

Inequalities in mortality between coastal and non- coastal areas in Kent

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Produced by

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1 Life expectancy at birth in coastal and non-coastal areas in Kent in the period 2022-2024

1.1 Key points:

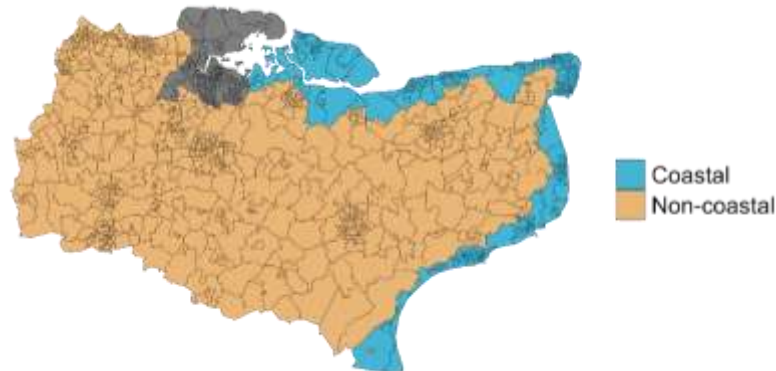
- Life expectancy in Kent coastal areas is 2.1 years lower than in non-coastal areas.
- The three main contributory causes are Chronic lower respiratory diseases, Lung cancer and Cirrhosis and diseases of the liver.
- Life expectancy is moderated by socio-economic deprivation and the effect is larger in coastal areas.
- The gap between coastal and non-coastal life expectancy is wider among males.

Coastal areas face many unique challenges which, nationally, means people in these areas often experience worse health outcomes and reduced life expectancy. More about this can be read in the Kent Annual Public Health Report (APHR) 2021 and the CMO Annual Report 2021. This short report investigates these inequalities in relation to life expectancy in the Kent population.

In this report, coastal areas cover any Lower Super Output Area (LSOA) in the Marmot Coastal Programme Region which is in a coastal community (ONS definition) or bordering the coast. This means it includes coastal LSOAs in Ashford, Canterbury, Dover, Folkestone and Hythe, Swale and Thanet, and excludes areas which may be coastal in other districts such as in Dartford, Gravesham or Medway. The included areas are highlighted in Figure 1 and contain approximately 27.4% of the Kent population, of which 89% is urban. This definition differs from the Kent Annual Public Health Report which only included 12 coastal towns in Kent. The non-coastal urban areas contain 50% of the population and the remaining 22% of people are in non-coastal rural areas.

From 2022-2024 the average life expectancy at birth for people living in coastal areas of Kent was 80.3 years. In non-coastal areas, the life expectancy was 82.4 years. This means that on average, people in coastal areas die approximately 2.1 years earlier. The cause of this inequality can be attributed to specific conditions to indicate what is driving premature death in coastal areas.

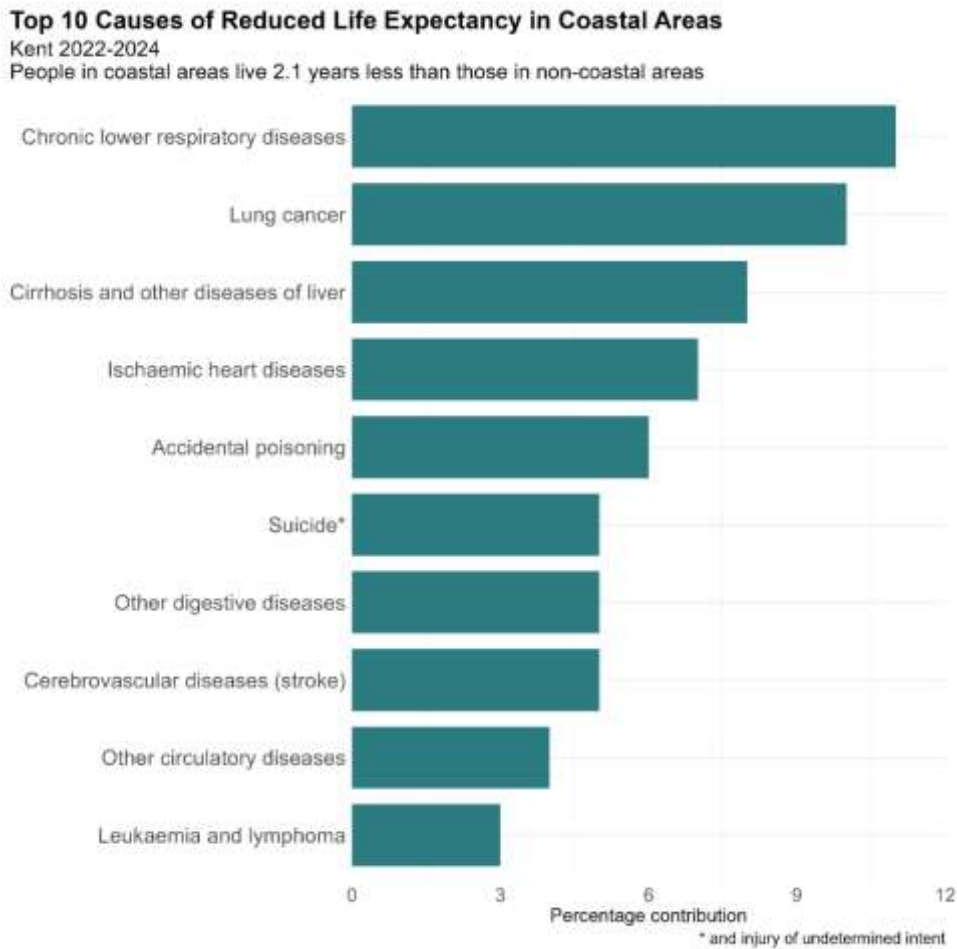
Figure 1. Map of Kent LSOAs, showing coastal and non-coastal areas. People in Medway are not included in this analysis.



1.2 Conditions Responsible for the Life Expectancy Gap

Figure 2 shows the top 10 conditions responsible for the gap in life expectancy between people in coastal and non-coastal areas. Of the 2.1 years lost to people in coastal areas, these 10 conditions cause 1.3 years of that premature death. Chronic lower respiratory diseases and lung cancer have the largest effect, accounting for approximately 11% and 10% of the difference each, which equates to approximately two and a half months of life cost each. In descending order of impact: chronic lower respiratory diseases, lung cancer, cirrhosis and other liver disease, ischaemic heart diseases, accidental poisoning, suicide, other digestive diseases, cerebrovascular diseases (stroke), other circulatory diseases, leukaemia and lymphoma. There can be many causes of these conditions, but several of them are linked to smoking and alcohol consumption.

Figure 2. The conditions which are responsible for the majority of the life expectancy gap between coastal and non-coastal areas. Source: PCMD.

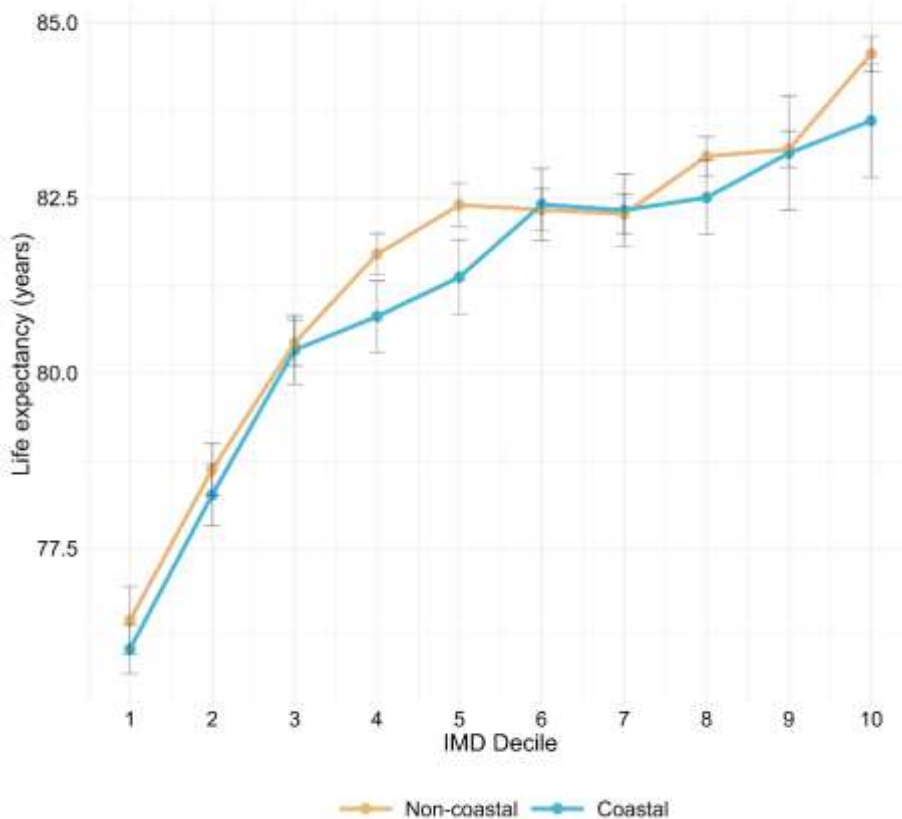


1.3 Inequalities by deprivation

In both coastal and non-coastal areas, life expectancy generally improves with decreasing deprivation, however there are some differences in that trend between the area types (Figure 3). People living in the 30% most deprived areas have very similar life expectancies regardless of area type. From decile four, people in coastal areas generally have a lower life expectancy than their non-coastal counterparts.

Figure 3. Life expectancy by IMD decile in coastal and non-coastal areas in Kent, 2019-2024.
Source: PCMD.

Life Expectancy by IMD Decile in Coastal and Non-Coastal Areas
Kent 2019-2024



1.3.1 Slope index of deprivation

One way to measure the magnitude of the inequality is using the Slope Index of Inequality (SII). Briefly, the SII is a measure of the social gradient in life expectancy, that is how much life expectancy varies with deprivation. In Kent in for the period 2019-2024 the SII was 8.8 years (confidence intervals 8.2 – 9.3 years) for people in coastal areas and 6.1 years (CI 5.8 – 6.4 years) for people in non-coastal areas. Although the non-coastal areas show a slightly larger difference between the most and least deprived deciles, inequality across the entire deprivation gradient is steeper in coastal areas. This produces a larger Slope Index of Inequality (SII) for coastal areas and means that life expectancy in coastal areas is more heavily influenced by deprivation.

1.4 Differences between sexes

For the period 2022-2024, life expectancy for females in coastal areas was 82.8, which is 1.3 years lower than females in non-coastal areas. For males this inequality more than doubled, with males in coastal areas having a life expectancy of 77.8 and dying on average 2.7 years earlier than those in non-coastal areas (table 1).

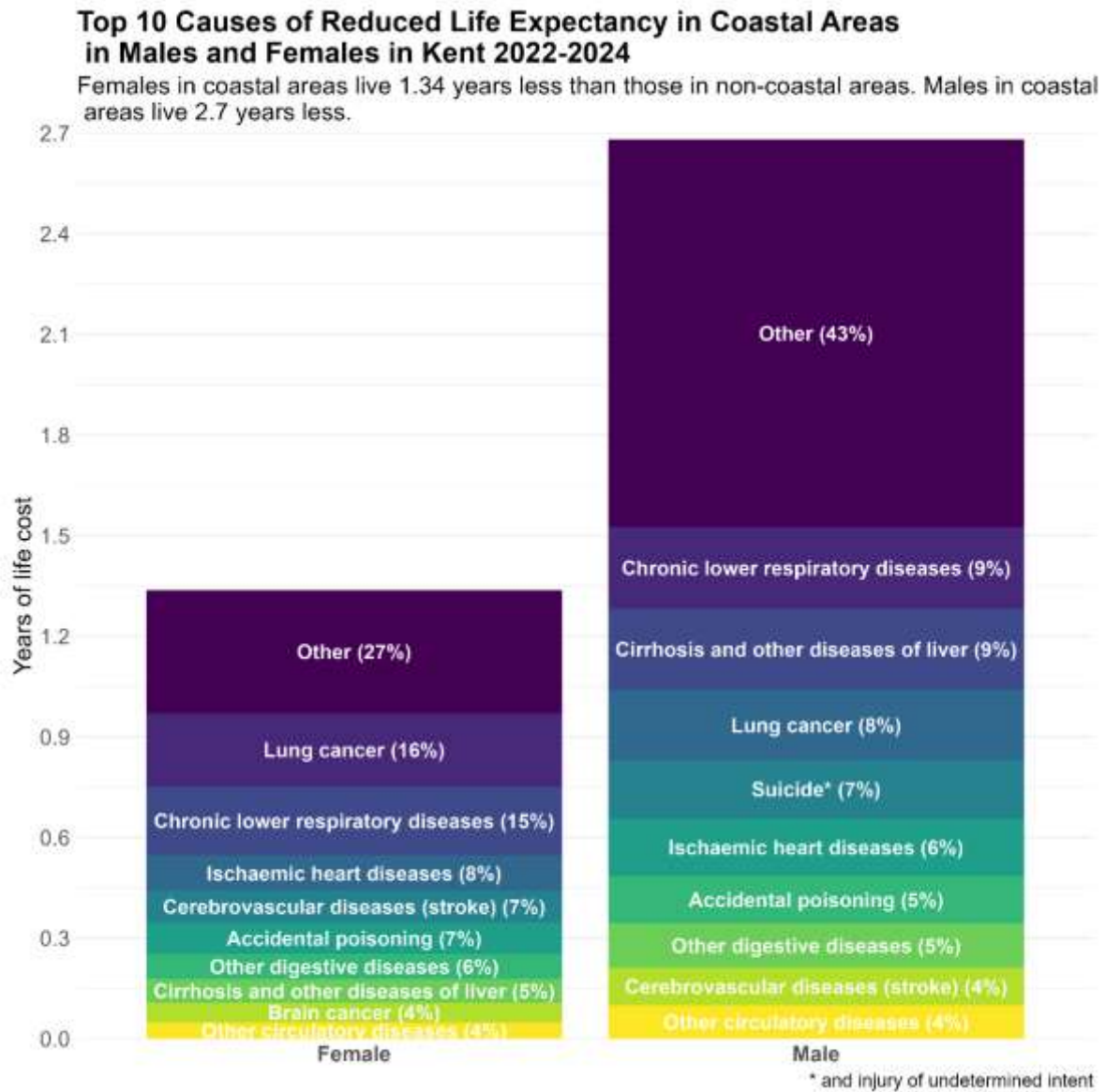
Females typically live longer than males, but this inequality widens in coastal areas, with males in coastal areas living 5 years less than females, compared with a difference of 3.6 years in non-coastal areas.

Table 1. Life expectancy by sex and area type, Kent 2022-2024. Source: PCMD.

Sex	Coastal	Non-coastal	Difference (years)
Male	77.8	80.5	2.7
Female	82.8	84.1	1.3
Difference (years)	5.0	3.6	

There are also differences in the conditions which males and females in coastal areas are more likely to die from than those in non-coastal areas. The top 10 conditions contributing to the difference in life expectancy between females differ slightly from that of all persons. Notably, in males, cirrhosis and other diseases of the liver and suicide and injury of undetermined intent have a larger effect, accounting for 9% and 7% of the gap, respectively. Further breakdown within sexes can be seen in appendix 1 and 2.

Appendix 1. Infographic comparison of the conditions which contribute to the life expectancy gap between coastal and non-coastal areas in males and females in Kent from 2022-2024. Source: PCMD.



Appendix 2. The contribution to the life expectancy gap between people in coastal and non-coastal areas, limited to leading causes of death in males and females. Kent, 2022-2024. Source: PCMD. Note: a negative value indicates a condition has a more favourable impact on life expectancy in coastal areas.

Condition	Contribution for males (years)	Contribution for females (years)
Accidental poisoning	0.14	0.09
Brain cancer	0.01	0.06
Breast cancer	NA	-0.03
COVID-19	0.04	0.05
Cerebrovascular diseases (stroke)	0.11	0.10
Chronic lower respiratory diseases	0.24	0.21
Cirrhosis and other diseases of liver	0.24	0.07
Colorectal cancer	0.06	0.04
Congenital and chromosomal conditions	0.10	-0.01
Dementia and Alzheimer disease	0.01	-0.07
Influenza and pneumonia	0.06	-0.02
Ischaemic heart diseases	0.17	0.11
Leukaemia and lymphoma	0.09	0.03
Lung cancer	0.21	0.22
Other	0.66	0.41
Other circulatory diseases	0.10	0.05
Other digestive diseases	0.13	0.08
Other external causes	0.03	-0.01
Other forms of heart disease	0.09	0.00
Other respiratory diseases	0.00	0.02
Perinatal conditions	0.00	-0.07
Prostate cancer	0.01	NA
Skin cancer	0.01	0.00
Suicide and injury of undetermined intent	0.17	0.02
Transport accidents	0.00	0.01