

**Explaining Mortality Dynamics:  
The Role of Macroeconomic Fluctuations and  
Cause of Death Trends**

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# Summary

- Impact of macroeconomic fluctuations and cause of death trends on mortality dynamics in the Lee-Carter mortality forecasting model
- Key results:
  1. Periods can be identified in which the Lee-Carter mortality index  $k_t$  correlates significantly with macroeconomic fluctuations
  2. A few causes of death account for a large fraction of the variations in the Lee-Carter mortality index  $k_t$
  3. Most cause-specific mortality rates show pronounced trends
    - Trends change the composition of deaths
    - Alter how total mortality reacts to external factors

# Literature review

- Combine two domains of the demographic literature

## (1) Stochastic Mortality Modeling

- Lee-Carter (1992): universal method, has been applied to various countries
- Brouhns et al. (2002) variant
- Two stages:  $\ln(m_{x,t}) = a_x + b_x \cdot k_t + \varepsilon_{x,t}$
- Mortality index  $k_t$ : Just an unobserved latent variable?

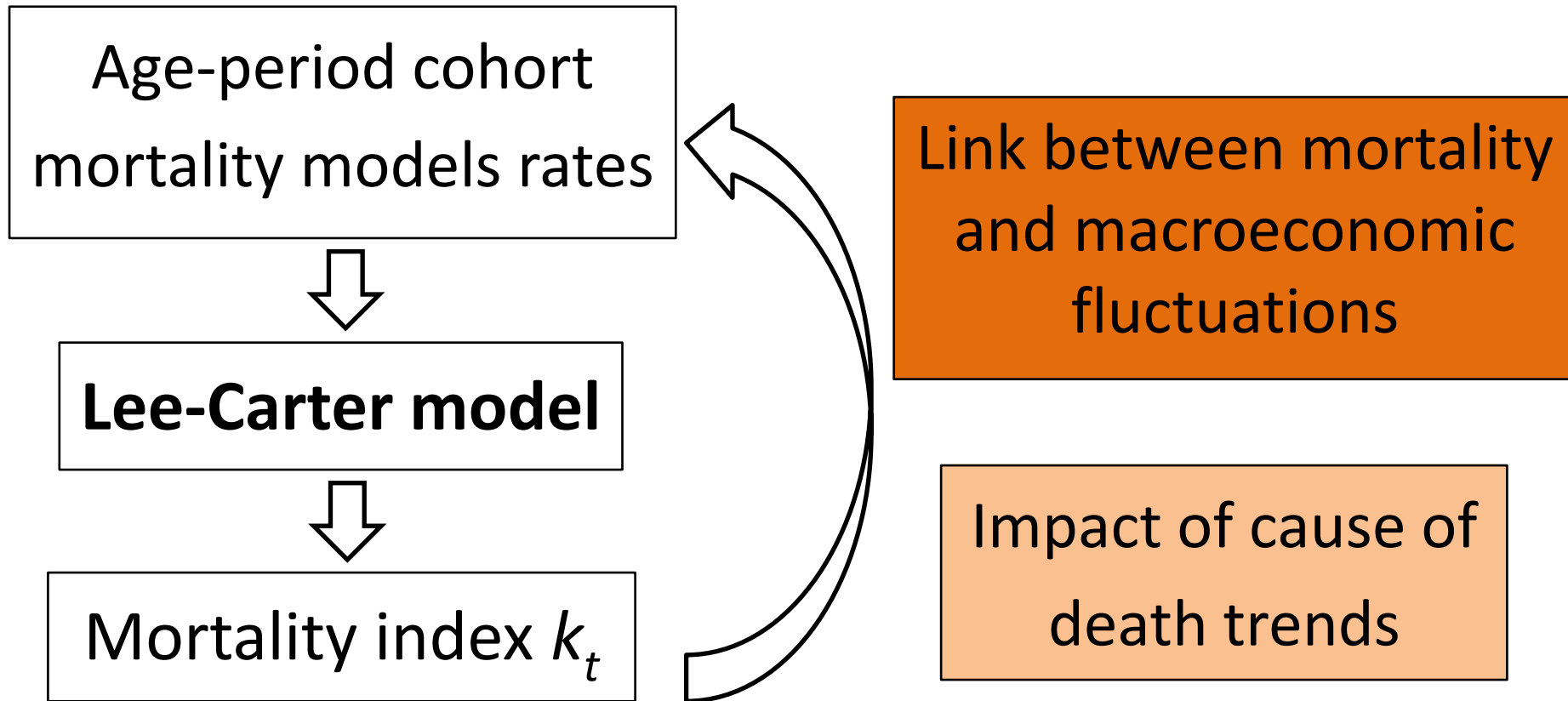
# Literature review

## (2) Mortality and Macroeconomic Fluctuations

- Ruhm (2000): Mortality rates in the USA fluctuate procyclically over the period 1972–1991
- Similar patterns observed for:
  - USA, Spain, and Japan (Tapia Granados, 2005a/b, 2008)
  - Germany (Neumayer, 2004, Hanewald, 2010)
  - Sweden (Tapia Granados and Ionides, 2008)
  - 23 OECD countries, 1960–1997 (Gerdtham and Ruhm, 2006)
- Procyclical deaths: motor vehicle crashes, CVD, liver ailments, influenza/pneumonia
- Acyclical/countercyclical: cancer, suicide, diabetes mellitus

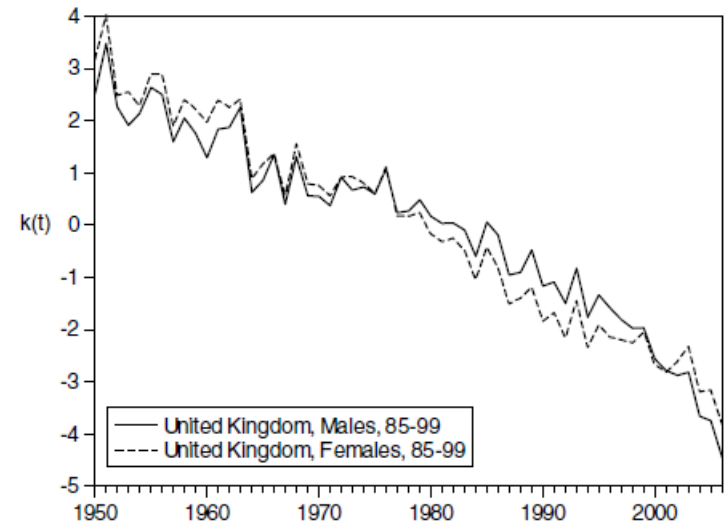


# Central idea



# Data

- Annual death rates for six OECD countries, 1950-2006
  - Australia, Canada, Japan, Netherlands, UK, USA
- Lee-Carter mortality index  $k_t$ 
  - Brouhns et al. (2002) variant
  - Males/females, ages 0-99 and four subgroups
- Cause-specific mortality rates
- Real GDP growth rates
- Unemployment rate changes



# Correlation analysis

- Example: Australia
- $\text{Cor}(\text{Real GDP growth}_t, \Delta k_{t, \text{Males}})$ , 1950-2006

Age Group	Males	Females
25–44	0.228 <sup>+</sup>	0.259 <sup>+</sup>
45–64	0.338 <sup>*</sup>	0.182
65–84	0.350 <sup>**</sup>	0.250 <sup>+</sup>
85–99	0.272 <sup>*</sup>	0.265 <sup>*</sup>
0–99	0.365 <sup>**</sup>	0.281 <sup>*</sup>

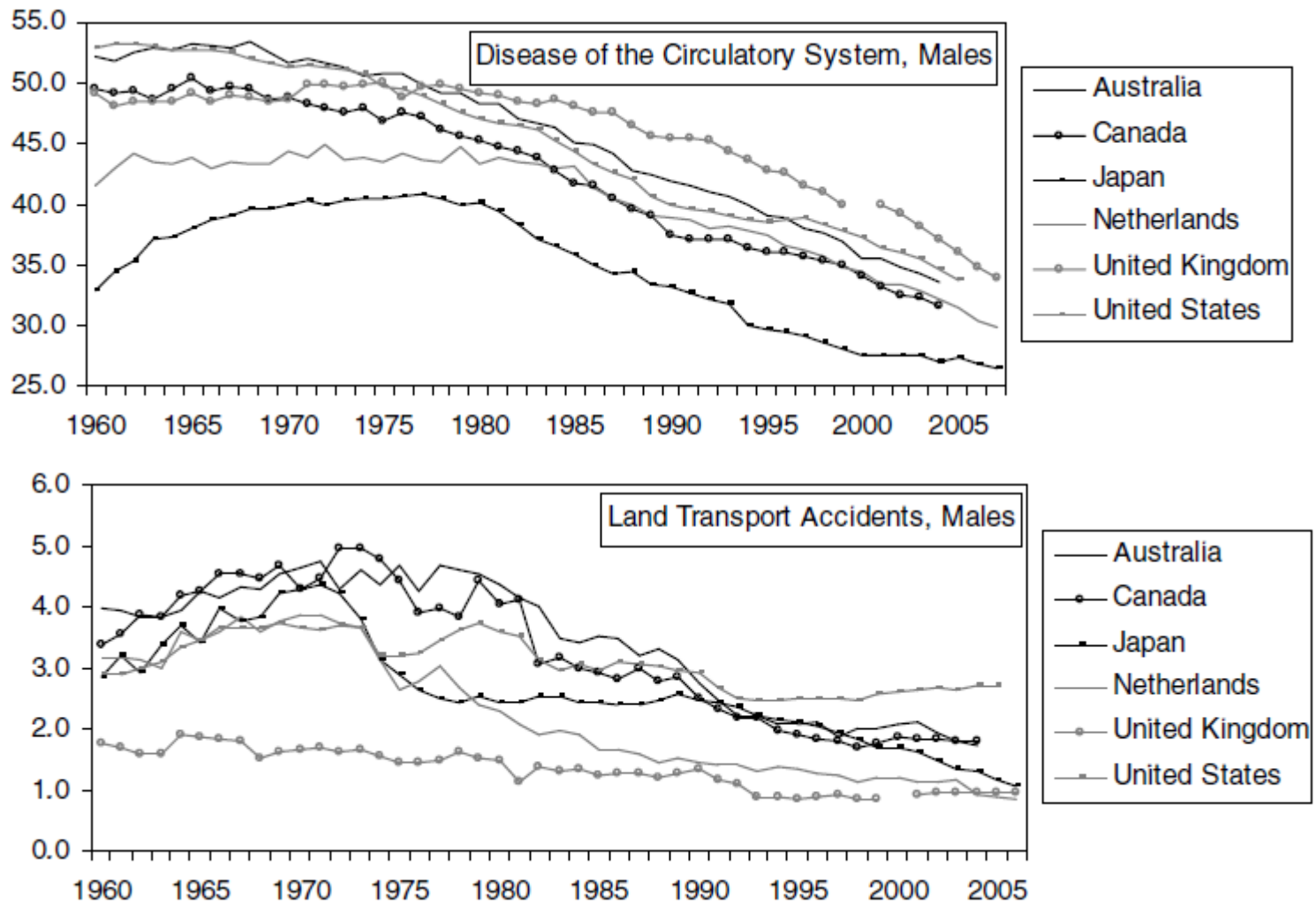
<sup>+</sup>  $p < 0.1$ , <sup>\*</sup>  $p < 0.05$ , <sup>\*\*</sup>  $p < 0.01$



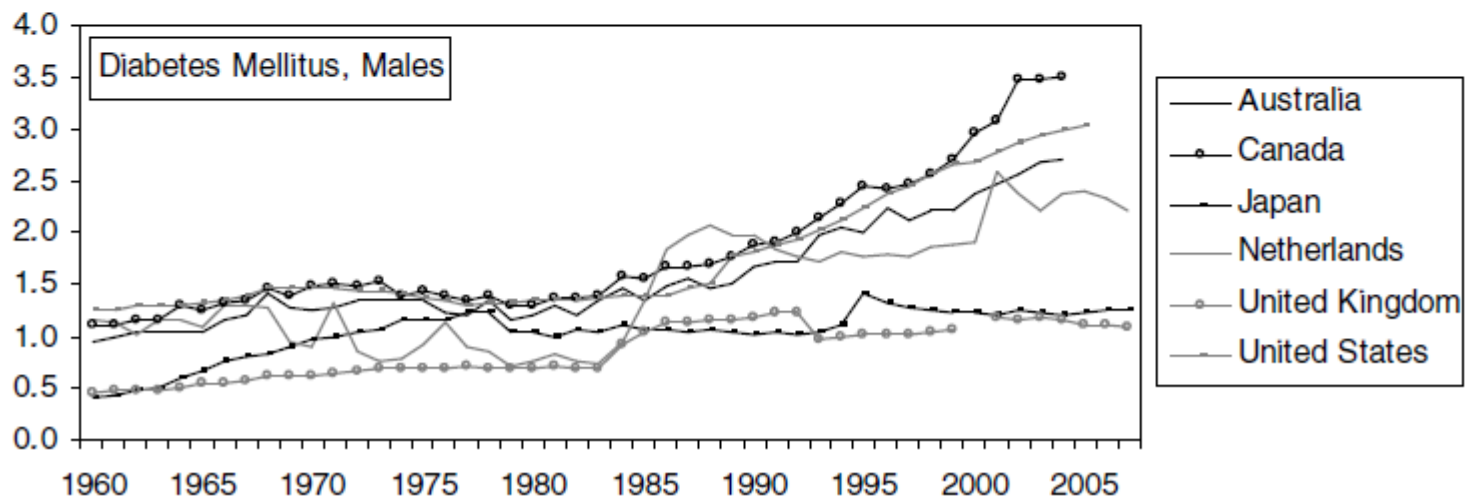
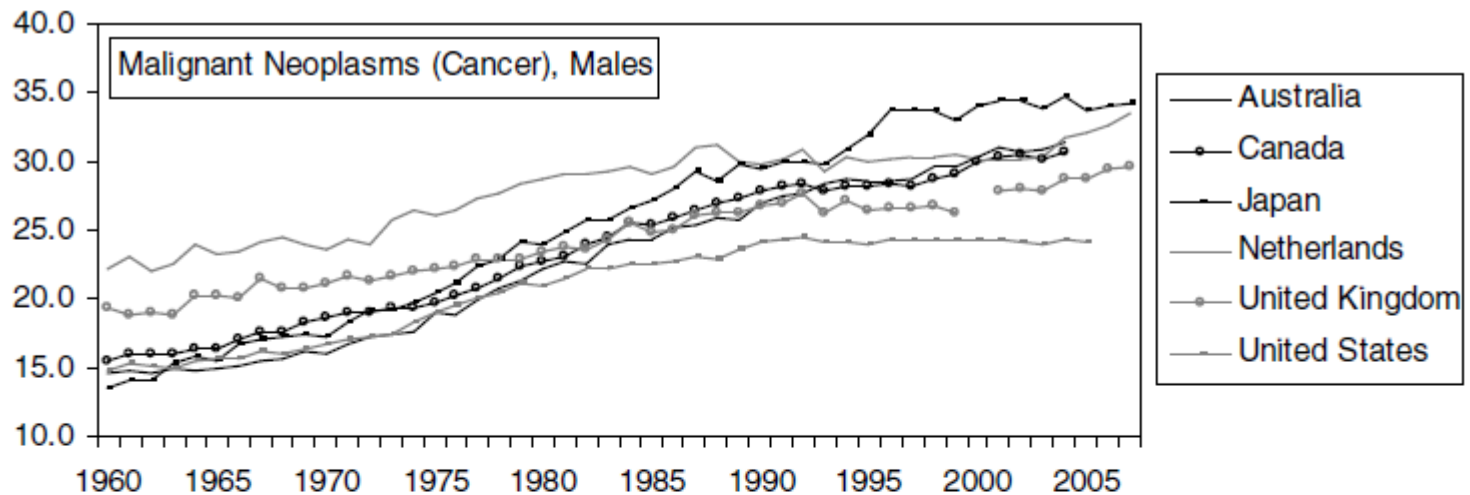
# Correlation analysis

- Entire sample period (1950-2006):
  - Significant procyclical correlations observed in AU, CA, NL, UK, US
  - Mostly working ages, but also higher ages
  - JP: Significant countercyclical correlations for males and females aged 25-44
  - Mortality reacts without lag
- 1950-1979 vs. 1980-2006:
  - Structural change observed in all six countries

# Trends in cause-specific mortality rates



# Trends in cause-specific mortality rates



# Modeling $\Delta k_t$ on cause-specific mortality rates and macroeconomic fluctuations

- Example: Australia
- Dependent variable:  $\Delta k_t$ , age 0–99, 1960-2006

	Males	Females
Real GDP	-15.962	-0.524
Cancer	9.474	14.370
Diabetes	-4.149	5.903
Circulatory	60.583 ***	52.536 ***
Influenza	1.525 *	2.836 ***
Liver disease	-0.682	7.913 **
Transport accidents	7.917 *	0.333
Suicide	1.752	2.507
Constant	0.679	-0.352
Adj. R <sup>2</sup>	0.849	0.819
F-stat.	24.509 ***	23.396 ***

# Modeling $\Delta k_t$ on cause-specific mortality rates and macroeconomic fluctuations

- A few causes of death account for a large fraction of the variations in the Lee-Carter mortality index  $k_t$ 
  - diseases of the circulatory system
  - influenza/pneumonia
  - transport accidents (before 1980s)
  - diabetes mellitus
- Period effects in age-period cohort mortality models can be successfully modelled on underlying causal variables

# Cointegration analysis

- Engle-Granger approach; bivariate/multivariate
- For some countries and age groups: significant cointegration relations between
  - $k_t$  and macroeconomic fluctuations
  - $k_t$  and several cause-specific mortality rates
- Cannot reject the hypothesis that there is **no** causal relation
- But, results are too diverse to draw general conclusions for all countries and age groups

# Summary and conclusions

- Periods can be identified in which the Lee-Carter mortality index  $k_t$  correlates significantly with macroeconomic fluctuations
  - Implications for life insurers: Hanewald, Post, and Gründl (2010)
- A few causes of death account for a large fraction of the variations in the Lee-Carter mortality index  $k_t$

# Summary and conclusions

- Most cause-specific mortality rates show pronounced trends
  - Trends change the composition of deaths
  - Alter how total mortality reacts to external factors
- No “broad-brush solution” for modeling mortality:
  - Mortality trends differ substantially by age and gender and across countries
  - Require careful separate analysis



Thank you!

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