



Exploring Mortality Trends by Socio-Economic Group

The power of individual-level data

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9 September 2026

Introduction

Introduction

What is Socio-Economic Deprivation?

 Society is not equal!

 Socio-economic deprivation covers things like:

- Access to healthcare
- Education
- Income
- Housing & Living Environment
- ...etc

 Socio-economic differentials capture differences in mortality...

...and mortality trends



Constructing Socio-Economic Indices

SOA Socio-Economic Index (SIS)



Typically, socio-economic information is available at small census geographies:

- Output Areas in the UK (~310 persons)
- Census Tracts in the US (~4,000 persons)



HOWEVER, deaths data is only available at a less granular level:

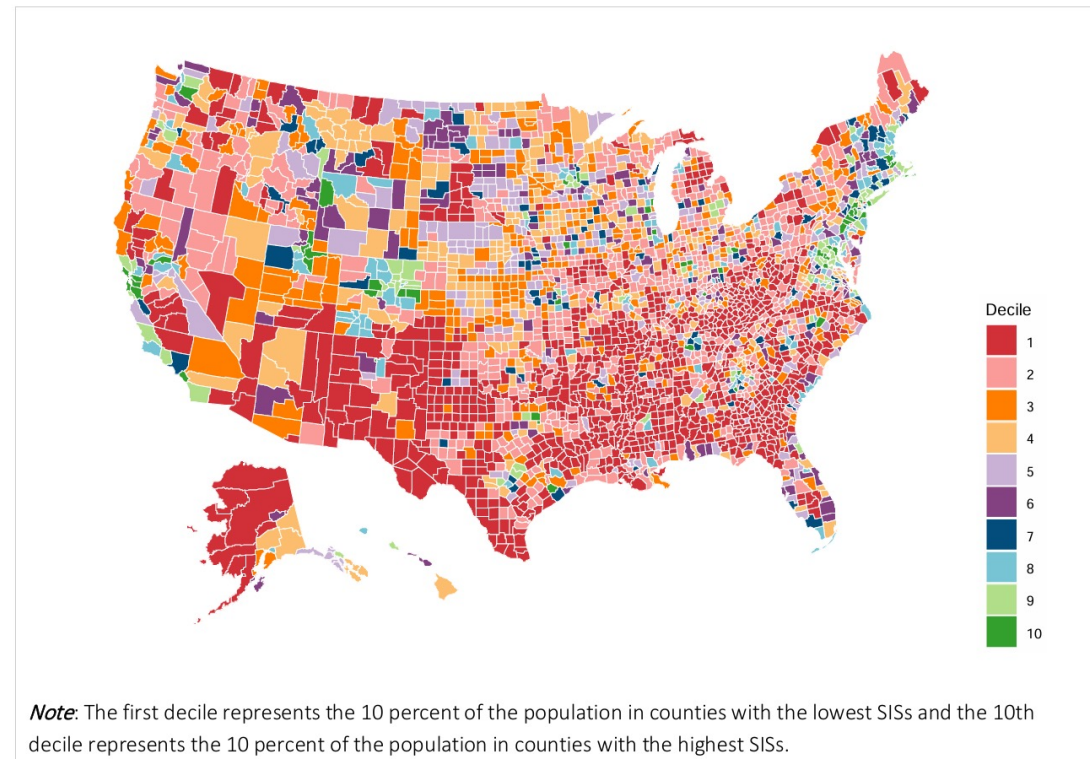
- Lower Super Output Areas (LSOAs) in the UK (~1,500 persons)
- Counties in the US (~105k persons)



Areas can be ranked from least to most deprived.

Figure 6c

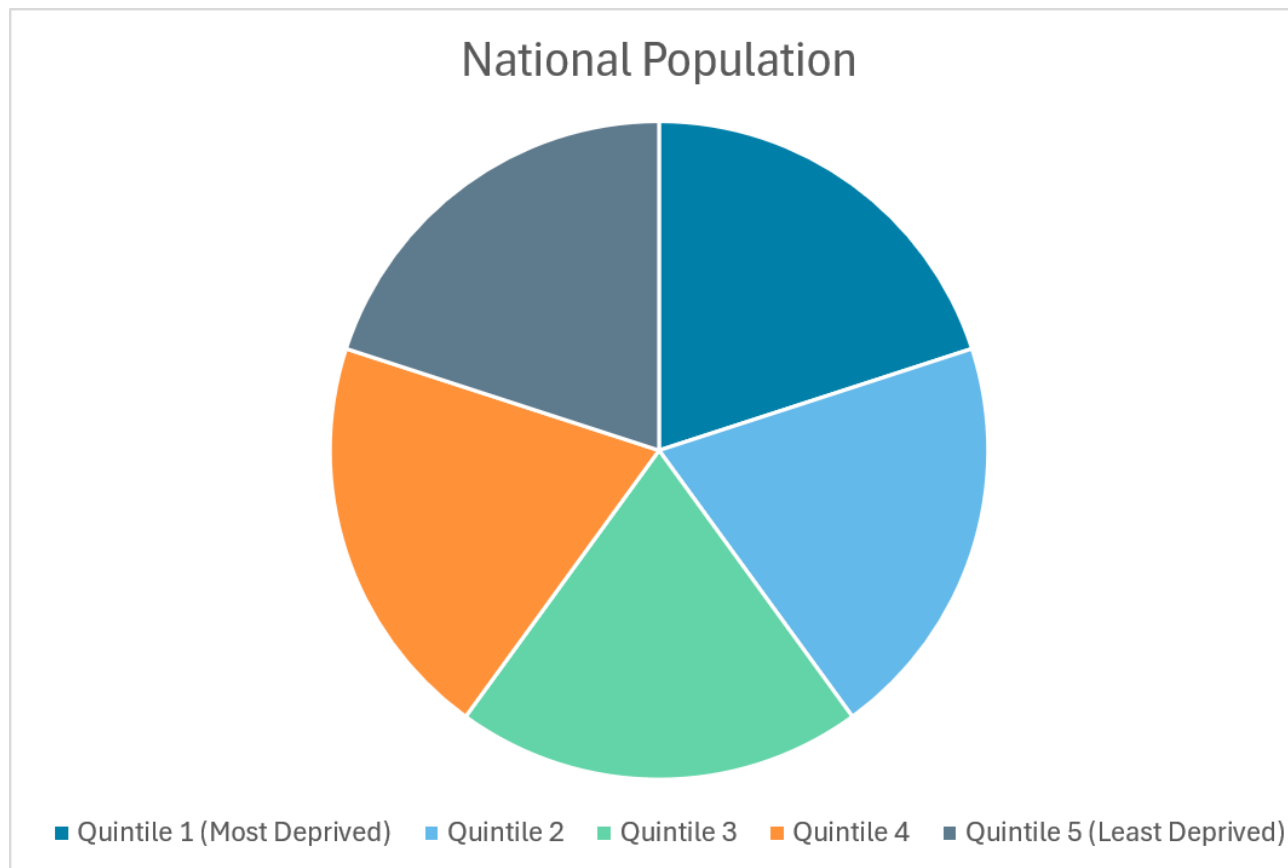
COUNTIES BY SOCIOECONOMIC DECILE (WEIGHTED BY POPULATION), 2015–2019



Availability of mortality data restricts the granularity of the socio-economic groupings

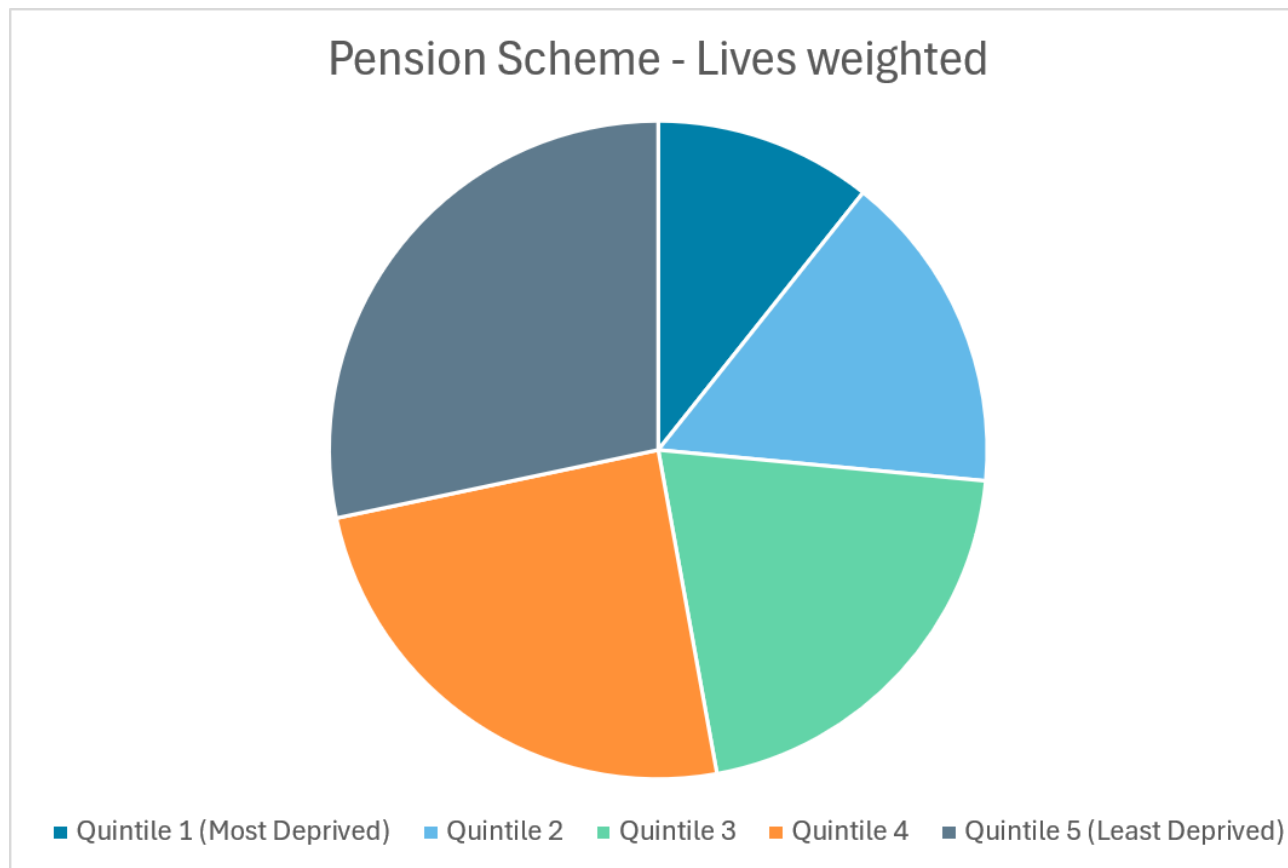
Socio-economic groups (SEG) to assess mortality trends

Typically constructed to divide population into evenly sized buckets



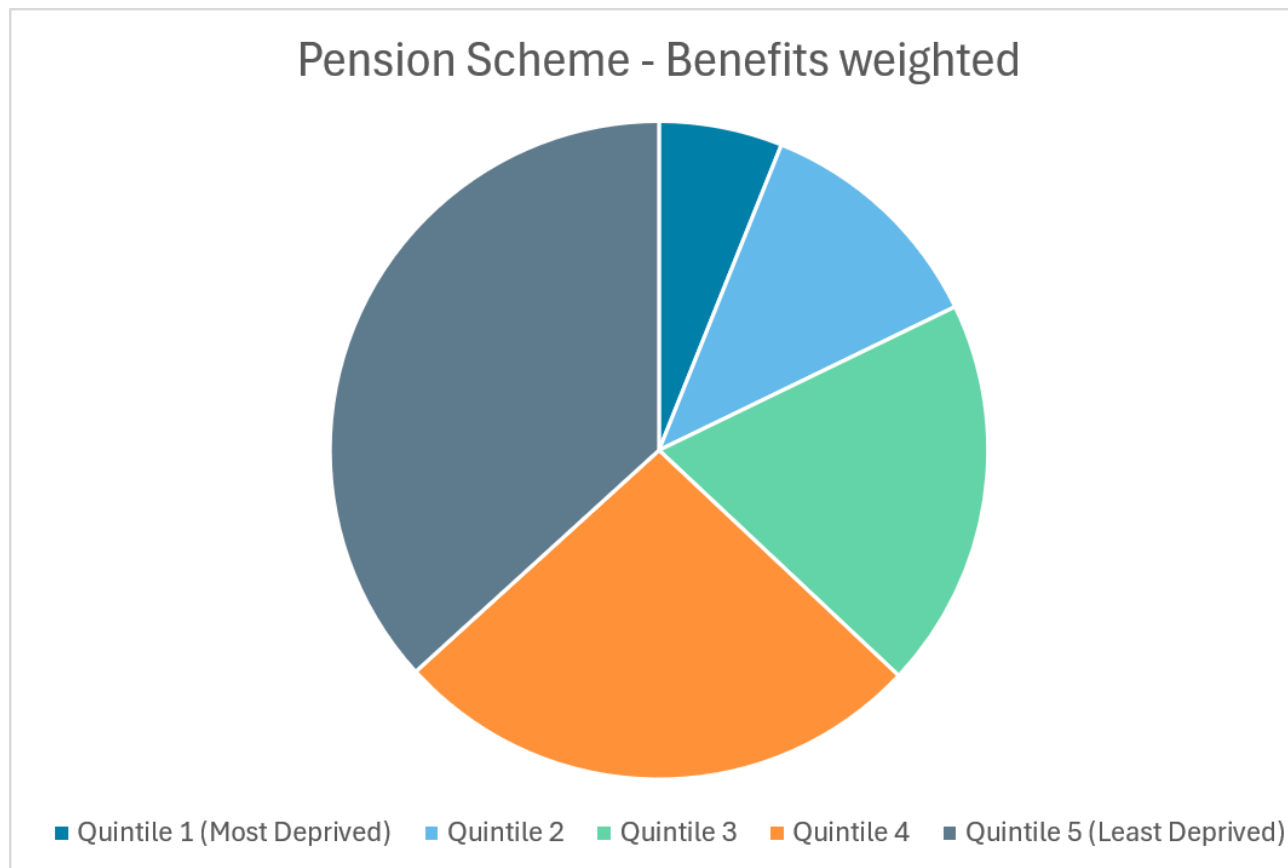
Pension schemes don't look like national population

Typical distribution weighted towards higher SEG



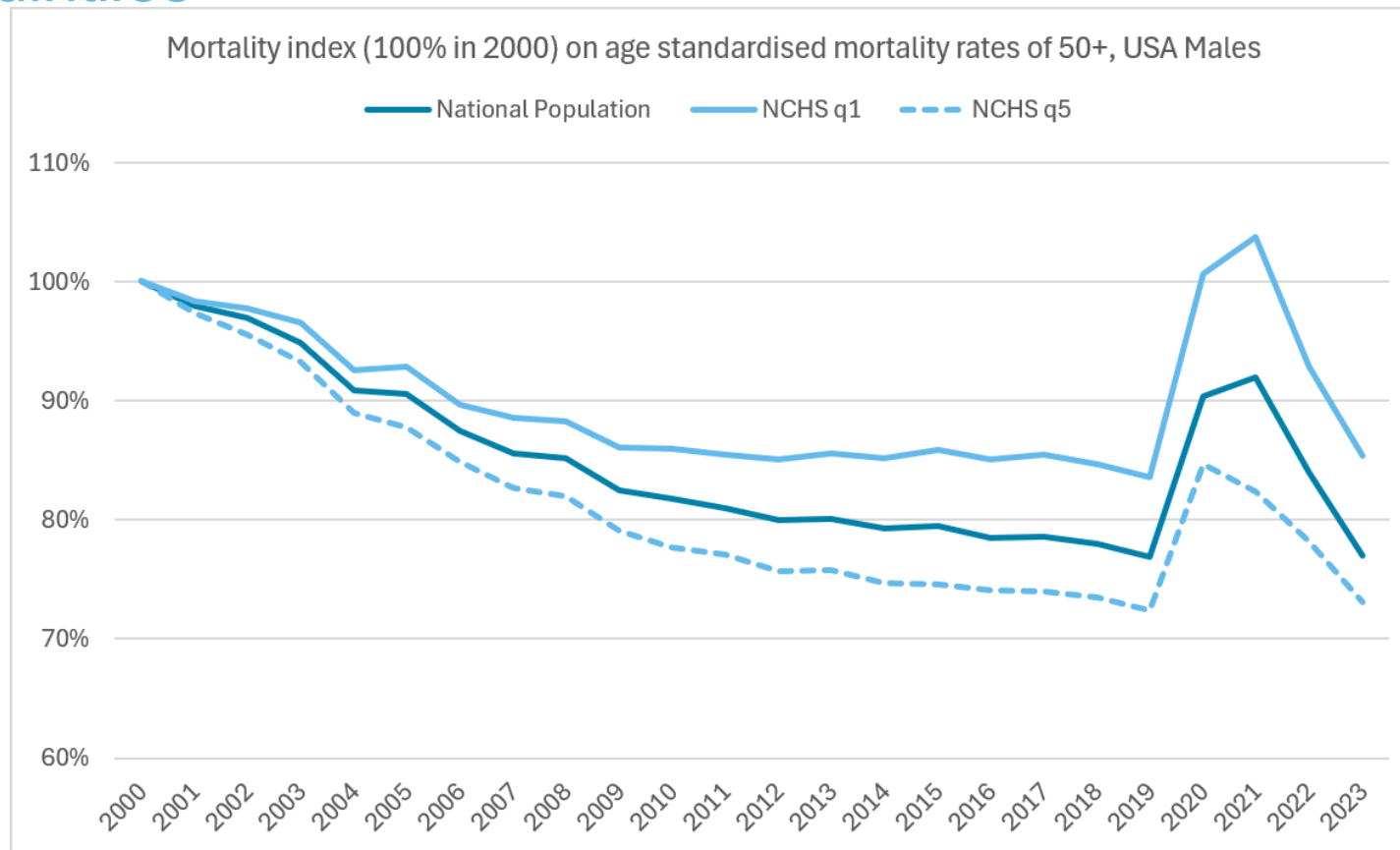
Pension schemes don't look like national population

Higher SEG have higher wealth



How do mortality trends behave between socio-economic groups?

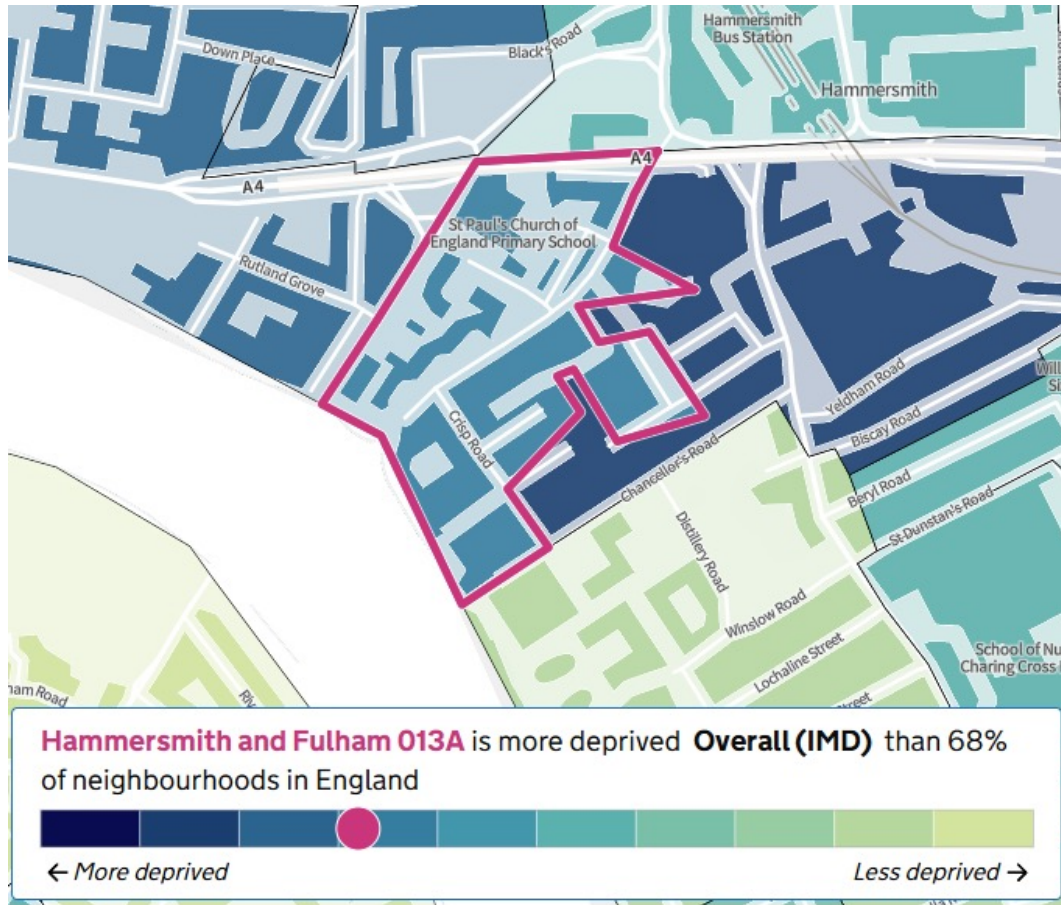
SOA county quintiles



Improvement difference of 0.3% p.a. between quintile 5 and national population over 2000-2019

What do Socio-economic groups tell us about the area?

An example of IMD quintile 2



An example of IMD quintile 2

The issue with grouped data!



The Power of Individual Data

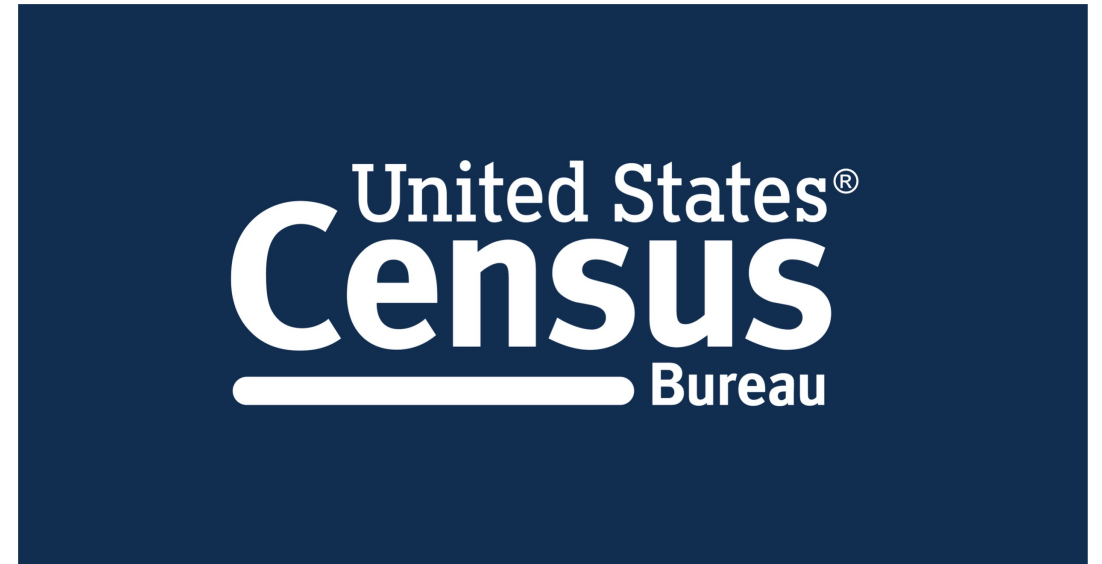
Zooming in on Education

Education is one aspect of many socio-economic indices



Can we do better than county level data?

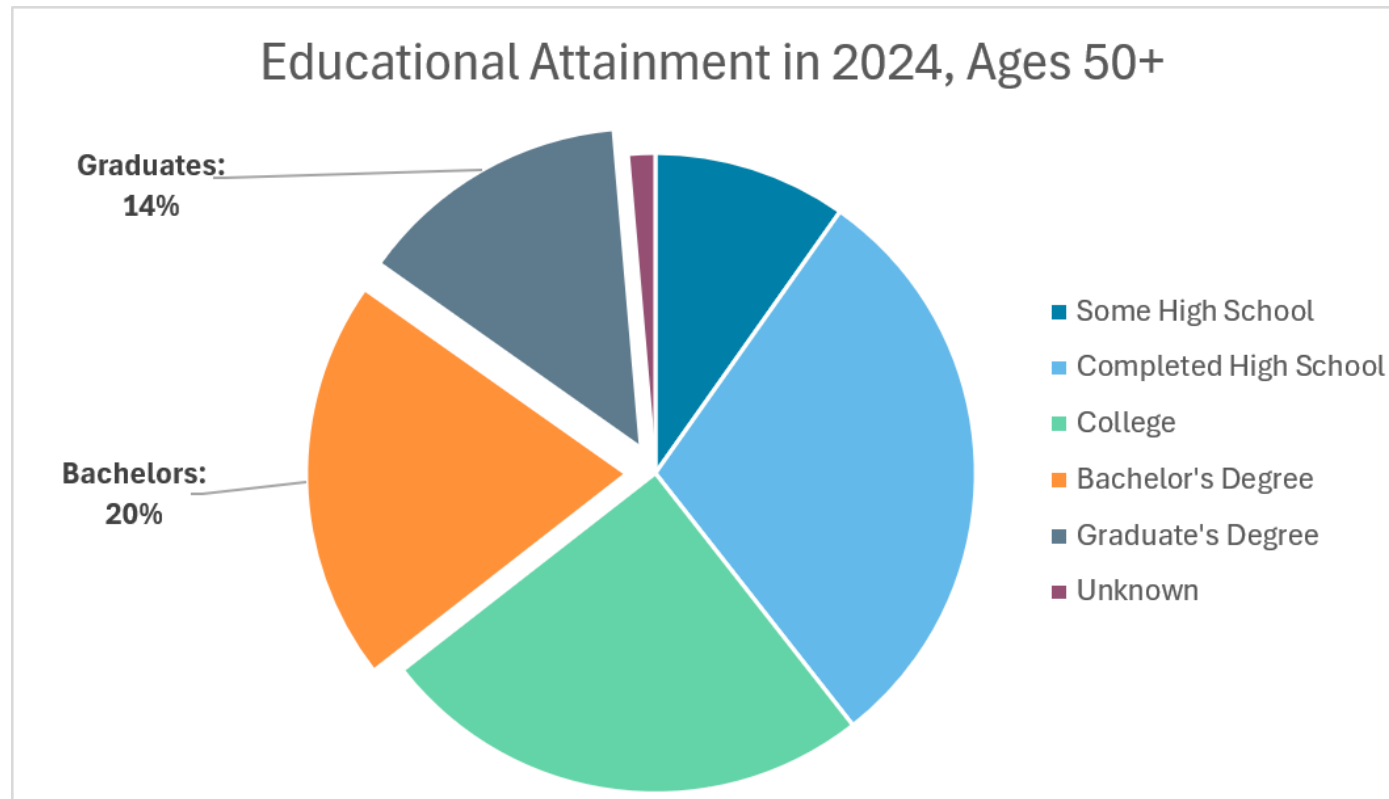
Education data available at individual level in the US



**Annual Social and Economic
Supplements**

Education groupings

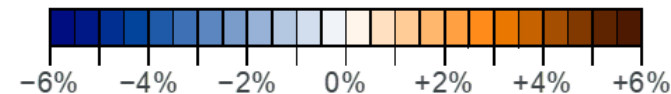
How does the national population split out?



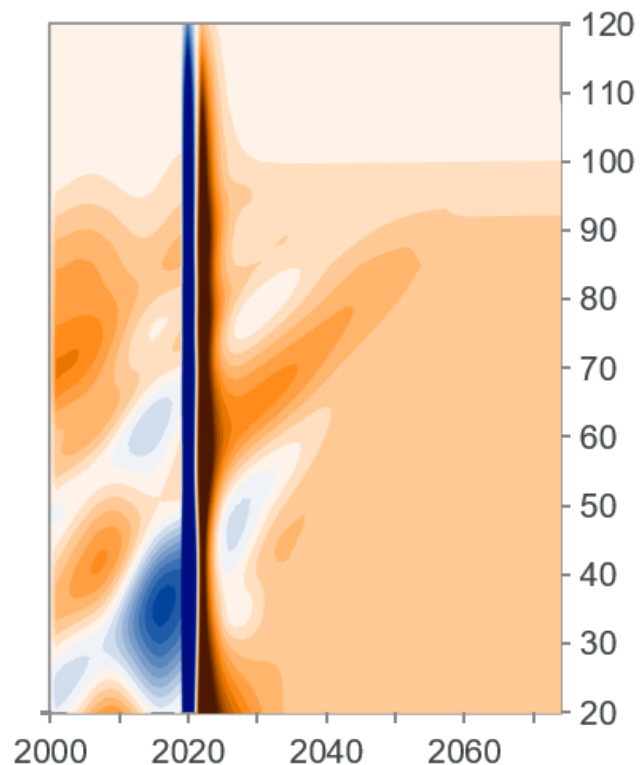
A third of the US population aged 50+ are university educated.

Projecting forward...

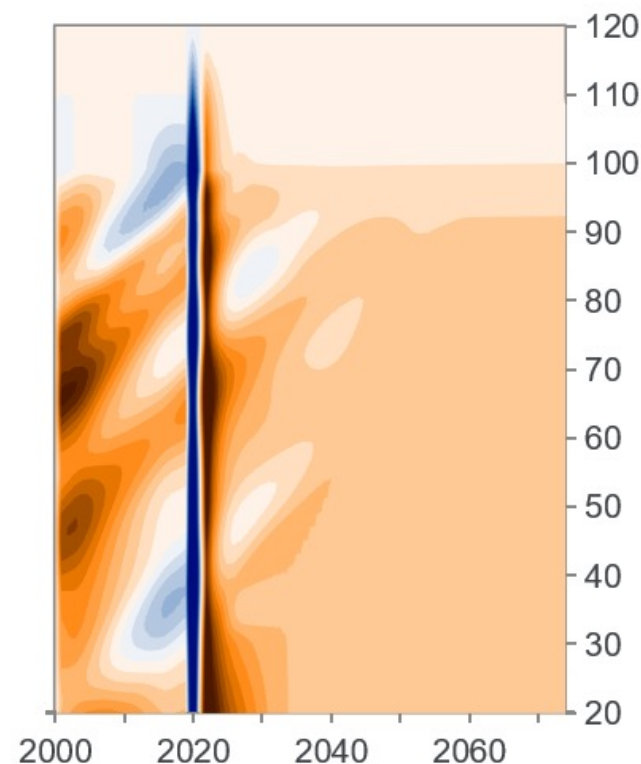
How do improvements compare?



National Population



Bachelors & Graduates

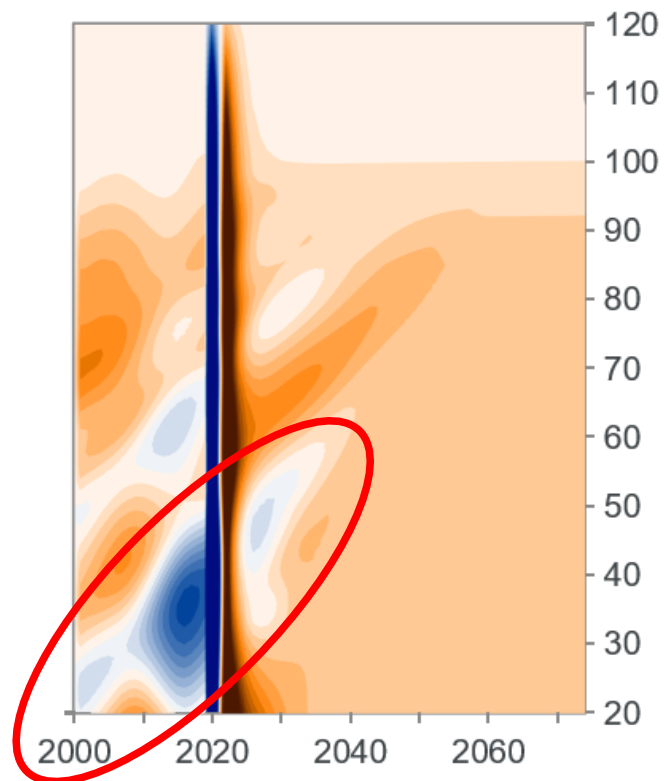


Two different populations

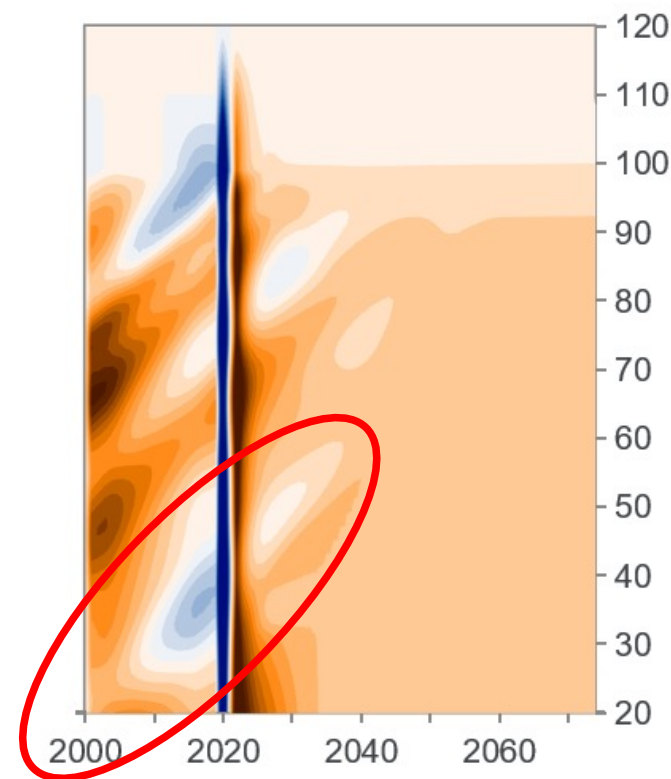
Projecting forward...

Opioid epidemic

National Population



Bachelors & Graduates

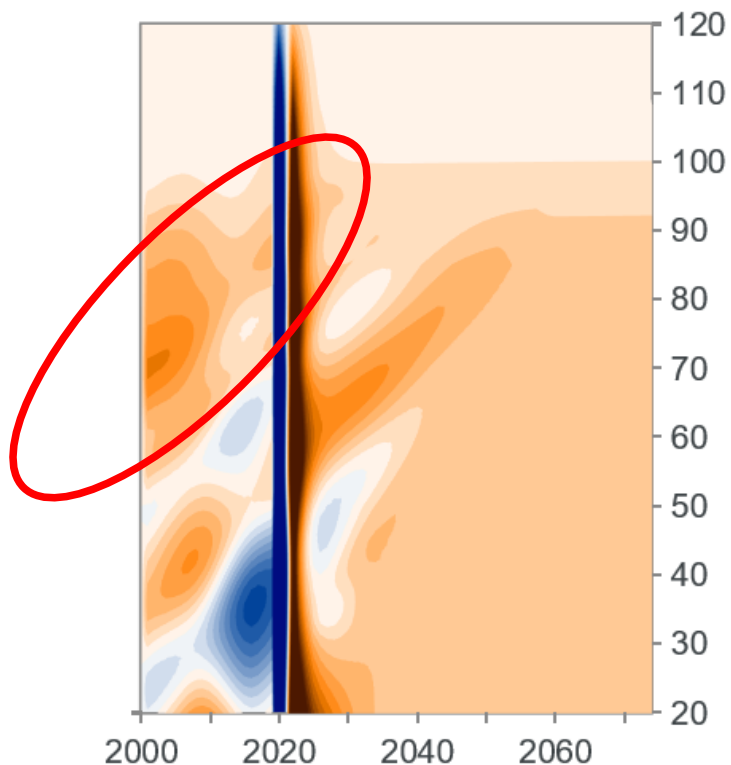


Much smaller impact

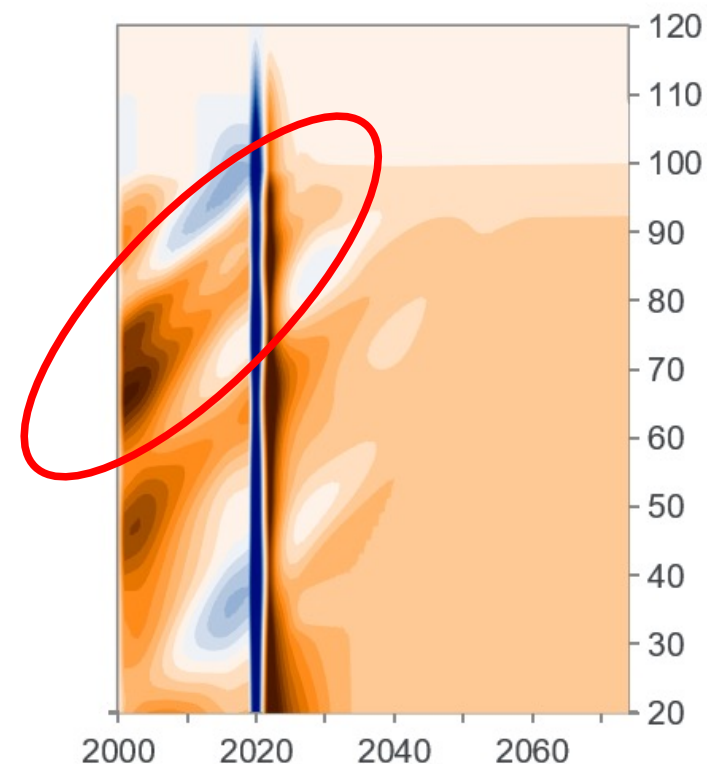
Projecting forward...

Golden cohort

National Population



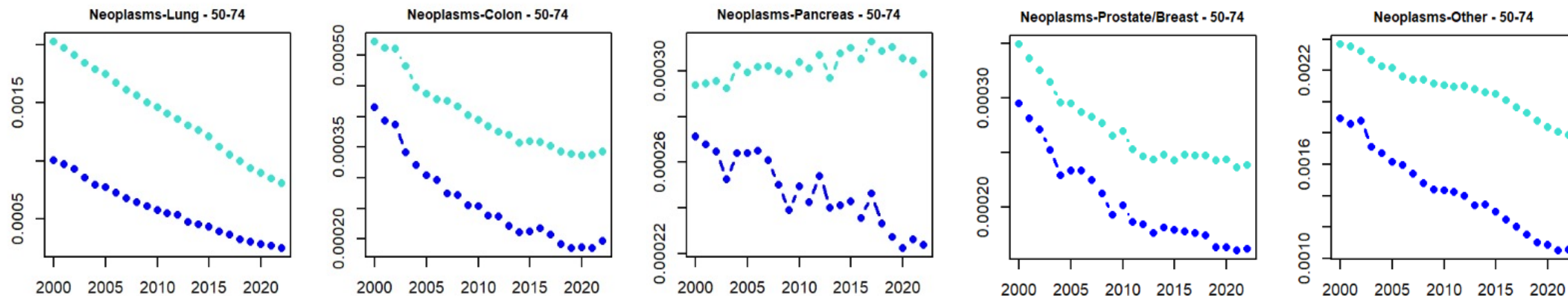
Bachelors & Graduates



Stronger cohort effect

Digging deeper: Cancer trends

Deaths by cause is available

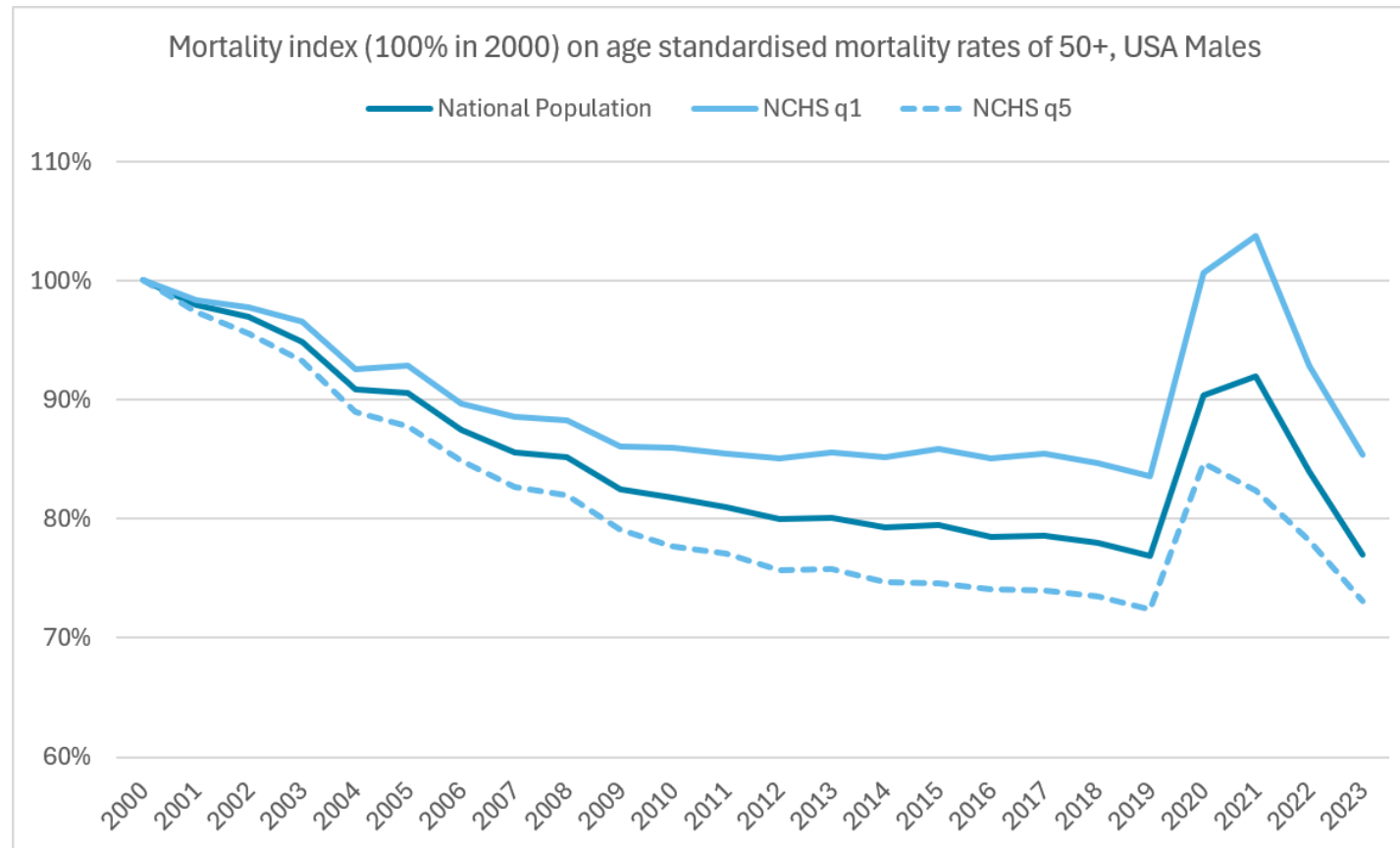


Cancer improvement faster for Bachelors & Graduates for all causes except lung cancer



Smoking trends suggest B+G has plateaued.

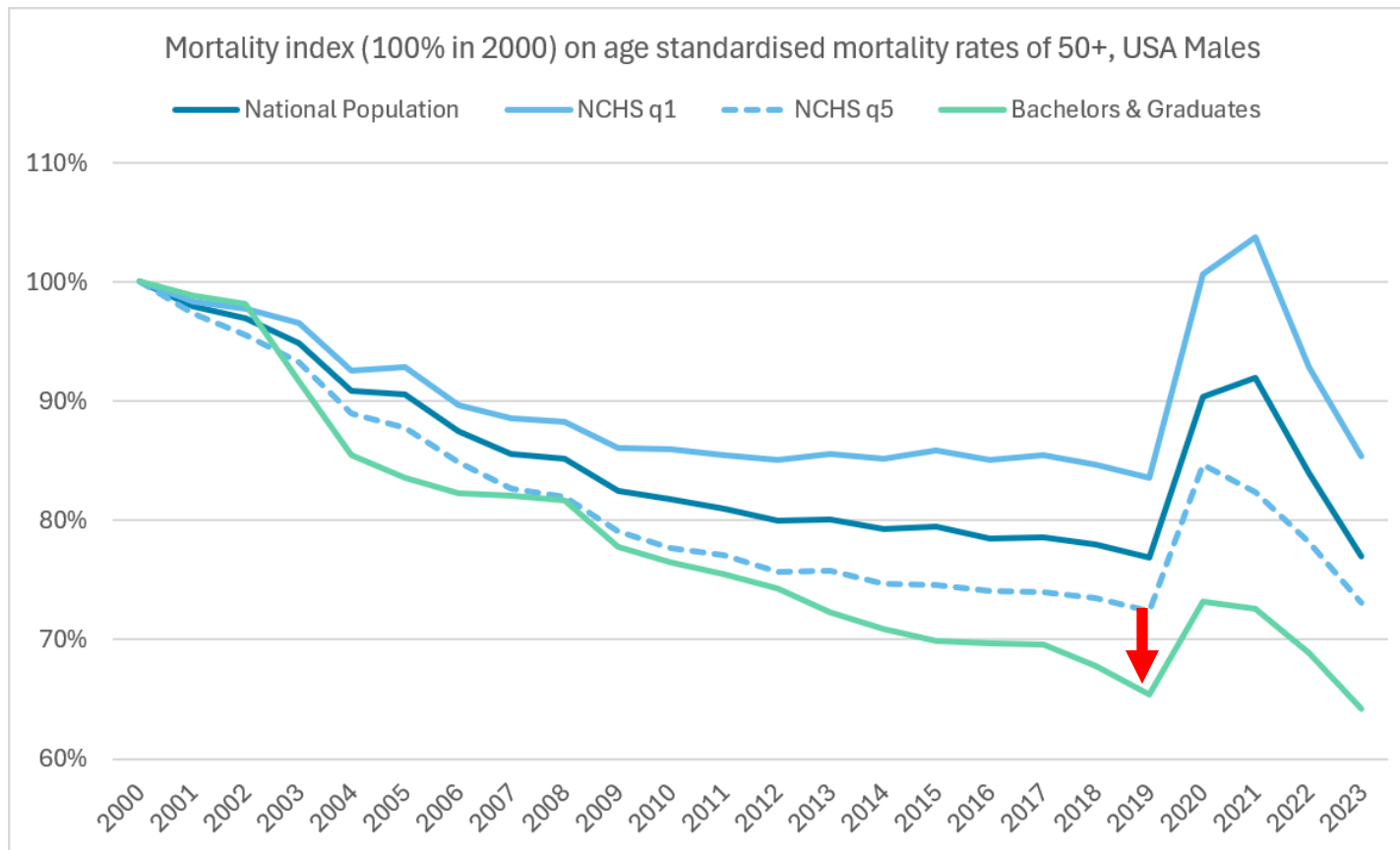
Reminder of mortality index by national population and quintiles



Improvement difference of **0.3% p.a.** between national population and quintile5 over 2000-2019

The Power of Individual Data!

Bachelor and Graduates population has a higher improvement rate



B&G improvements
are 0.5% p.a. faster
than quintile 5

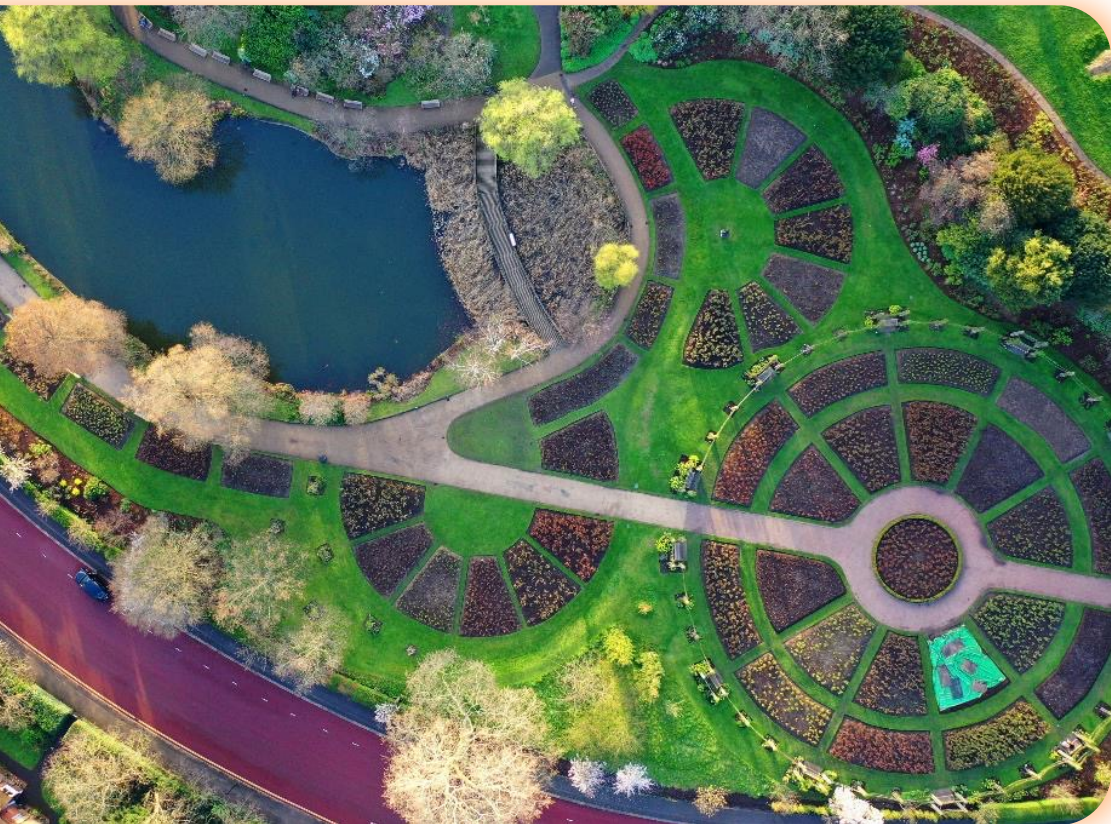
This equates to
2.5% increase to
PV claims!

Improvement difference of **0.8% p.a.** between national population and B&G over 2000-2019

Conclusions

Conclusions

Subtitle of the page



1

Relying on county alone could cost you!

2

Underlying drivers of mortality differ by socio-economic group

3

Consider whether your pension scheme members are different to their neighbours



Thank You

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09/09/2026

Longevity 21 Rome