

# **Beyond 2011**

**Stakeholder Engagement Workshop  
The Islands, 29<sup>th</sup> January and 11<sup>th</sup> February 2013**

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# Beyond 2011 Stakeholder Engagement workshop – 29 January and 11 February 2013

## 1. Introduction

National Records of Scotland (NRS) has been running a series of stakeholder engagement sessions with representatives from a range of users interested in small area population and socio demographic information. These discussions precede a formal consultation to gather user needs which was launched in March 2013.

Each session began with a presentation detailing the reasons behind the initiation of the project and the different options that are currently being investigated. This presentation can be found within the [Beyond 2011 Events](#) section on the NRS website. Delegates were invited to discuss how they currently use census information and how any changes could affect their work. The outcome of these discussions is included in sections 2 – 5 of this document.

## 2. Current uses of census data

### 2.1 Planning Services

Delegates stated that the census is vital to service planning across the islands and use a range of aggregate statistics, derived from the census, to effectively plan services. Aggregate statistics are a collection of summary counts of the numbers of people, families or households resident in specific geographical areas possessing particular characteristics, or combinations of characteristics drawn from the themes of population, including ethnicity and religion, health, work, and housing. They are derived from analysis of the information provided in returned census forms. Adjustments are made in the outputs for people and households who may have been missed out and not been recorded on a form, or may have been counted more than once by being recorded on more than one form.

A number of the particular characteristics and combinations of characteristics drawn from the census, such as health and ethnicity, were mentioned by the delegates as being important to the planning of a range of services. Considerations of equalities characteristics are important for Local Authorities (LA) when producing and maintaining [Single Outcome Agreements](#) (SOAs). SOAs set out how Community Planning departments in councils will contribute to the [Scottish Government's National Outcomes](#) information for both of these is available on the Scottish Government website. The purpose of a SOA is to identify areas for improvement and deliver better outcomes for the people of Scotland as well as individual local authorities.

'I run the Community Planning Programme (CPP) and for us accurate data is key.'

'We use Census in SOAs and long term council planning. Data is used to try to analyse individual islands within the LA.'

Census data is used to plan a range of services including housing, health and social services. Both unique estimates from the census and population estimates are used in community planning. Delegates noted a number of estimates that are unique to the census. A number of delegates said that the census provides unique estimates on ethnicity.

‘One of the main uses of data from 2001 Census is ethnicity. It is the only place that this data exists reliably in the area.’

Delegates also mentioned that the census is the only source to provide information on the number of offshore workers, which is an important issue for the islands.

‘For offshore workers there is no other way to capture that information other than the census.’

### **Geographical Coverage**

The delegates also discussed the importance of census data available at low geographical levels for effective service planning. The low population density and variability between islands was emphasised by all delegates:

‘Each individual island is different.’

‘A small house on a little island is very different to a big house on the mainland.’

For this reason, the delegates felt that it was important to be able to analyse data at postcode level, especially as some local authorities cover multiple islands.

‘Data is required at postcode level rather than at just LA, especially on an island to island basis.’

It was, however, noted by one delegate that postcode level analysis can be problematic for analysis in the Islands:

‘Postcode level information is good to receive but as postcodes can be split across islands this can also pose a problem for analysing data.’

Delegates felt that small geographical levels are integral to service planning. A number of delegates stated that they could see no other way of carrying out housing planning without the level of detail given from the census.

‘We also use data on housing needs across the LA and the population distribution. We like to be able to use Isle specific population data.’

‘The census is also used in house building planning as well as service provisions; I can see no other way to do this without the census.’

The population estimates are also essential to a range of other calculations used for service provisions in providing the denominator for calculations. This was particularly important to the delegates working in public health, where rates

use population estimates as their denominator the numerator provided by other relevant data sources.

‘We also use information on death/mortality rates and fertility which also use census data in the denominator.’

## **2.2 Benchmarking**

One of the most important aspects of the census for the Islands was that the census is unique in that it is the only survey that is compulsory and covers the entire population. Delegates felt that this was important in terms of response rates and ensuring extremely high coverage to provide accurate population estimates. Many of the delegates in the Islands use the population estimates from the census as a benchmark.

‘The census is a benchmark for any other statistics, which are either not available or not accurate because the numbers are very small.’

‘Although census has a 10 year gap, it allows checking of other data.’

## **2.3 Heritage tourism**

Delegates also noted that the census generates income for the Islands as it attracts tourists to the area through an interest in family history. Some delegates felt that the census is crucial as it is the only detailed source for family history. Further information on this can be found on the NRS website within the event report for the [Beyond 2011 Stakeholder Engagement workshop](#) held in Edinburgh on the 8<sup>th</sup> November 2012.

## **2.4 Limitations to the current census model**

One of the main issues raised with the current census model was its frequency. Delegates felt that the census becomes less useful as time passes between the censuses.

‘The census is useful but becomes less so as we move away from census day.’

The delegates noted that in their work, the reduction in use of the 2001 Census is largely due to the decline in the accuracy, 12 years later.

Although the Mid-Year Estimates (MYE) update the population estimates based on information on births, deaths, and migration it was felt that they do not fully capture migration or population change in the intervening period. Furthermore, it was felt that ‘expansion of the EU and the changing economic climate’ was also not captured. Ultimately, the current frequency was not felt to be in line, or representative, of the demographic and social changes that may occur over a 10 year period.

### 3. Alternative data sources

The delegates use a number of additional data sources. Many of the delegates mentioned large government surveys including the Scottish Household Survey (SHS), Scottish Health Survey (SHeS) and the Scottish House Condition Survey (SHCS).

Administrative sources were also used including the School roll, GP services data, benefits data, and other NHS statistics.

A number of delegates working in public health also used the Scottish Public Health Observatory (ScotPHO)<sup>1</sup>. The aim of the ScotPHO is to provide a clear picture of the health of the Scottish population and the factors that affect it. It contributes to improved collection and use of routine data on health, risk factors, behaviours and wider health determinants.

### 4. Views on alternative methods

#### 4.1 Issues with sampling

As discussed above, in relation to the importance of geographical output level, the small population numbers on the island and the variability between islands limit the use of sampling techniques in surveys. The delegates agreed that the large government surveys including the SHeS and the SHS have too small a sample to be representative of the Islands.

‘Samples are an issue as Shetland has a small population and the samples are just a sub-set of this and therefore can be less robust and have more issues and are really highly dependent on sample sizes.’

‘We also use the SHCS but as this only has 50 houses on the island that were sampled, this has issues with robustness.’

Sampling is the process by which a feature of interest (or parameter) relating to a group of interest (or population) is estimated, by measuring its value in a smaller but representative sub group (or sample). The aim of sampling is to enable estimates or statistics that are as close as possible to the real value in the population. However, estimates obtained from samples can never perfectly match the true population parameters because of the information that is missing for the non-sampled population members. This can be an issue when the population is strongly grouped, e.g. by geography, and some groups may not be adequately represented in the sample<sup>2</sup>.

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#### Footnotes

1) The ScotPho collaboration is co-led by Information Services Division (ISD) Scotland and NHS Health Scotland, and includes the Glasgow Centre for Population Health, National Records of Scotland and Health Protection Scotland.

2) The representation of clearly defined groups in a relatively small population can be improved by using sampling techniques such as stratified random sampling. For more information on the sampling strategies can be found with the [Survey Methodology](#) Section of the Scottish Government website.

Delegates felt that to effectively plan services more detail is needed and samples should also be representative of groupings within specific islands, such as age-group, gender, ethnicity, and income-bracket.

As the main government survey samples do not contain individuals from each of the islands some delegates felt that the survey results were not useful. One delegate explained:

‘Both the Scottish Health Survey and Scottish Household Survey only use a small sample in the islands, and data is either meaningless or unreliable. Only 50 people are interviewed from the Western Isles in the SHS. In addition, sample surveys should take into account all islands of the Western Isles, as each island is different, and this is not always the case.’

The SHeS also has the option to boost<sup>3</sup> the survey but this is financed by health boards independently, therefore the option was used infrequently.

‘The expectation is that this cannot happen on a regular basis and each year the health boards analyse whether or not the data collected in the main SHeS is acceptable and most years this is the case.’

## 4.2 Issues with Indicators

Due to the uniqueness of the Islands in relation to a number of factors, one of the delegates expressed concern with the applicability in the islands of some indicators used across Scotland. The example given was that the [Scottish Index of Multiple Deprivation](#) (SIMD)<sup>4</sup> (available on the Scottish Government website) was not considered reliable as it did not take into consideration fuel poverty. This was considered to be an important problem to the islands and an indicator of deprivation by the delegate.

‘Deprivation is an issue but we don’t find the SIMD indicator very reliable as it doesn’t include fuel poverty, which is a problem here. You need census data to understand the whole picture.’

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### Footnotes

3) Boosts can be used to increase the sample size for specific areas or characteristics.

4) Scottish Index of Multiple Deprivation (SIMD) is used to identify small area concentrations of multiple deprivation. It allows effective targeting of policies and funding. The SIMD ranks small areas (called datazones) from most deprived – ranked 1 – to least deprived – ranked 6,505.

### 4.3 Administrative Data Sources and Data Linkage<sup>5</sup>

A number of delegates working in public health said that they supplement the census and information from SHeS with some administrative sources. They found GP and ISD data a useful supplement.

One of the delegates discussed the issues with previous data linkage projects on the islands. Data Linkage is the joining of two or more administrative or survey datasets to increase the power of analysis possible with the data. These projects were unsuccessful as a small number of individuals could be identified, which had Data Protection Act (1998) ([legislation.gov.uk](http://legislation.gov.uk) website) implications<sup>6</sup>.

‘They had to give up matching different data sources as individuals could be identified. This was a data protection issue and stopped the progress of the project.’

### 5. Priorities for alternatives to the census

The groups were asked to discuss the following aspects of the information they use and their relative importance:

- Quality and accuracy
- Geographic coverage
- Frequency
- Aggregation

For some delegates all aspects were considered vital:

‘If you sacrifice any of those characteristics then the credibility of what we do is in question.’

Some delegates prioritised accuracy and geography:

‘We don’t want to sacrifice any characteristic, all of them are important but probably accuracy and geography are the most relevant.’

Accuracy was felt to be very important, with particular significance to the islands because of the small population numbers. The population estimates need to be as accurate as possible as one delegate commented:

‘small numbers can skew results easily when there is a minor change, unless we know the underlying population figures’.

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#### Footnotes

5) More information on the [Data Linkage Framework](#) and the [Data Sharing and Linkage Service](#) can be found on the Statistics Section of the Scottish Government website.

6) More information on the [Data Protection Act](#) can be found on the Information Commissioner’s Office website.

Delegates also discussed the level of aggregation of variables needed. It was agreed that sensible aggregations of variables could be used but allowing an option for more detail if required.

‘At the moment we need to have accurate age groups, as there is an ageing population and are using the census for that.’

The common view on the relative importance of the key aspects was that this depended on what use of the census or variables were being discussed. For example, the view for housing may be very different for the view on education. It was also stressed that this depended on local outcomes and needs.

‘[Census releases] should be tied to government directives, government or parliament objectives, health boards and planning work.’

Some delegates agreed that the frequency of releases should be focused around planning cycles and to ensure that there was data available to match these requirements.

‘Frequency of releases should depend on the purpose.’

The delegates related their ideal frequencies for accessing the data to their different roles and uses of census data. Delegates discussed that this would allow Local Authorities and Health Boards to revise their case every 3 to 5 years in line with the planning cycle.

‘The data is important to feeding into SOAs<sup>7</sup> and producing data for the 3 year periods and also the yearly targets. SOAs have also now changed so it is a rolling plan to produce statistics on a regular basis.’

Delegates working in public health also discussed the importance of the frequency of data to understanding the outcomes of interventions. For some delegates data was perceived to be needed more frequently to allow them to track the effectiveness of interventions rather than having to wait until the intervention was complete to determine the effect.

‘This should be on an annual basis, any longer and it is not possible to measure change but practicalities have to be taken into account.’

‘We would prefer in depth information that was released on an infrequent basis (e.g. 2 to 3 years).’

However, others felt that there was a need for flexibility in the frequency and approach:

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#### Footnote

- 7) [Single Outcome Agreements](#) (SOAs) set out how Community Planning departments in councils will contribute to the [Scottish Government's National Outcomes](#) (information for both of these is available on the Scottish Government website). The purpose of a SOA is to identify areas for improvement and deliver better outcomes for the people of Scotland as well as individual local authorities.

‘Although most interventions are over extended periods, for example, disease prevention, others work on a shorter timescale and therefore a flexible approach might be required.’

One delegate suggested that a possible solution might be:

‘A five year census combined with other datasets for the in between years would be more useful.’

## **6. Implications of not having the census**

The groups discussed what the main implications would be if the census outputs were not available. For many delegates the census is essential to service provision and to understanding their performance. Some delegates expressed concern that if they did not have the census they would, ultimately, need to produce their own census-like event for adequate coverage at lower geographic levels, which would have large financial implications.

‘We will have to use other estimates provided to us. We could also use local surveys but we will need to finance them.’

‘You will need local solutions for more accurate statistics. Over time data will become more unreliable but it will not be a political priority to update your statistics, but you will need them to check if your policies work or don’t work, or to present your case for attracting funding.’

A number of delegates stated that they have tried carrying out their own surveys but this has proven to be extremely expensive.

‘LA also ran their own local survey but this is expensive to do and is not possible to repeat on a regular basis.’

‘Health boards also have an option to run their own surveys, [...] but this is expensive and not always an option.’

## **7. Conclusion**

The discussions generated were useful and allowed the Beyond 2011 team to see how the census is used across Scotland. The discussions generated useful information and helped the Beyond 2011 team to understand the specific needs and issues relating to demographic data in the islands.

One delegate made an additional point that as the census is a Scotland and UK-wide questionnaire ‘it allows us to be part of the bigger picture’. The inclusiveness of the census was felt to be important.

The information included in this report will be added to the bank of information currently being collected by the Beyond 2011 team and will be used in the evaluation of any census alternatives.

Delegates were advised they would be kept informed about any future events relating to Census options and would be sent a link to the formal consultation in early 2013.

## **8. Our Contact Details**

For further information or enquiries about the Beyond 2011 please contact:

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