

# POPULATION AND MIGRATION STATISTICS COMMITTEE (SCOTLAND)

## Dissemination of migration data update

### Purpose

To outline the issues which are involved in disseminating migration data more widely, and to describe the Demography teams approach to disseminating migration data.

### Background

At the last PAMS meeting in May, we circulated a (paper PAMS (05) 06 attached) which outlined a proposal for making migration data more widely available. It included a number of examples of the sort of output which we propose to disseminate on the web. We have provided this data in the past either in the Annual Report or on request.

Following the paper we have had a number of requests for data but we also received an email from David Knowles at ISD, where he asked if we were planning to apply our usual statistical controls to suppress small numbers.

We have responded to David Knowles by identifying the situations where we feel there may be any disclosure from these outputs, and the steps we plan to take. The response is summarised below.

### Proposed output

The following outlines the sources of data which are used to create the proposed tables, and identifies the steps we would take in situations where there may be issues of disclosure.

#### Table of gross flow matrix by health board area, including E&W for calendar and mid-year.

This table (PAMS (05) 06 Annex A) is derived directly from NHSCR data. The only situation where this table could disclose personal data is where all individuals who moved out of an area, moved into the same area. We will check for this before publishing figures and would not release these data, although in practice this is very unlikely to occur.

#### Table of in, out and net flows by broad age band for each health board

This information (R2 table) is similarly derived from NHSCR and is not disclosive, other than where all in or out migrants fall into the same age category. We would apply the same approach as above in this situation. Further tables were proposed which similarly describe movements of patients between council areas, a breakdown of the migration components of change used in the mid-year estimates by rest of UK and overseas. These data are derived from a number of statistical processes which make it very unlikely that there is a link to individual data. More details are given below.

The council level data is derived from NHSCR data as above, but using the Community Health index to allocate moves between health boards to council areas. The flows at local authority level are derived by using moves identified by comparing two Community Health Index extracts, and scaling the dataset to correspond with NHSCR data. This involves considerable imputation and deletion of the

CHI based records. The process means that the flows which are estimated using the CHI will not relate to individual records, as the CHI based flows are modified.

The data on international migration is modelled from the International Passenger Survey (IPS) and information provided by Office for National Statistics and Home Office on asylum seekers. These are therefore model estimates and do not have any implications for disclosure.

For these reasons we consider that it is reasonable to publish these tables for councils and health boards as proposed

**Next Steps**

PAMS members are invited to comment.

**Cecilia Macintyre**  
**Demography branch**  
**17 November 2005**