

# Interpreting mortality trends in the presence of heterogeneity: A population dynamics approach

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Based on joint works with S. Arnold, N. El Karoui, H. Labit-Hardy and  
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Longevity Heterogeneity and Pension Design workshop, 28 January 2020

## 1 Introduction

2 *How can a cause-of-death reduction be compensated for by the population heterogeneity? A dynamic approach.*

3 Consistence of mortality forecast

# Socioeconomic gradient in mortality

- ▶ Research on the relationship between socioeconomic status (SES) and mortality is longstanding (Villermé (1830), General Register Office (1851))  
⇒ broad consensus on the strong correlation between SES and mortality.
- ▶ New trends observed in the past decades: increasing of socioeconomic gaps in health and mortality.
  - US female life expectancy gaps at birth between less and more educated women: 7.7 years in 1990, 10.3 years in 2008 (Olshansky et al. (2012)).
  - Gap in male life expectancy at 65 between higher managerial and routine occupations (England Wales): 2.4 years 1982-1986, 3.9 years 2007-2011, ONS).

**Widening gaps:** socioeconomic subgroups experience rather different mortality than national mortality rates.

## Taking heterogeneity into account

- ▶ SES inequities declared **key public issues** by the World Health Organization in its last report on ageing and health.
- ▶ Not taking into account heterogeneity can lead to:
  - Increased inequalities due public health reforms (**Alai et al. (2017)**) or “unfair” redistribution properties of pensions systems.
  - Errors in funding of annuity and pension obligation (**Meyricke and Sherris (2013), Villegas and Haberman (2014)**).
- ▶ Better understanding of heterogeneity allows for a better understanding of basis risk (**Longevity basis risk report (2014)**)

# Modeling heterogeneous mortality rates

- ▶ Growing literature in the joint modeling and forecasting of the mortality of socioeconomic subgroups [Bensusan \(2010\)](#), [Jarner and Kryger \(2011\)](#), [Villegas and Haberman \(2014\)](#), [Cairns et al. \(2016\)](#) ...
  - ▶ Remaining questions:
    - Interpreting targets set by institutions (Department of Health, WHO) ([Alai et al. \(2017\)](#)).
    - Consistency of sub-national and national estimates/forecasts ([Shang and Hyndman \(2017\)](#), [Shang and Haberman \(2017\)](#)).
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- 
- ▶ Standard tool for modelling and forecasting longevity: mortality rates.
  - ▶ Approach: take into account all population data rather than just mortality data.

# What can we learn from population dynamic?

Population divided in  $p$  risk classes:

- ▶ One year central death rate in the global population for individuals age  $x$  during calendar year  $t$ :

$$\mu_{xt} = \frac{D_{xt}}{E_{xt}} = \sum_{j=1}^p \frac{D_{xt}^j}{E_{xt}}$$

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- The relative exposure  $W_{xt}^j = \frac{E^j_{xt}}{E_{xt}}$  is linked to the proportion of individual of age  $x$  in risk class  $j$ .
- Evolution of these quantities are determined by the **population dynamics** and can vary a lot depending on the age  $x$  and time  $t$ .

*How changes in the socioeconomic composition of the population affect aggregated indicators? Could we miss a cause-of-death reduction in presence of heterogeneity?*

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- ▶ **Two datasets:**
    - 1981-2007: Department of Applied Health Research, UCL.
    - 2001-2015: Office for National Statistics, UK .
  - ▶ English cause-specific number of deaths and mid-year population estimates per socioeconomic circumstances, age and gender.
- 

Socioeconomic circumstances are measured by the **Index of multiple deprivation (IMD)**, based on the postcode of individuals.

- ▶ Small areas (LSOA) are ranked based on seven broad criteria: income, employment, health, education, barriers to housing and services, living environment and crime.
- ▶ This ranking permits to divide the population in **5 quintiles** with about same number of individuals in each quintile.

# Life expectancy

Figure: Evolution of period life expectancy at age 65



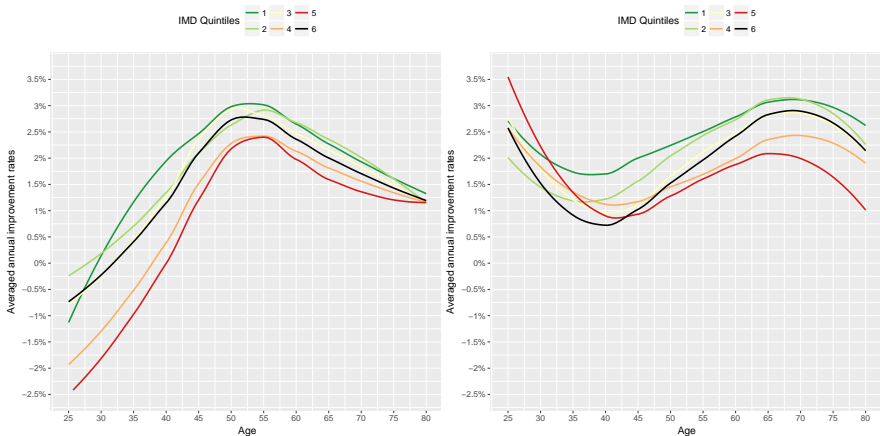
(a) Females

(b) Males

- Increase in gap:  $2.2 \Rightarrow 4.2$  years (females),  $2.9 \Rightarrow 3.9$  (males).

# Mortality by deprivation

Figure: Males average annual mortality improvement rates by age



(a) 1981-1995

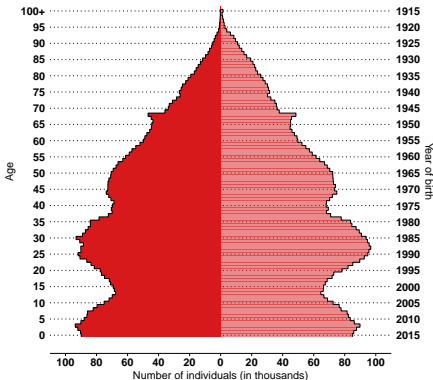
(b) 2001-2015

- 2001-2015: widening of mortality improvement rates gap above 60.

# Population composition, 2015

## Age-pyramids by IMD quintile, 2015

Type ■ Males ■ Females

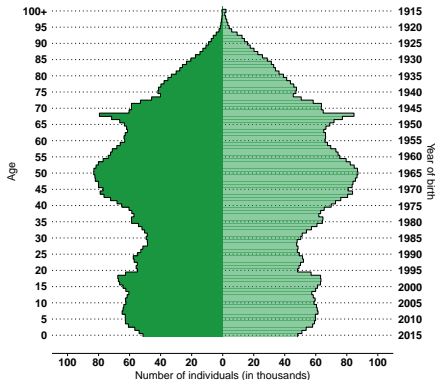


(a) Most deprived quintile (\$)

Median age: 33y

- Baby-boom cohort less deprived than younger/older cohorts.

Type ■ Males ■ Females

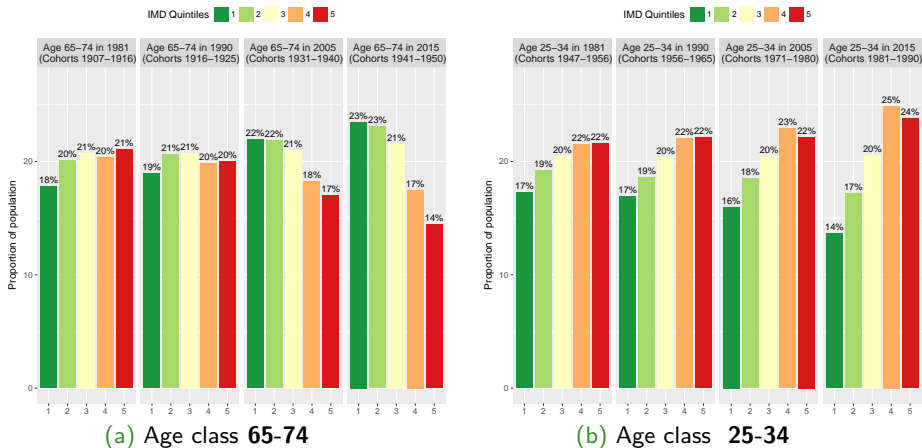


(b) Least deprived quintile (\$\$\$\$\$)

Median age: 44.2y

# Changes in the population composition

Figure: Composition of males age classes in years **1981, 1990, 2005, 2015**.



- ▶ Decrease of deprivation over time for older age classes.
- ▶ Increase of deprivation for younger age classes.

# Heterogeneous population dynamics

- ▶ Simple age-structured population dynamics framework to illustrate different impacts of heterogeneity on the aggregated mortality.
- ▶ **Deterministic** evolution of each subgroup is described by a McKendrick (1926) -Von Foerster (1959).

- 
- ▶ Equation for each gender  $\epsilon = m$  or  $f$  and subgroup:

- Aging law:

$$(\partial_a + \partial_t)g_j^\epsilon(a, t) = -\mu_j^\epsilon(a, t)g_j^\epsilon(a, t)$$

- Birth law:

$$g_j^\epsilon(0, t) = \int_0^{a^\dagger} p^\epsilon g_j^f(a, t) b_j(a, t) da$$

- Initial Pyramid:

$$g_j^\epsilon(a, 0)$$



# Aggregated population

▶ Aggregated population:

- $g^\epsilon(a, t) = \sum_{j=1}^p g_j^\epsilon(a, t)$
- Aging law:  $(\partial_a + \partial_t)g^\epsilon(a, t) = -d^\epsilon(a, t)g^\epsilon(a, t)$

▶ Aggregated death rate:

- Weighted sum of the subpopulations death rates:

$$d^\epsilon(a, t) = \sum_j w_j^\epsilon(a, t) \mu_j^\epsilon(a, t), \quad w_j^\epsilon(a, t) = \frac{g_j^\epsilon(a, t)}{g^\epsilon(a, t)} \quad (1)$$

- $d$  depends non-linearly on the population inputs:  $g_j^0$ ,  $\mu_j$ , and  $b_j$ .

▶ Even with time-independent rates  $\mu_j^\epsilon(a, \mathbf{x})$

⇒ the aggregate death rate  $d^\epsilon(a, \mathbf{t})$  depends on time, due to changes of composition of the heterogeneous population.

- ▶ **Two applications**

- 1 Impact of the **age-pyramid heterogeneity**.

- ↳ Compare order of magnitude of mortality changes induced by compositional changes to constant mortality improvements.

- 2 **Cause specific mortality reduction vs “reverse” cohort effect**.

- ↳ Compensation of cause-specific mortality reduction due to adverse compositional changes in some cohorts.

- 
- ▶ We consider a synthetic population composed of the most and least deprived IMD quintile (illustrative purpose).

# Three demographic scenarios

## A Scenario A: Population evolution with time-invariant mortality

Compositional changes isolated  $\Rightarrow$  death rates in each subpopulation do **not** depend on time:

$$d^e(a, t) = \mu_1^e(a)w_1^e(a, t) + \mu_5^e(a)w_5^e(a, t).$$

## B Scenario B: Population evolution with mortality improvement

Constant annual mortality improvement rates of  $r = 0.5\%$ :

$$d^e(a, t) = \mu_1^e(a)(1 - r)^t w_1^e(a, t) + \mu_5^e(a)(1 - r)^t w_5^e(a, t).$$

## C Scenario C: Mortality improvements without composition changes

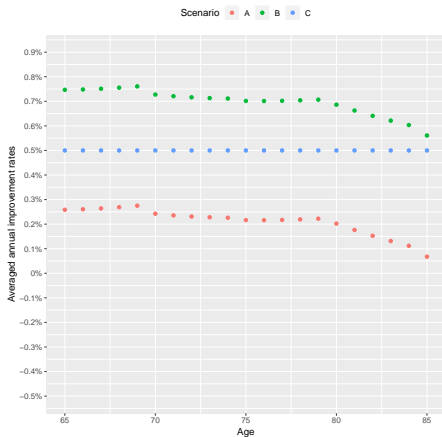
$$d^e(a, t) = \mu_1^e(a)(1 - r)^t w_1^e(a) + \mu_5^e(a)(1 - r)^t w_5^e(a).$$

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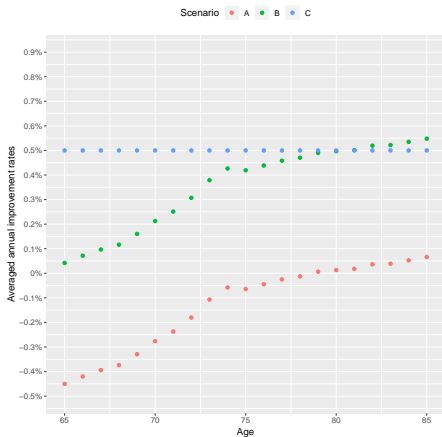
Mortality rates and initial age-pyramid fitted to the data for year 1981 and 2015.

# Mortality improvement rates (males)

Figure: Average annual mortality improvement rates over years 0-30



(a) 1981 Inputs



(b) 2015 Inputs

- ▶ 1981 initial population: positive contribution of changes in the composition of the 65+ age class.
- ▶ 2015 initial population: negative contribution of composition changes  
⇒ might offset future mortality improvement rates.
- ▶ Order of magnitude of age-pyramid heterogeneity impact in annual mortality improvement rates of 0.2%- 0.5%.

**Example** of scenario illustrating impact of changes of demographic rates:

- ▶ Cause specific reduction of mortality vs “reverse” cohort effect (adverse composition changes quantified by changes in birth patterns).

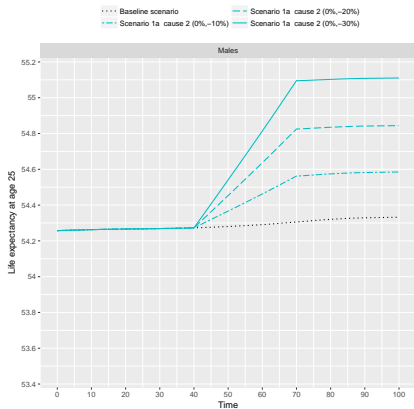
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▶ **Baseline (“neutral”) scenario:**

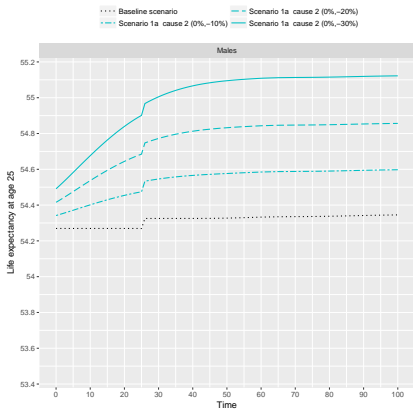
- **Death rates:** time-invariant death rates in each population (year 2015).
- **Birth rates** same birth rates in each population (England, 2015).
- **Initial pyramid** our aim is to limit influence of initial pyramids evolution: ~~Same initial pyramid~~ ⇒ Stable pyramids.

# Scenario 1a: cause of death reduction

Figure: Reduction of mortality rates from cardiovascular disease (CVD)



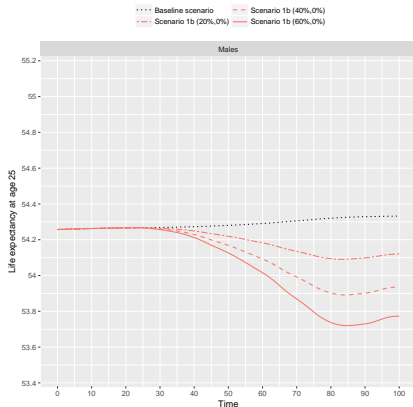
(a) Male period life expectancy at 25



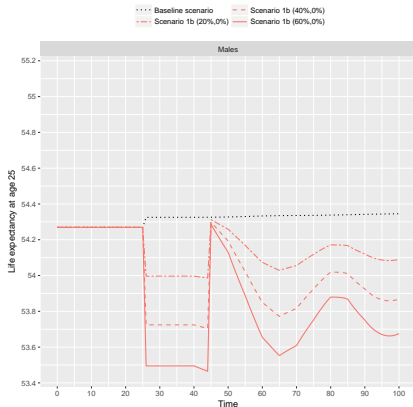
(b) Male cohort life expectancy at 25

- Reduction of CoD mortality from CVD (10, 20 and 30%) over a period of 30 years, starting at  $t = 40$ .

# Scenario 1b: "Reverse" Cohort effect



(a) Male **period** life expectancy at 25



(b) Male **cohort** life expectancy at 25

- ▶ **Reverse cohort effect**: increase of birth rates in most deprived subgroup over period  $[0, 20]$ .
- ▶ ↗ 60%  $\Rightarrow$  cohorts composed of 63% of most deprived subgroup.



## Scenario 2: combined CoD reduction and cohort effect

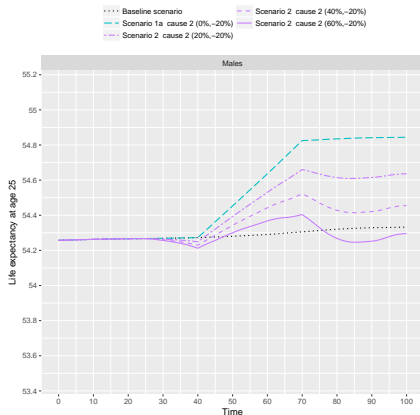


Figure: Male period life expectancy at 25

When the population heterogeneity is not taken into account, *cause-of-death mortality reduction* could be *compensated for and/or misinterpreted* depending on the *population composition evolution*.

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## The consistency issue

- ▶ Population divided in  $p$  risk classes.  
Example: national population divided in socioeconomic or geographical subgroups...
- ▶ Many forecasts are made **simultaneously at the national level and at the subgroup level**.
- ▶ **Issue** Are forecasts consistent?

$$(Aggregation\ relation) \quad \mu_{xt} = \sum_{j=1}^p \mu_{xt}^j W_{xt}^j \quad ?$$

- ▶ Problem when comparing policies, question robustness of forecasts.

- ▶ **Relative** approach (e.g. Jarner and Kryger (2011), Cairns et al. (2011), Villegas and Haberman (2014), Li et al. (2015))
  - Method: First forecast of the national population and *then* mortality differentials  $\mu_{xt}^j - \mu_{xt}$ .
  - Advantages: national mortality data available for longer period, more precise age-groups, estimations less volatile.
  - Drawback: **No consistency!**

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- ▶ **Bottom-up** approach:
  - Method: First forecast subnational mortality and *then* pose 
$$\mu_{xt} = \sum_{j=1}^p \mu_{xt}^j W_{xt}^j.$$
  - Advantages: consistent forecasts.
  - Drawbacks: poor/missing data quality, small datasets.

## Existing approaches

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  - Advantages: consistent forecasts.
  - Drawbacks: poor/missing data quality, small datasets.
- ▶ **Optimal combination** : Combines the advantages of the two approaches.

- ▶ Forecast reconciliation method used in economics, operation research and recently for mortality rates (Shang and Hyndman (2017), Shang and Haberman (2017)).

- ▶ Vector notations:  $\beta_n(x) = \begin{pmatrix} \mu_n^1 \\ \vdots \\ \mu_n^p \end{pmatrix} (x)$ ,  $Y_t(x) = \begin{pmatrix} \mu_t \\ \beta_t \end{pmatrix} (x)$ .

- ▶ Consistency equation:

$$Y_n = W_n \beta_n, \quad W_n = \begin{pmatrix} W_n^1 & W_n^2 & \dots & W_n^p \\ 1 & 0 & \dots & 0 \\ \vdots & \ddots & & 0 \\ 0 & \dots & & 1 \end{pmatrix}.$$

## Method:

- 1 First forecast mortality rates  $(Y_n)_{n=t..T}$  using any method:

$$Y_n \neq W_n \beta_n.$$

- 2 Revise the subpopulations forecasts  $\beta_n = {}^t(\hat{\mu}_n^1, \dots, \hat{\mu}_n^p)$  so that the forecast  $\tilde{Y}_n = W_n \tilde{\beta}_n$  obtained by bottom-up is as close as possible as the initial forecast  $Y$ .

$$Y_n = W_n \tilde{\beta}_n + \epsilon_n.$$

- 3 Replace  $Y$  by the consistent forecast  $\tilde{Y}_n = W_n \tilde{\beta}_n$ .



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**How can the relative exposures  $W_n^j(x) = \frac{E_n^j(x)}{E_n(x)}$  be forecasted?**

## Proposed methods

- ▶ Forecast Exposure to Risk at each age  $x$   $(E_n^j(x))_{n=t..T}$  using independent time series.

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  - ▶ Constant Exposure to risk  $E_{t+h}^j(x) = E_t^j(x - h)$ .
- 

## Research program

- ▶ Population dynamics model provides a natural framework for the projection of relative exposures, using all the age-pyramid information.
- ▶ Adapt the bottom-up and optimal combination method in this context.
- ▶ Challenge:

$$Y_n = W_n((\beta_s)_{s=t..n})\beta_n,$$

**Population dynamics framework**  $\Rightarrow$  study of **interactions between changes in socioeconomic composition and mortality indicators**:

- ▶ Evidence from data: future evolution of the population socioeconomic composition could have a different impact on mortality than 30y ago.
- ▶ Cause-of-death mortality changes can be compensated and/or misinterpreted in the presence of heterogeneity.

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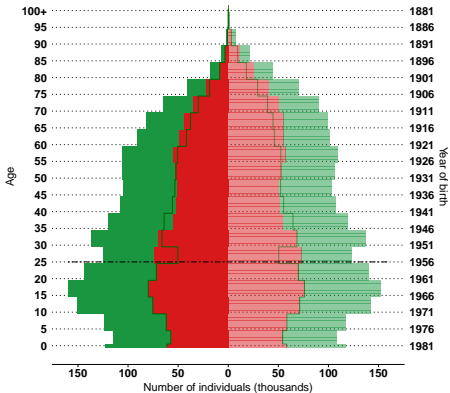
## Perspectives

- ▶ Take into account internal migrations:  $\Rightarrow$  **non-linear mortality models**.
- ▶ Stochastic modelling
  - ↳ **R package IBMPopSim** in preparation,(with D. Giorgi and V. Lemaire).
- ▶ Consistency of mortality forecasts under different demographic scenarios.

Thank you for you attention!

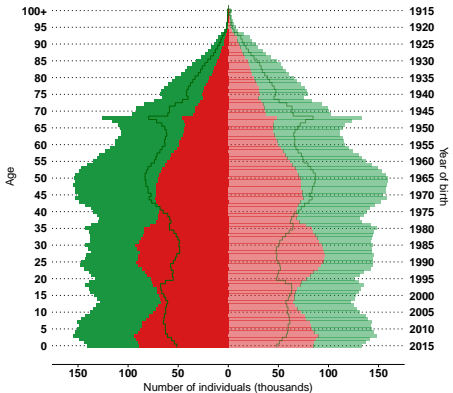
# Initial age-pyramids

Type ■ Males ■ Females IMD Quintile ■ 1 ■ 5



(a) 1981 Inputs

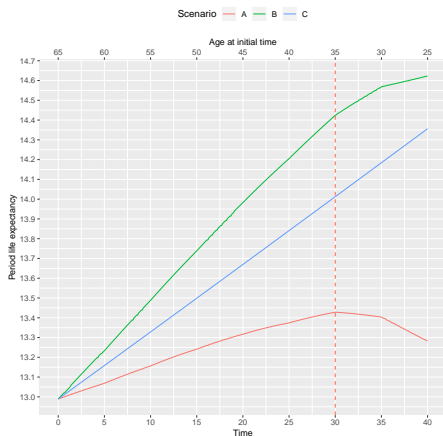
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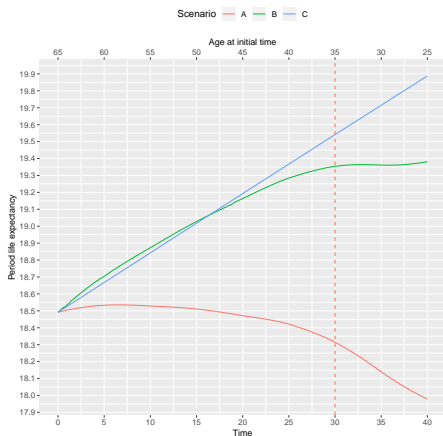
(b) 2015 Inputs

# Period life expectancy

Figure: Evolution of male life expectancy at age 65



(a) 1981 Inputs



(b) 2015 Inputs

- ▶ Life expectancy at  $t = 30$ : surviving individuals initially 35+

# Birth-Death-Swap processes

*Pathwise construction of Birth-Death-Swap systems leading to an averaging result in presence of two timescales, with N. El Karoui*

- ▶ **Goal:** To study the random evolution of an heterogeneous population including:
    - A time-varying **random environment**.
    - Model changes in the population's composition induced by **interacting** individuals changing characteristics.
- 
- ▶ Main contributions:
    - General mathematical framework and tools to study such processes.
    - Study of the aggregated “macro” dynamic produced by such models.
  - ▶ **Averaging result:** aggregated mortality rates are approximated by “averaged” rates **depending non-trivially on the number of individuals in the population**.