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Healthy Communities

Life expectancy and potentially avoidable deaths in 2013–2015

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This report presents information on life expectancy at birth and potentially avoidable deaths in Australia nationally and across Primary Health Network (PHN) areas. It also includes some results for smaller local areas.

Life expectancy information can be used as a broad measure of population health. Potentially avoidable deaths are deaths before the age of 75, which could have been avoided with current health care. This information can indicate how well health systems are performing.

Australia has the eighth highest life expectancy at birth in Organisation for Economic Co-operation and Development (OECD) countries (OECD 2017).

In Australia, life expectancy at birth was 82.4 years in 2013–2015, up from 82.1 years in 2011–2013. The age-standardised rate of potentially avoidable deaths was 108 per 100,000 people in 2013–2015, down from 117 per 100,000 people in 2009–2011.

Similar to the national result, most PHN areas reported increases in life expectancy and decreases in potentially avoidable deaths over the same periods.

During 2013–2015, life expectancy in metropolitan PHN areas tended to be longer than in regional PHN areas. Conversely, the rate of potentially avoidable deaths was higher in regional PHN areas than in metropolitan PHN areas.

Across PHN areas in 2013–2015, Northern Sydney had the longest life expectancy at birth (85.5 years) and the lowest rate of potentially avoidable deaths (62 per 100,000 people), while the Northern Territory had the shortest life expectancy (77.0 years) and highest rate of potentially avoidable deaths (226 per 100,000 people).

In 2013–2015:
Life expectancy at birth varied across Primary Health Network areas:



Northern Sydney
85.5

National rate
82.4

Northern Territory
77.0

years

The rate of potentially avoidable deaths also varied across Primary Health Network areas:



Northern Sydney
62

National rate
108

Northern Territory
226

per 100,000 people

Visit www.myhealthycommunities.gov.au
for more detailed results

AIHW

Life expectancy at birth

Life expectancy at birth is the average number of years that a new born baby could expect to live, assuming that the current age-specific death rates are experienced throughout his/her life.

Between 2011–2013 and 2013–2015 in Australia, life expectancy at birth for all persons increased from 82.1 years to 82.4 years (Figure 1).

Women continue to have a longer life expectancy than men, yet both women and men had an increase in life expectancy between 2011–2013 and 2013–2015—an increase from 84.3 to 84.5 years for women and 80.1 to 80.4 years for men.

Between 2011–2013 and 2013–2015, most PHN areas recorded an increase in life expectancy at birth. However, life expectancy at birth decreased in some areas (Figure 3, page 4).

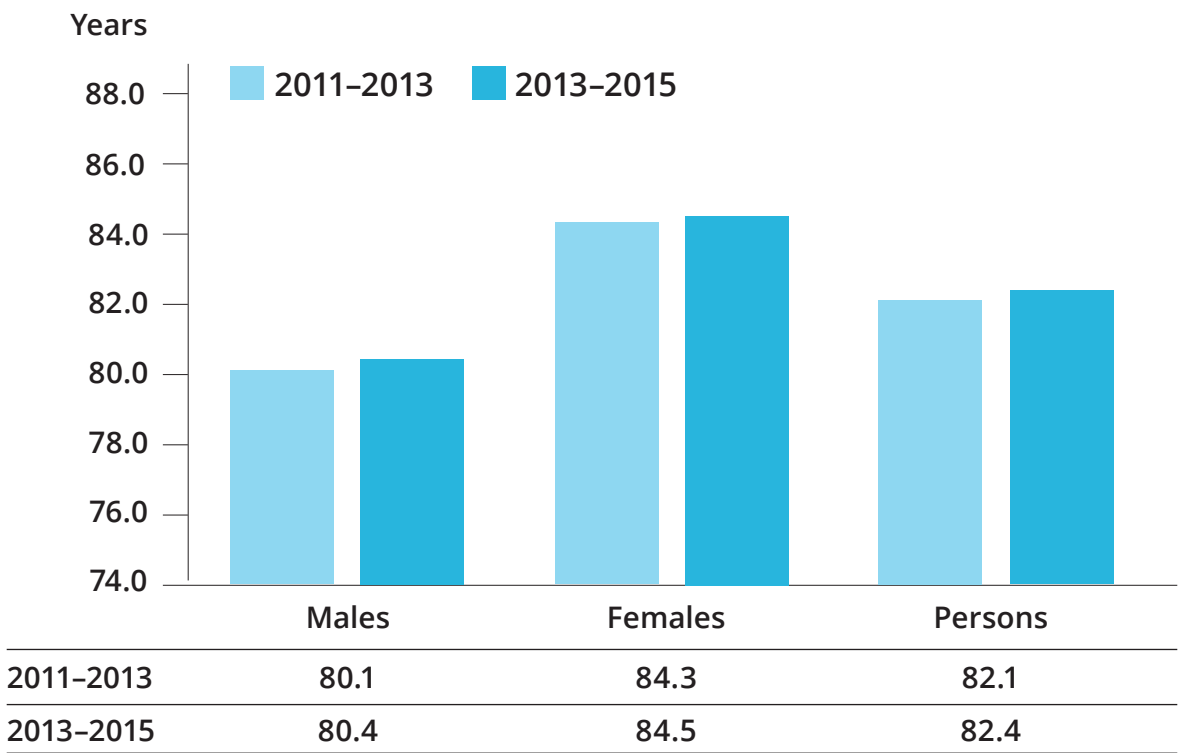
The largest increase in life expectancy at birth (0.6 years) was seen in four Queensland PHN areas – Brisbane North, Brisbane South, Darling Downs and West Moreton, and Western Queensland.

Gippsland (Vic) PHN area recorded the largest decrease in life expectancy at birth (0.5 years) over the same period.

Variation across Australia

During 2013–2015, life expectancy at birth ranged across PHN areas from 77.0 years in the Northern Territory to 85.5 years in Northern Sydney (Figure 2, page 3).

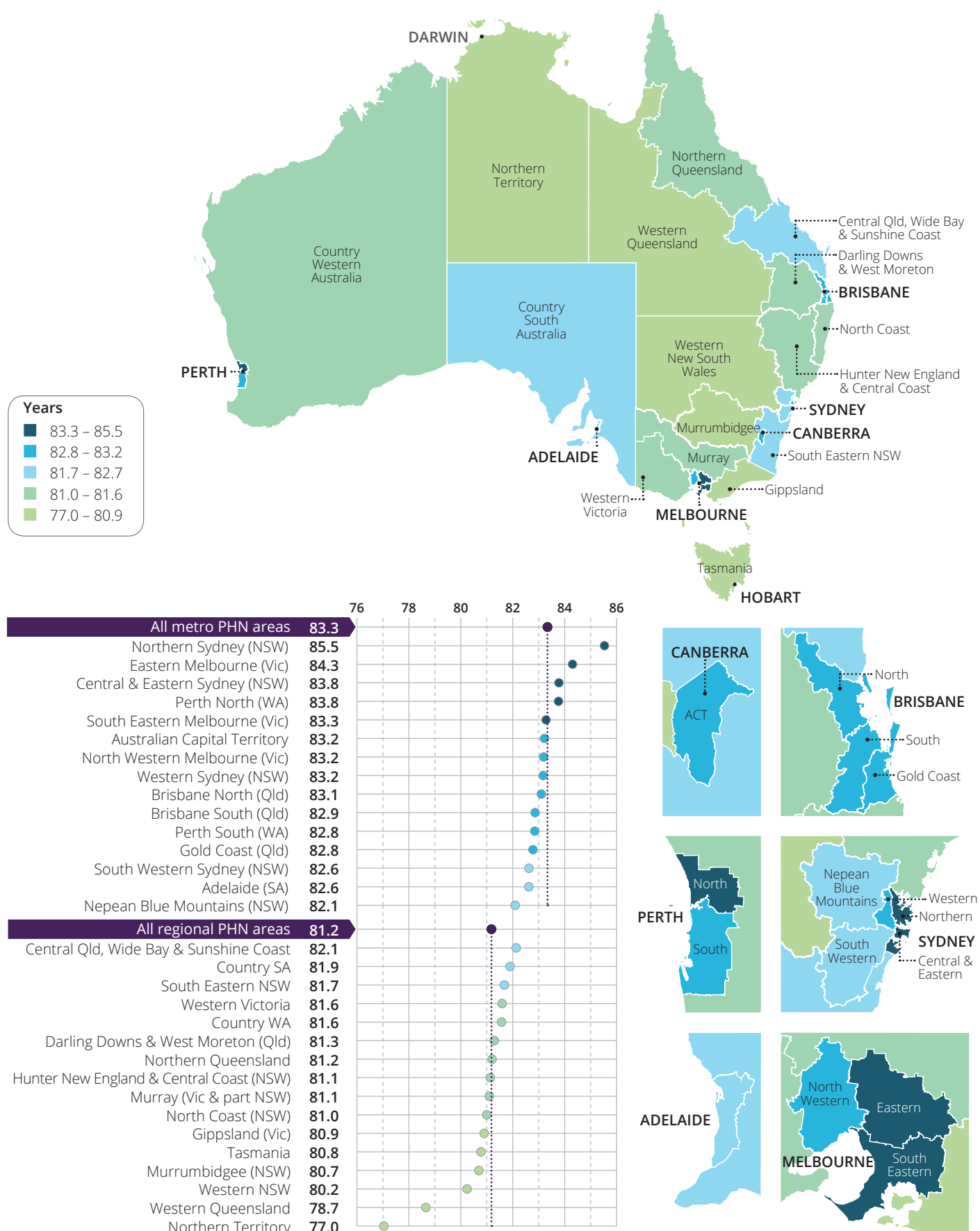
Figure 1: Estimated number of years a person is expected the live at birth, by sex, 2011–2013 and 2013–2015



Note: Life expectancy at birth is the average number of years that a new born baby could expect to live, assuming that the current age-specific death rates are experienced throughout his/her life.

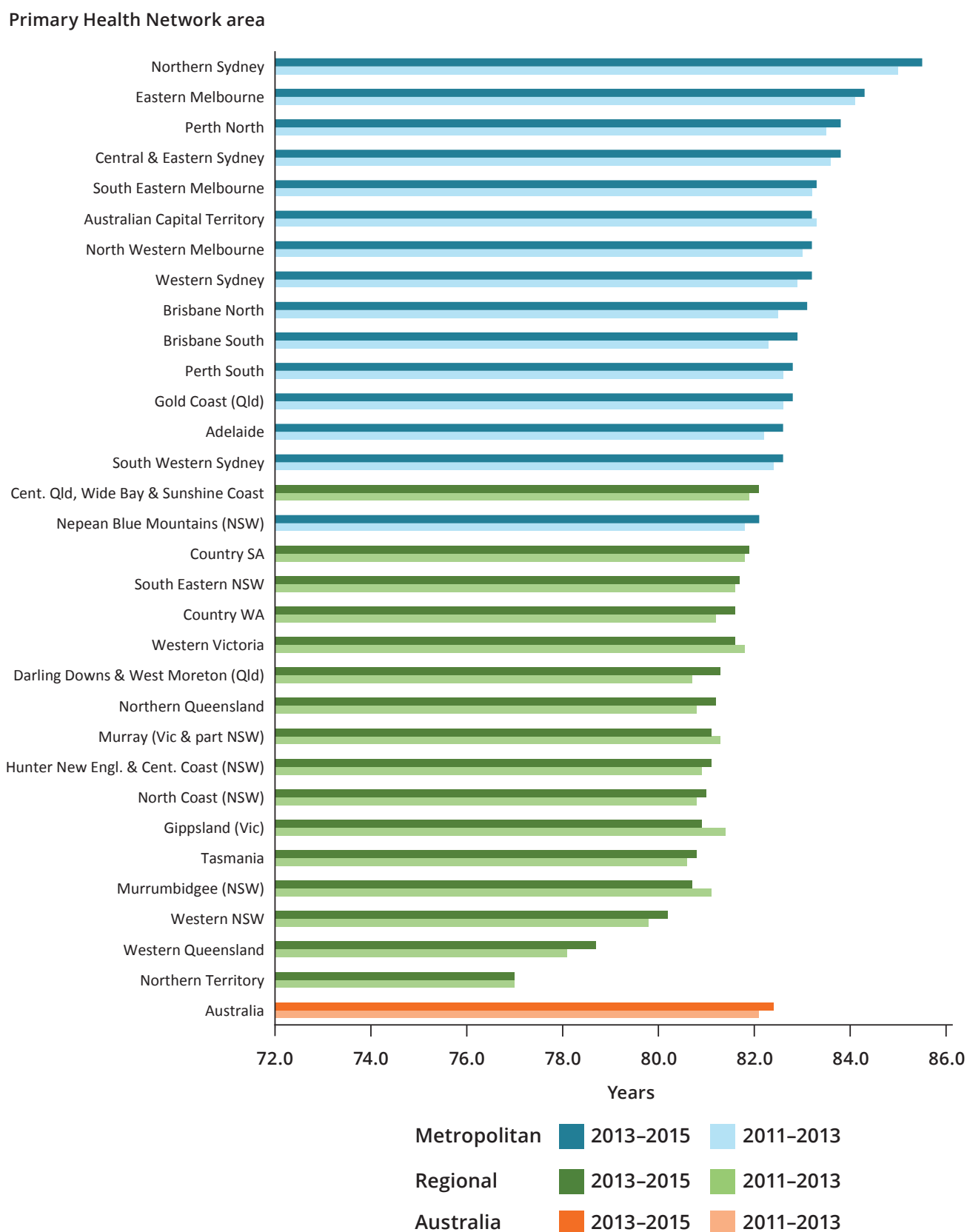
Source: Australian Institute of Health and Welfare (AIHW) analysis of life expectancy estimates as provided by the Australian Bureau of Statistics (ABS).

Figure 2: Estimated number of years a person is expected to live at birth, by Primary Health Network area, 2013–2015



Source: Australian Institute of Health and Welfare (AIHW) analysis of life expectancy estimates as provided by the Australian Bureau of Statistics (ABS).

Figure 3: Estimated number of years a person is expected to live at birth, by metropolitan and regional Primary Health Network area, 2011–2013 and 2013–2015



Note: Life expectancy at birth is the average number of years that a new born baby could expect to live, assuming that the current age-specific death rates are experienced throughout his/her life.

Source: Australian Institute of Health and Welfare (AIHW) analysis of life expectancy estimates as provided by the Australian Bureau of Statistics (ABS).

Potentially avoidable deaths

Potentially avoidable deaths are those that occur prematurely – before the age of 75 – from causes that might have been avoided through the provision of care and/or treatment through existing primary or hospital care. The causes are based on nationally agreed definitions (AIHW 2017).

Information on potentially avoidable deaths is used as an indicator of the effectiveness of the health system, including hospital, primary and community care (Australian Commission on Safety and Quality in Health Care, 2017).

During 2013–2015, there were almost 80,000 potentially avoidable deaths in Australia, accounting for 17% of all deaths over this period.

However, between 2009–2011 and 2013–2015, the age-standardised rate of potentially avoidable deaths decreased from 117 to 108 deaths per 100,000 people (Figure 4).

The rate of potentially avoidable deaths in women is nearly half that of men. However, rates of potentially avoidable deaths for both women and men decreased between 2009–2011 and 2013–2015 from 84 to 77 per 100,000 for women, and from 151 to 139 per 100,000 for men.

Variation across Australia

During 2013–2015, the age-standardised rate of potentially avoidable deaths varied by 164 deaths per 100,000 people across PHN areas. The rate ranged from 226 deaths per 100,000 people in the Northern Territory to 62 per 100,000 in Northern Sydney (Figure 5, page 6).

Between 2009–2011 and 2013–2015, the rate of potentially avoidable deaths decreased in most PHN areas. The greatest decrease was seen in Western Queensland, from 213 to 194 deaths per 100,000 people.

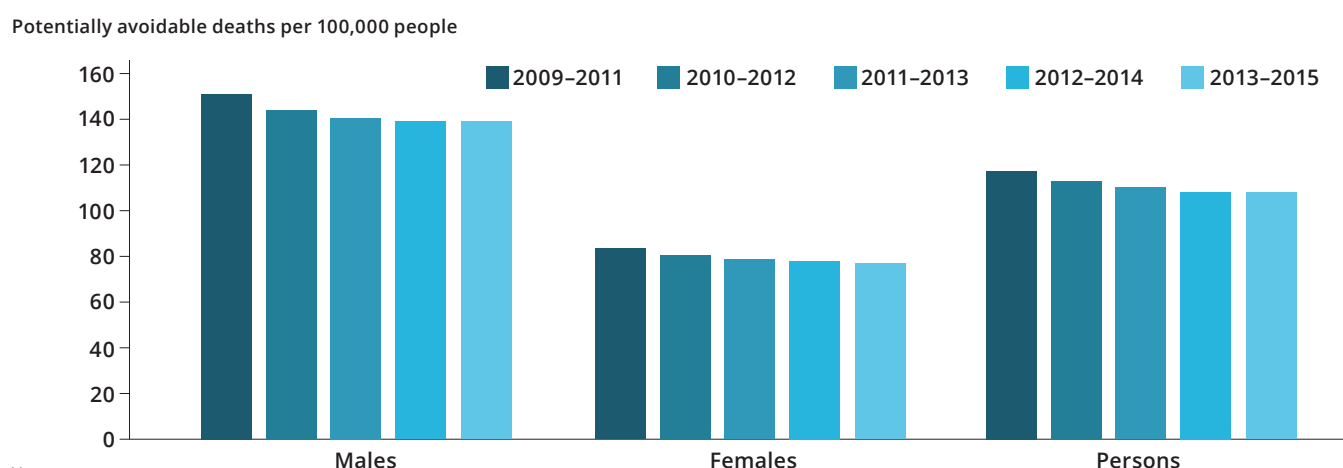
However, the rate of potentially avoidable deaths increased in some PHN areas. The greatest increase over this time was in the Northern Territory, from 219 to 226 deaths per 100,000 people (Figure 6, page 7).

Variation across metropolitan and regional areas

On average, during from 2013–2015, metropolitan PHN areas had a lower rate of potentially avoidable deaths (96 deaths per 100,000 people) than regional PHN areas (129 per 100,000) (Figure 5, page 6).

Between 2009–2011 and 2013–2015, the average rate of potentially avoidable deaths for all metropolitan areas decreased, from 106 to 96 deaths per 100,000 people. Similarly, the average rate across all regional areas also decreased, from 138 to 129 per 100,000 over this time (Figure 6, page 7).

Figure 4: Number of potentially avoidable deaths (age-standardised), per 100,000 people by sex, 2009–2011 to 2013–2015

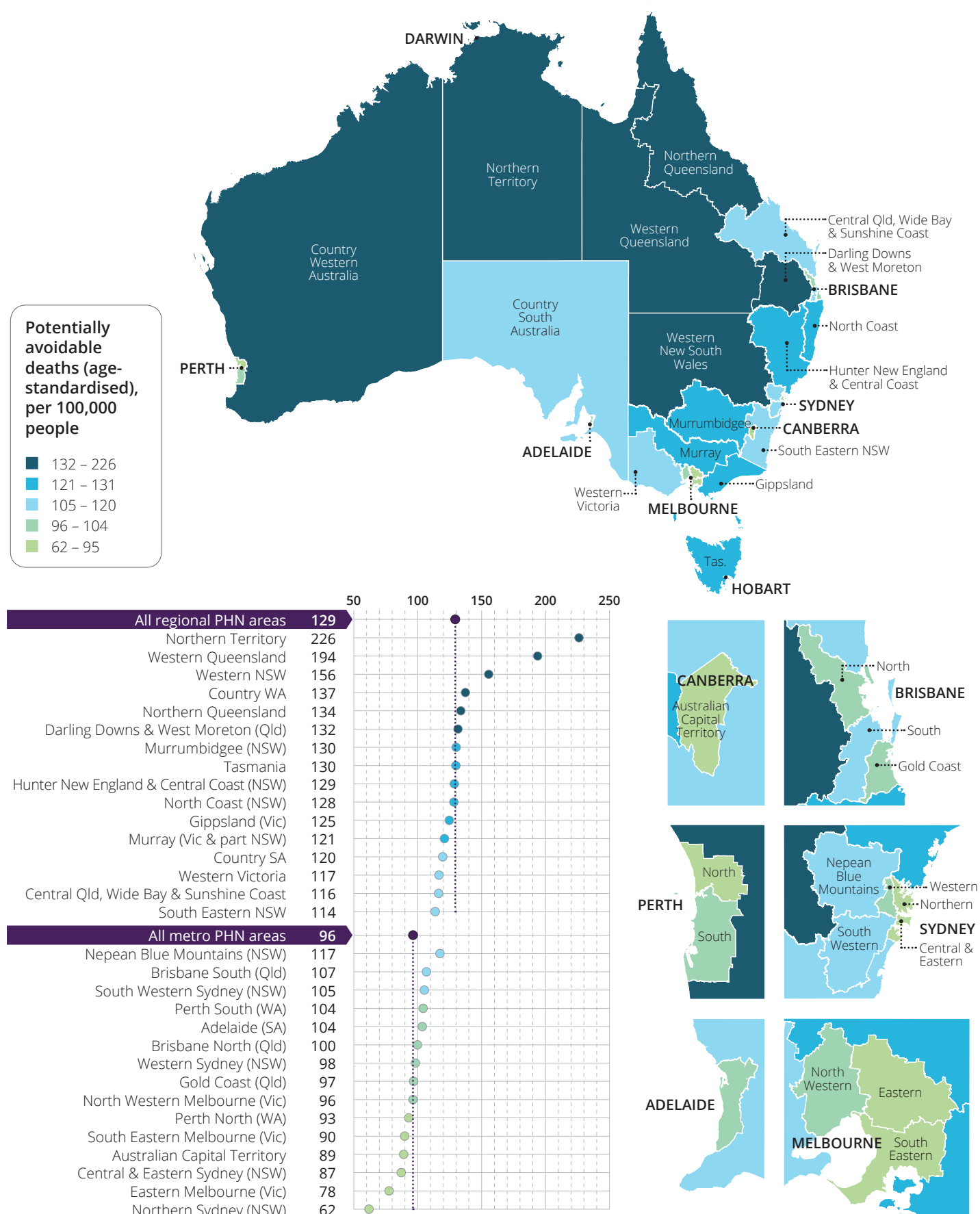


Notes:

1. Potentially avoidable deaths are deaths below the age of 75 from conditions that are potentially preventable through individualised care and/or treatable through existing primary or hospital care.
2. Rates have been age-standardised to facilitate comparisons between populations with different age structures.

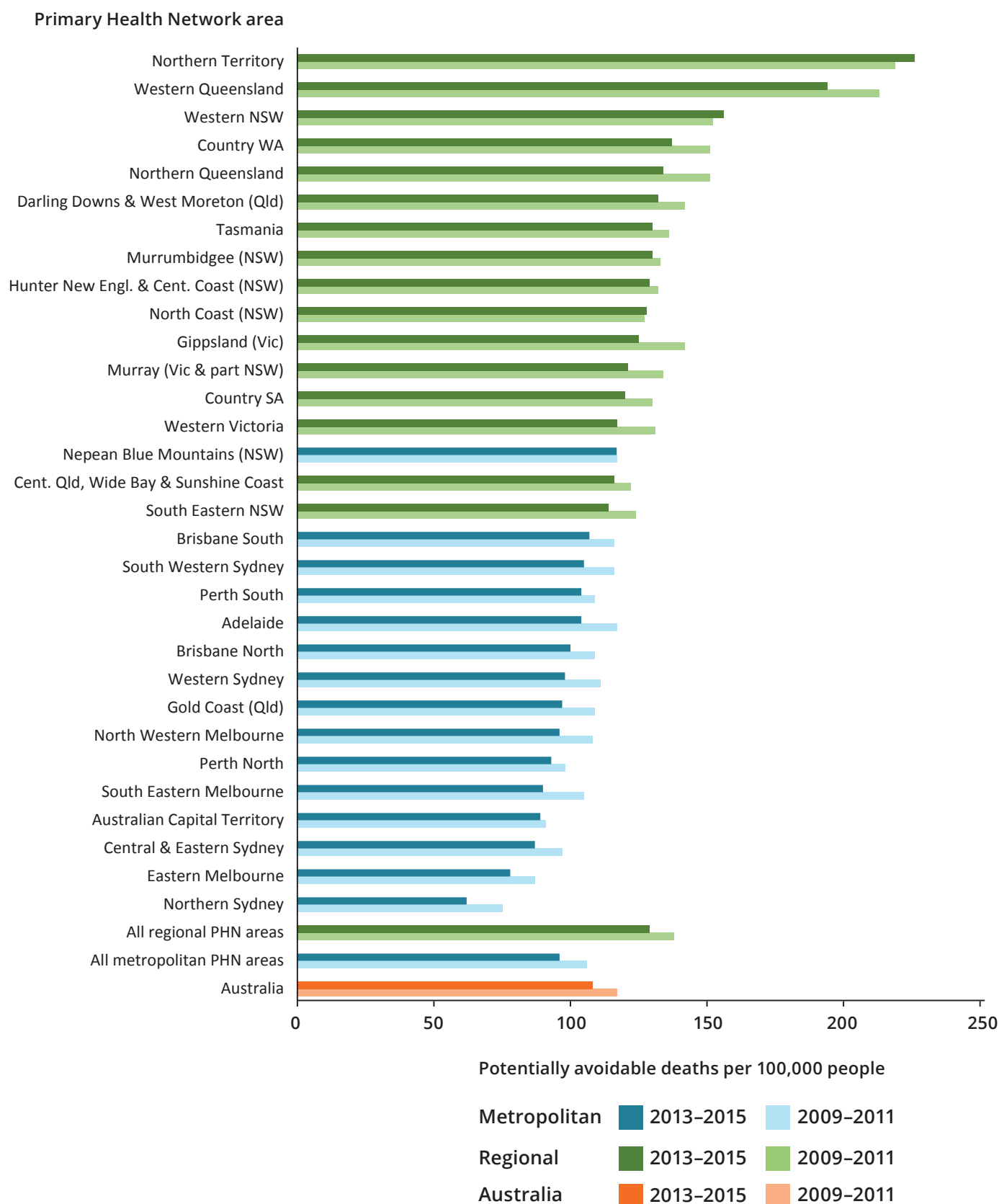
Source: Australian Institute of Health and Welfare (AIHW) National Mortality Database (NMD) and Australian Bureau of Statistics ERP.

Figure 5: Potentially avoidable deaths (age-standardised), per 100,000 people by Primary Health Network area, 2013–2015



Source: Australian Institute of Health and Welfare (AIHW) National Mortality Database (NMD) and Australian Bureau of Statistics ERP at 30 June 2013–2015.

Figure 6: Potentially avoidable deaths (age-standardised), per 100,000 people by metropolitan and regional Primary Health Network area, 2009–2011 and 2013–2015



Note: 1. Potentially avoidable deaths are deaths below the age of 75 from conditions that are potentially preventable through individualised care and/or treatable through existing primary or hospital care.

2. Rates have been age-standardised to facilitate comparisons between populations with different age structures.

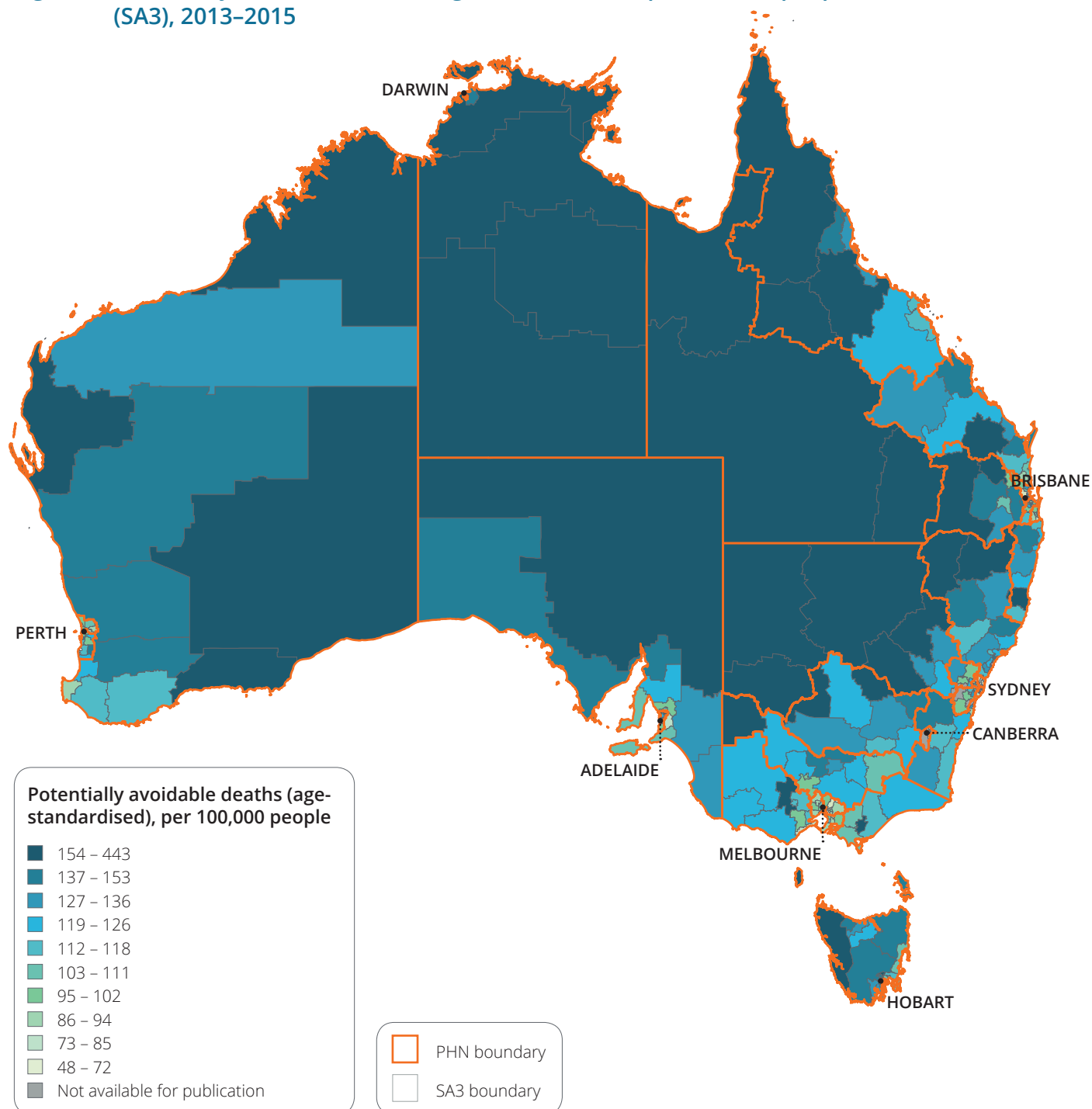
Source: Australian Institute of Health and Welfare (AIHW) National Mortality Database (NMD) and Australian Bureau of Statistics ERP at 30 June 2013–2015.

Variation across local areas

Rates of potentially avoidable deaths are also available for more than 300 local areas called Statistical Areas Level 3 (SA3s) (Figure 7). Across these local areas during 2013–2015, the rate varied by 395 potentially avoidable deaths per 100,000 people, from 48 per 100,000 in Pennant Hills-Epping (NSW) to 443 per 100,000 in Daly-Tiwi-West Arnhem (NT).

There was also variation in the rate of potentially avoidable deaths per 100,000 people across capital cities (Figure 7 continued, page 9).

Figure 7: Potentially avoidable deaths (age-standardised), per 100,000 people, across local areas (SA3), 2013–2015



Source: Australian Institute of Health and Welfare (AIHW) National Mortality Database (NMD) and Australian Bureau of Statistics ERP at 30 June 2013–2015.

Figure 7 (cont.): Potentially avoidable deaths (age-standardised), per 100,000 people, across local areas (SA3), 2013–2015



Source: Australian Institute of Health and Welfare (AIHW) National Mortality Database (NMD) and Australian Bureau of Statistics ERP at 30 June 2013–2015.

Potentially avoidable deaths and health risk factors

Potentially avoidable deaths include both preventable and treatable deaths. Potentially preventable deaths are those that are responsive to preventive health activities such as screening, good nutrition and healthy habits such as exercise.

Potentially avoidable deaths that are preventable may be influenced by a person's individual health risk factors—attributes, characteristics or exposures that increase the likelihood of a person developing a disease or health disorder.

For example, tobacco use, high body mass, alcohol consumption, physical inactivity and high blood pressure have all been shown to have strong links with the development of chronic diseases (AIHW 2016).

Many of these chronic diseases are listed as causes of potentially avoidable deaths, for example, cancer or cardiovascular disease.

Similar to potentially avoidable deaths, regional PHN areas had a higher proportion of people reporting health risk factors than people in metropolitan PHN areas, and the national average.

For more information on health risk factors across PHN areas, refer to the following Healthy Communities reports:

- Health risk factors in 2014–15
- Overweight and obesity rates across Australia, 2014–15
- Tobacco smoking rates across Australia, 2014–15

Detailed data is available for download at www.myhealthycommunities.gov.au



All results in this report can be explored further at www.myhealthycommunities.gov.au

The interactive website allows you to compare results for more than 130 health measures including:

- Adults who smoke tobacco daily
- Adults who are overweight and obese
- Hospital admissions for mental health conditions and intentional self-harm
- GP attendances
- After-hours GP attendances
- Child immunisation rates
- Use of emergency departments.

In 2013–2015



Regional areas had a higher rate
of potentially avoidable deaths
than **metropolitan areas**

Regional PHN areas

129

National rate

108

Metropolitan PHN areas

96

age-standardised
per 100,000 people

About the data

The data were sourced from the Australian Institute of Health and Welfare (AIHW) analysis of Australian Bureau of Statistics (ABS) Life Tables, 2011–2015, and the AIHW National Mortality Database, 2009–2015.

Life expectancy at birth is the number of years of life that a person is expected to live at the time they are born.

Potentially avoidable deaths are deaths below the age of 75 from conditions that are potentially preventable through individualised care and/or treatable through existing primary or hospital care.

For more information refer to the Technical Note at www.myhealthycommunities.gov.au/publications

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What is a Primary Health Network?

Primary Health Networks (PHNs) are local organisations that connect health services across a specific geographic area, with the boundaries defined by the Australian Government Department of Health.

Thirty-one PHNs commenced operations on 1 July 2015, replacing Medicare Locals. They have the key objectives of increasing the efficiency and effectiveness of medical services for patients, particularly those at risk of poor health outcomes, and improving coordination of care to ensure patients receive the right care in the right place at the right time.

In this report, a PHN area refers to the population that lives in the geographic area covered by a particular PHN.

The results in this report relate to the period before PHNs were established; therefore, the findings do not reflect the performance of PHNs.



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Please note that there is the potential for minor revisions of this document.