The ONS Longitudinal Study – 40 years old and going strong

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With presentations from:

• Nicky Rogers, Senior Research Officer, Longitudinal Study Development Team, Office for National Statistics

• Dr. Franz Buscha, Principal Research Fellow, University of Westminster

• Dr. Nicola Shelton, Director, Centre for Longitudinal Study Information & User Support (CeLSIUS), University College London
The ONS Longitudinal Study

Nicky Rogers
Longitudinal Study Development Team
Session Outline

• Introducing the ONS LS

• The LS as an evidence base for government reviews and policy

• Supporting evidence and relevance for social mobility and other policy areas
The ONS Longitudinal Study

‘The ONS Longitudinal Study (ONS LS) is a study containing linked census and life event data on a one per cent sample of the population of England and Wales’

- Originally set up to improve analysis of occupational mortality and to provide better information on fertility and birth spacing
- Sister studies more recently established in Scotland and Northern Ireland
The ONS Longitudinal Study

Example members of the ONS LS

Examples of data available on members of the ONS LS through their life-course are shown below. The ONS LS holds data on more than one million people, each including their own unique combination of these data.

Migration data
- Address 5 years ago in the 1971 Census
- Address 1 year ago in all censuses since 1971
- Migration in the 10 years between censuses
- Immigrations and Emigrations
- Large sample means that subgroups can be studied, such as different ethnic groups, or different countries of birth

Death data
- ONS LS members’ and spouses’ deaths since 1971, with cause of death
- Infant mortality since 1971
- Can look at the way different lifestyles affect life expectancy

Birth data
- Fertility history for women in the 1971 Census
- Birth registration data of new ONS LS members since 1971
- Live and still births to female ONS LS members since 1971
- This can be used to look at fertility rates and histories and consider differences, for example by age, by birth cohort, by area of habitation

Health data
- Self-rated ‘limiting long-term illness’ since 1991
- Self-rated health since 2001
- Cancer registrations since 1971
- Can be used to consider the types of illness that affect different groups in society
Census Data – LS members and co-residents

From each census

- Age, sex, marital status, country of birth
- Family, household (e.g. car access), communal establishment type
- Housing: tenure, rooms and amenities
- Qualifications, economic activity, occupation, industry and social class
- Travel-to-work, one-year migration

2011 Census

- Ethnicity (1991 - 2011)
- Identity (2011)
- Care giving (2001 & 2011)
- Religion (2001 & 2011)
- Short term migration (2011)
- Main language (2011)
Life Event Data – LS members

Life Events

• Births - New births. Also live and still births to sample mothers

• Deaths - Death, cause of death and infant mortality

• Widow(er)hoods - Death of spouse of LS member

• Migration - International migration

• Cancer registrations - Cancer, including site and type
LS Research Topics

- heath inequalities
- ethnicity
- causes of death
- long-term limiting illness
- language proficiency
- employment
- economic activity
- migration
- hours worked
- marital status
- mortality
- qualifications
- religion
- age
- death
- occupation
- housing
- mode of transport
- student
- social class
- workplace address
- industry of employer
Data from the ONS LS regularly feeds into Government reviews, including:

- Dilnot Commission (2011) Commission on Funding of Care and Support
High Impact in Key Policy Areas

• Dilnot Commission (2011) Commission on Funding of Care and Support

“The issue of funding for adult social care has been ignored for too long. We should be celebrating the fact we are living longer and that younger people with disabilities are leading more independent lives than ever before. But instead we talk about the ‘burden of ageing’ and individuals are living in fear, worrying about meeting their care costs.”

Sir Andrew Dilnot
Survival in Institutional Care

• Research by Prof. Emily Grundy, LSHTM using ONS LS

• Survival and mortality for people resident in communal establishments at 2001 Census

• Aged 65 and over at the time of the 2001 Census and resident in a communal establishment – population should not include people temporarily in hospital etc
Survivorship by Establishment Type

Grundy (2011)
“Fair Society Healthy Lives”

- Strategic Review of Health Inequalities in England Post 2010

“People with higher socioeconomic position in society have a greater array of life chances and more opportunities to lead a flourishing life. They also have better health. The two are linked: the more favoured people are, socially and economically, the better their health. This link between social conditions and health is not a footnote to the ‘real’ concerns with health – health care and unhealthy behaviours – it should become the main focus.”

Michael Marmot
Life Expectancy at Birth by Social Class, Males, England & Wales

Source: Office for National Statistics Longitudinal Study\textsuperscript{45}
Life Expectancy at Birth by Social Class, Females, England & Wales

Source: Office for National Statistics Longitudinal Study

Social Class
- I
- II
- III
- IV
- V
- All
Research Using 2011 Census Data

- Life expectancy by NS-SEC 2007-11 (ONS)
- The socioeconomic status and integration of first and second generation immigrants in the UK: The role of English language skills (ONS)
- Transitions in tenure / Older workers (ONS)
- Health selective migration (Norman)
- Ethnic migration and mobility (Platt)
- **Inter-cohort Trends in Intergenerational Mobility** (Buscha, Sturgis)
- Characteristics of and living arrangements amongst informal carers (Robards)
- Area effects and extended working lives (Shelton)
- Are we becoming more migratory? (Champion)
Closing remarks....

- 40+ years of data
- Free to use
- Free user support service for researchers