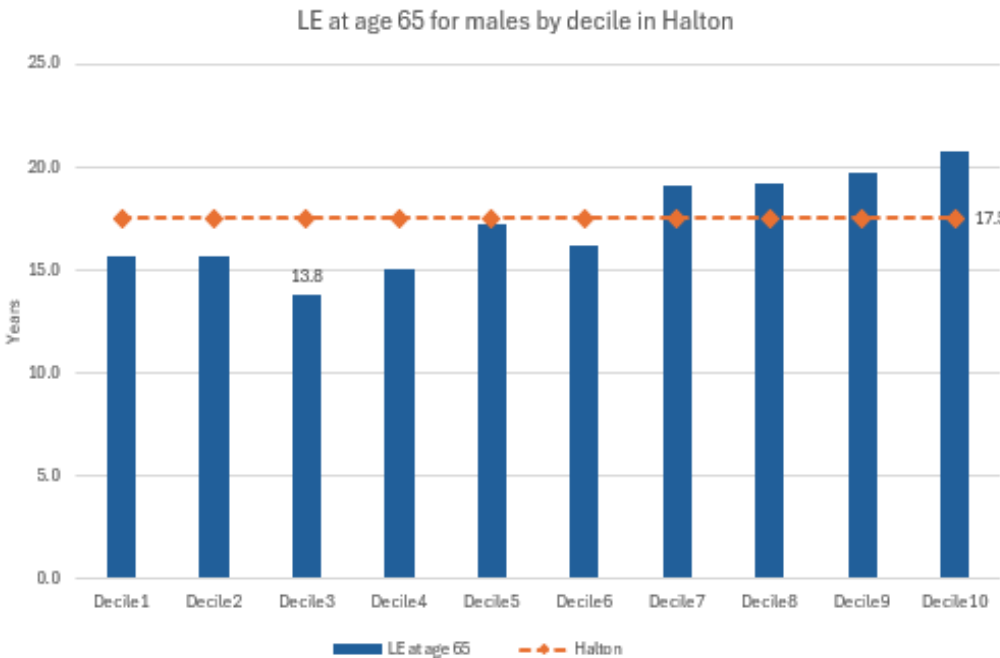


Life Expectancy in over 65s by decile in Halton

The charts below highlight the LE at 65 years for males and females in Halton by decile. The deciles are one to ten, as well as the average for Halton highlighted in orange. The deprivation decile indicates within which tenth of the overall deprivation ranking a specific area falls. Decile 1 represents the 10% of areas with the highest levels of deprivation, while Decile 10 represents the 10% of areas with the lowest levels of deprivation.

The most deprived deciles show a lower LE for both males and females. For deciles one to four for both males and females is lower compared to Halton's overall average. For males, deciles five and six are also lower than the Halton average. For females, as well as deciles one to four, decile six is below Halton's average.

Deciles highlight the level of deprivation people in the population face. Decile one is the most deprived and decile ten represents the least deprived.



Healthy Life Expectancy

Healthy life expectancy (HLE) is the number of years people can expect to spend in good health. This can be measured from birth and at 65 years as shown on this page. HLE does have quite some variation between local areas and regions within England, it is calculated based on two things: life expectancy and self-reported health.

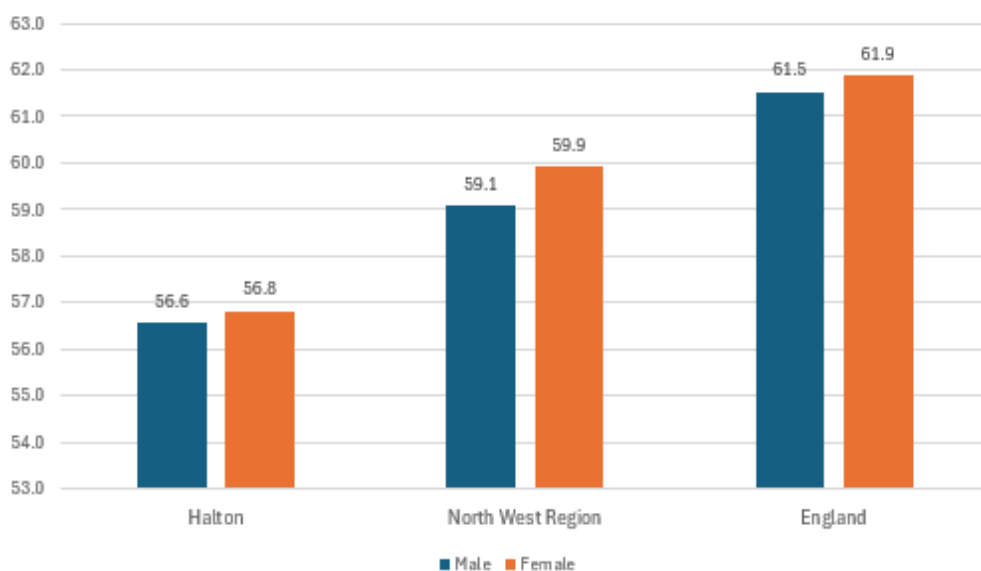
Having a long-term health condition and/or living with two or more long-term health conditions (multi-morbidity) are the clearest drivers of self-reported poor health. In the most deprived parts of England, more people report being in poor health, and they report poor health earlier, than in less deprived parts of England. Having a chronic condition significantly increases the likelihood of reporting poor health compared to having none, and additional conditions have a compounding effect. Most regions of England experienced a fall in HLE at birth since the pre-coronavirus (COVID-19) pandemic period (2017 to 2019). For males, the largest fall was observed in the North West (31.0 months).

The first chart below has HLE for Halton, the North West region and England. This data has been sourced from fingertips. However, it originates from ONS as used in previous chart above. The difference in HLE in Halton compared to both the North West region and England is lower for both males and females. Halton has a HLE of **56.6 years (M)**, and **56.8 years (F)** compared with the best area in England, Wokingham at 69.7 years (M) and 70.8 years (F) for the same area.

However, it is notable that both Halton and the North West region are both below the average HLE for England. The chart for HLE at 65 years in Halton highlights the population having consistently lower HLE at 65 years than England over time. In 2021/23, HLE was at its lowest since 2017. These decreases are in line with what changes the pandemic has brought about consistent with life expectancy. Halton has a HLE at 65 of **8.2 years (M)** and **8.8 years (F)**, unsurprisingly, Wokingham is England's highest area at 13.4 years (M) and 14.9 years (F) for the same area (Fingertips, 2025).

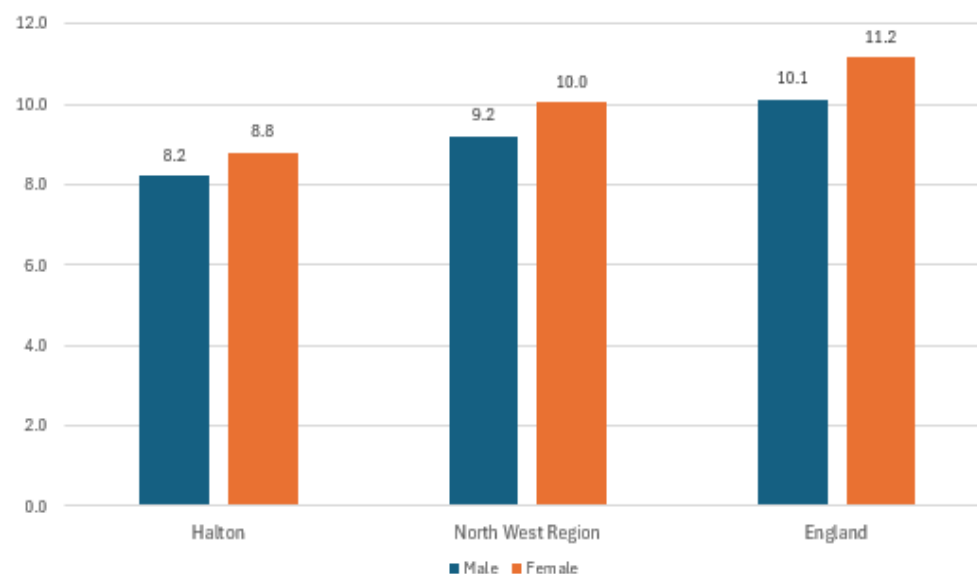
Healthy Life Expectancy in Halton, the North West and England at birth 2021/23

Source: Fingertips 2025



Healthy Life Expectancy at 65 years in Halton, the North West and England 2021/23

Source: Fingertips 2025



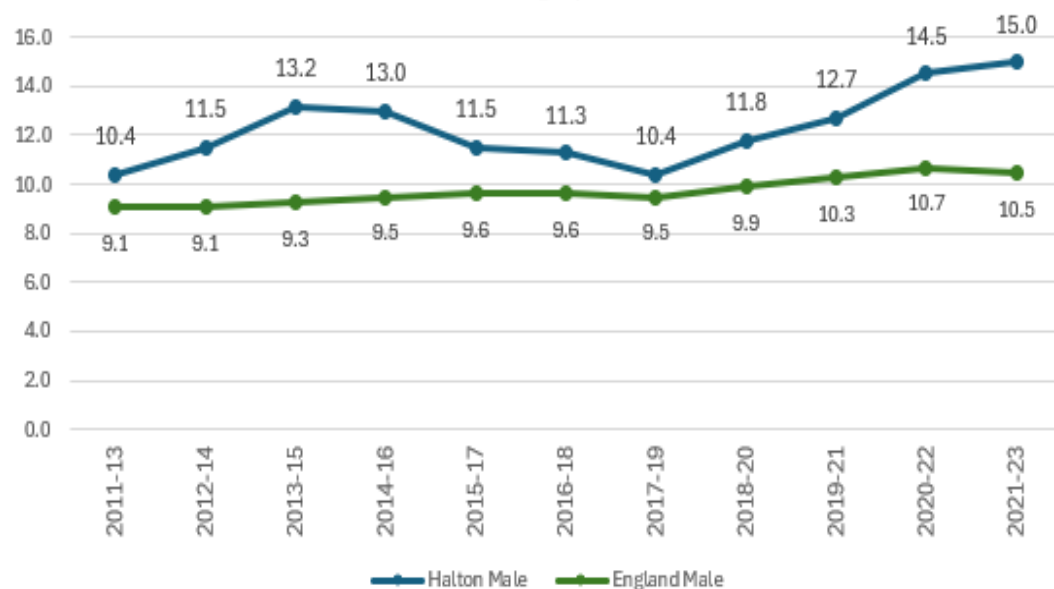
Slope index of inequality

The slope index of inequality (SII) is a measure of the social gradient in an indicator, i.e. how much an indicator varies with deprivation. It takes account of health inequalities across the whole range of deprivation within an area and summarises this in a single number. This represents the range in indicator values across the social gradient from most to least deprived (OHID, 2024). The SII measures the difference in life expectancy between the most and least deprived sections of the local population. The charts below highlight life expectancy at birth for Halton and England.

The two charts below highlight the SII for males and females in Halton compared to England. Across time, it is evident that Halton's SII is consistently higher. For males in Halton, this gap has been widening in recent years with statistical difference. Halton's SII for 2021-23, is 15 years, 4.5 years higher than males in England. This has been increasing steadily since 2017-19 and is now the highest it has ever been. Similarly, females in Halton have been consistently higher through time, but not as high as males. In 2021-23, females in Halton for the SII was 10.8 while England was 8.3 years. The differences in the SIIs between males and females is quite significant, as well as being quite stark between Halton and England. Halton males have a large variation with 15 years between the least and most deprived in the population regarding LE at birth.

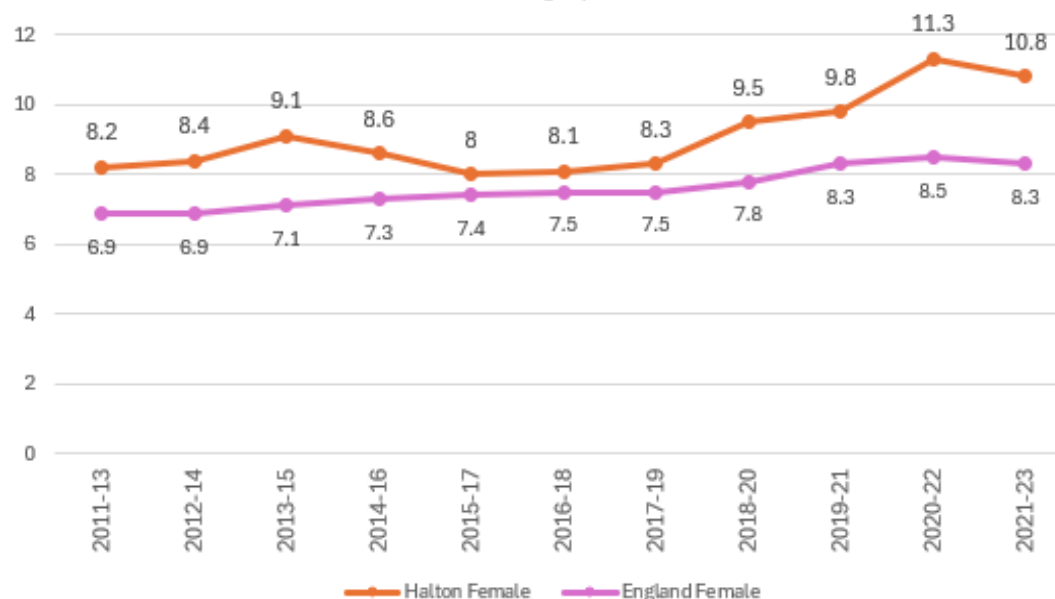
Slope index of inequality for males in Halton and England (years)

Source: Fingertips 2025



Slope index of inequality for females in Halton and England (years)

Source: Fingertips 2025

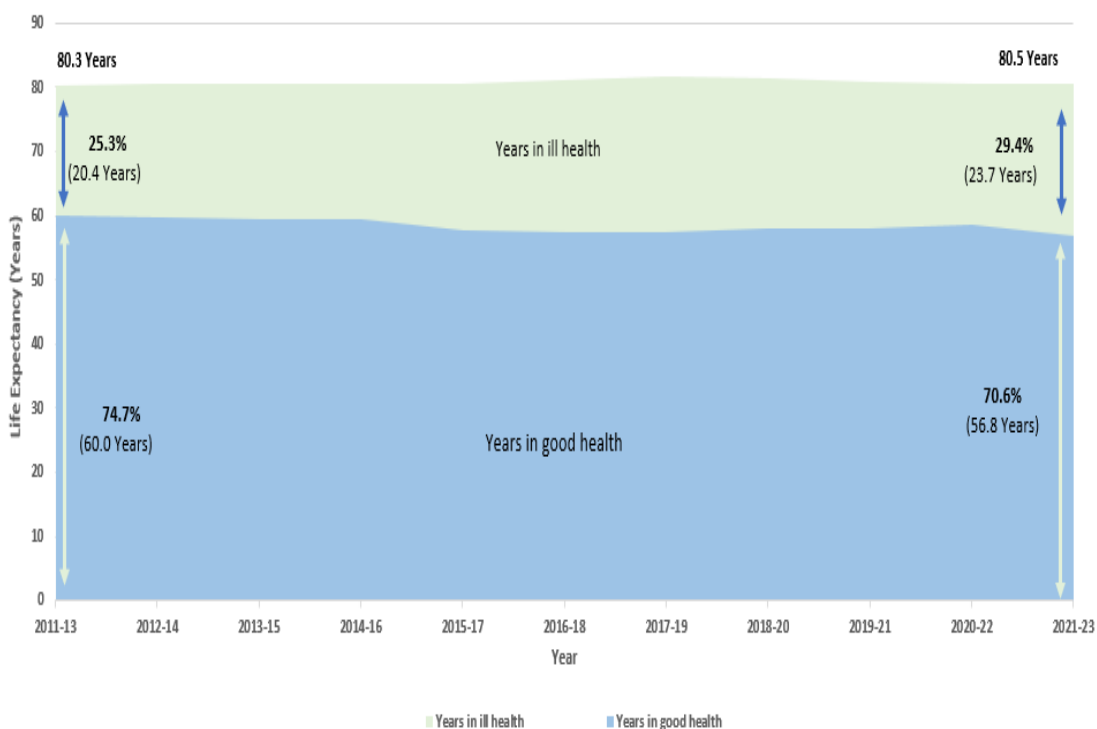


Years spent in ill health

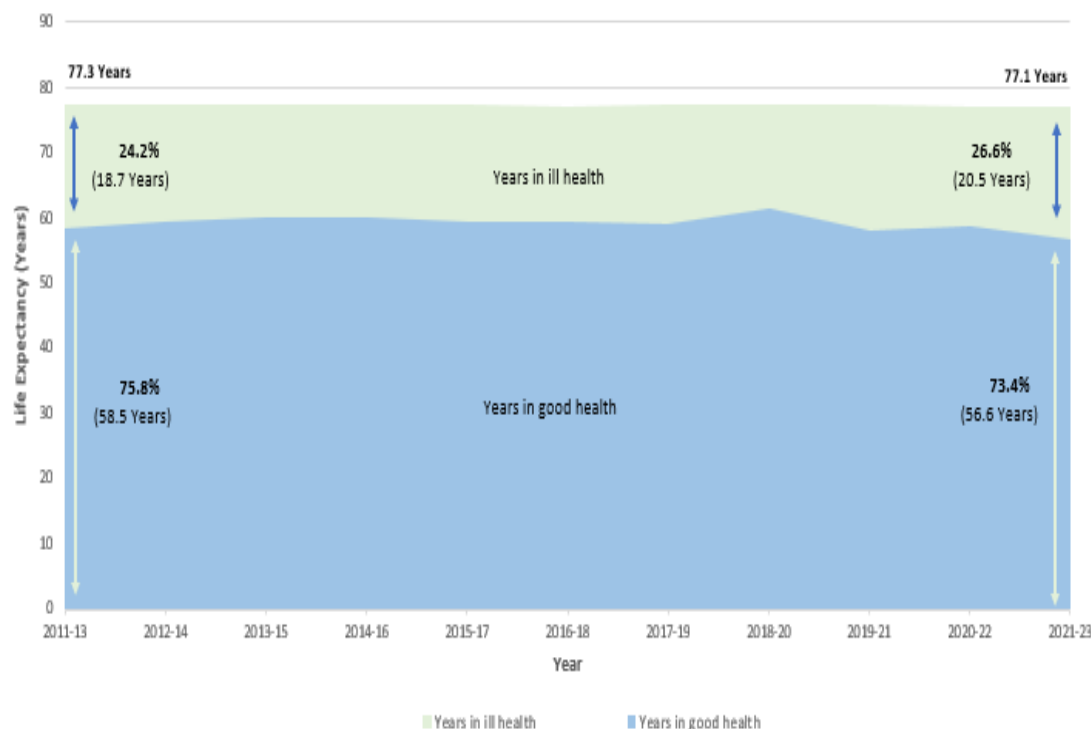
By combining the charts on LE and HLE it provides us with a visual on the number of years males and females in Halton spend in ill health. These charts also highlight the trends from 2011/13 through to most recent 2021/23. It is apparent that as well as LE declining through recent years, the years that people now spend in ill health are increasing. In other terms, people have been living for less time but also in poorer health.

Drivers of HLE have included the presence of certain diseases. Research as well as statistical analysis of survey data, suggests chronic health conditions and multimorbidity are the clearest drivers of self-reported poor health. Conditions of the musculoskeletal system (MSK) may highlight consideration due to the condition's large, estimated population prevalence. Analysis from OHID, and more recently by Nesta, suggest that those with chronic MSK conditions have over 3 times the odds of reporting poor health than those without. Behavioural and socioeconomic risk factors such as physical activity, smoking status, education and household income are also associated with self-reported poor health. Research also shows the strong association between self-reported poor health and adverse health events, healthcare utilisation and all-cause mortality. The Nesta analysis shows that the difference in prevalence between the least and most deprived areas is most marked for obesity. Musculoskeletal conditions and obesity have the greatest impact on self-reported health, especially among people living in the most deprived areas.

Trend in Life Expectancy and Health Expectancy in Halton (Females)



Trend in Life Expectancy and Health Expectancy in Halton (Males)



Highlights

Females in Halton are Expected to live for **80.5 Years**

Males in Halton are expected to live for **77.1 Years**



For **Females**, **56.8** of those years are expected to be in good health

For **Males**, **56.6** of those years are expected to be in good health

Gap in **Female** life expectancy in **Halton**, compared with;

North West Region at **81.6**- 1.1 years higher

England at **83.1**- 2.5 years higher



Gap in **Female** Healthy life expectancy in **Halton**, compared with;

North West Region at **59.9**- 3.1 years higher

England at **61.9**- 5.1 years higher

Gap in **Male** life expectancy in **Halton**, compared with;

North West Region at **77.5**- 0.4 years higher

England at **79.1**- 2.0 years higher



Gap in **Male** Healthy life expectancy in **Halton**, compared with;

North West Region at **59.1**- 3.1 years higher

England at **61.5**- 5.1 years higher

Life expectancy & Healthy Life Expectancy at 65

LE Halton- 19.5 yrs

North West- 20.3 yrs

England- 21.1 yrs



LE Halton- 17.7 yrs

North West- 17.9 yrs

England- 18.7 yrs



HLE Halton- 8.8 yrs

North West- 10.0 yrs

England- 11.2 yrs

HLE Halton- 8.2 yrs

North West- 9.2 yrs

England- 10.1 yrs

Resources

- Life expectancy for local areas of Great Britain - Office for National Statistics - [Life expectancy for local areas of Great Britain - Office for National Statistics](#)
- Fingertips | Department of Health and Social Care- [Fingertips | Department of Health and Social Care](#)
- Interpreting the latest life expectancy data - The Health Foundation- [Interpreting the latest life expectancy data - The Health Foundation](#)
- Levelling Up the United Kingdom: Executive Summary- [Levelling Up the United Kingdom: Executive Summary](#)
- Understanding the drivers of healthy life expectancy: report - GOV.UK- [Understanding the drivers of healthy life expectancy: report - GOV.UK](#)
- What Is Happening To Life Expectancy In England? | The King's Fund- [What Is Happening To Life Expectancy In England? | The King's Fund](#)
- Life expectancy in England- [Life expectancy in England](#)
- What will it take to halve the gap in healthy life expectancy? | Nesta- [What will it take to halve the gap in healthy life expectancy? | Nesta](#)
- Trends in life expectancy and healthy life expectancy | The Health Foundation- [Trends in life expectancy and healthy life expectancy | The Health Foundation](#)
- Public health Outcomes Framework- https://fingertips.phe.org.uk/documents/PHOF_Slope_Index_of_Inequality_Method.pdf
- Deprivation- [Deprivation_2019.pdf](#)
- The English Indices of Deprivation (2019)- [English Indices of Deprivation 2019 FAQs](#)