Exploring the representation of disability in homes and neighbourhoods

Insights into the Quantitative analysis in Year 1 of the Intersectional Stigma of Place-Based Ageing (ISPA) Project

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In Partnership with

INTERSECTIONAL STIGMA
OF PLACE-BASED AGEING (ISPA)
YEAR 1 QUANTITATIVE ANALYSIS

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Preliminary analysis of English survey data

The first year of the ISPA project has focused on conducting both quantitative and qualitative secondary analysis exploring and understanding stigma (see the ISPA year 1 overview). The quantitative analysis has focused on preliminary analysis of English survey data; identifying other relevant datasets, including detailed individual level data such as the UK Household Longitudinal Study (UKHLS), British Cohort Study (BCS); and applying for access to restricted versions via UK Data Service. Below we outline some of our initial findings and how we deal with keeping sensitive individual level data secure.
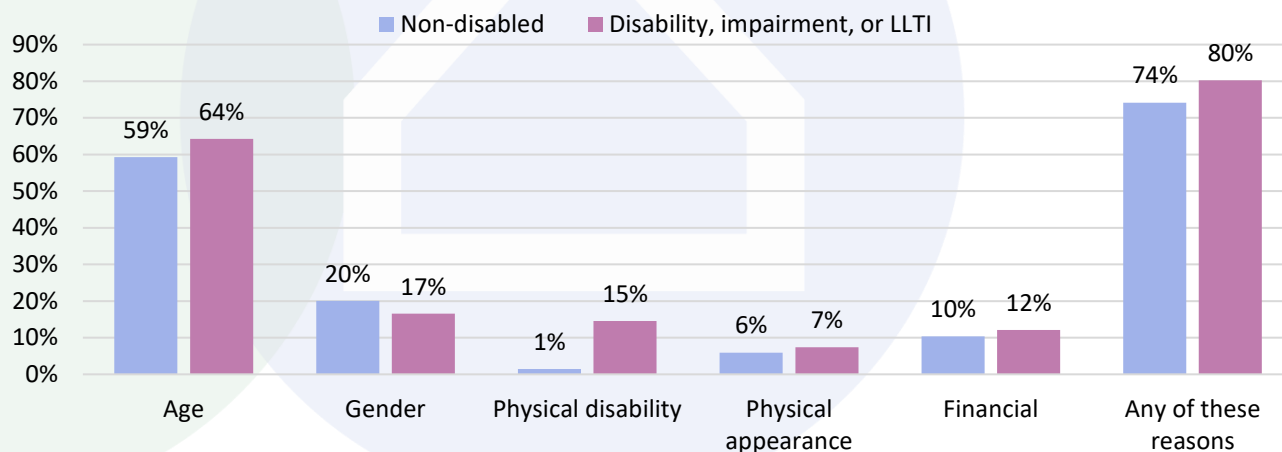
Who is most likely to be discriminated against?

Using data from the English Longitudinal Study of Ageing (ELSA), a longitudinal panel survey of individuals aged ≥50 years and living in England, we examined individuals' experiences of discrimination in relation to factors such as age and having a disability or sensory impairment.

Wave Five (2010/2011) data were selected due to the availability of discrimination variables. Respondents were asked whether they had ever experienced (a) being treated with less courtesy; (b) receiving poorer service in restaurants; (c) people acting as if they were not clever; (d) being threatened or harassed; or (e) receiving poorer treatment in hospitals. Subsequently, respondents were asked to identify the reason(s) they were discriminated against. For the current analysis we chose to focus on five of the nine possible forms of discrimination: age, gender, physical disability, physical appearance, and financial status.
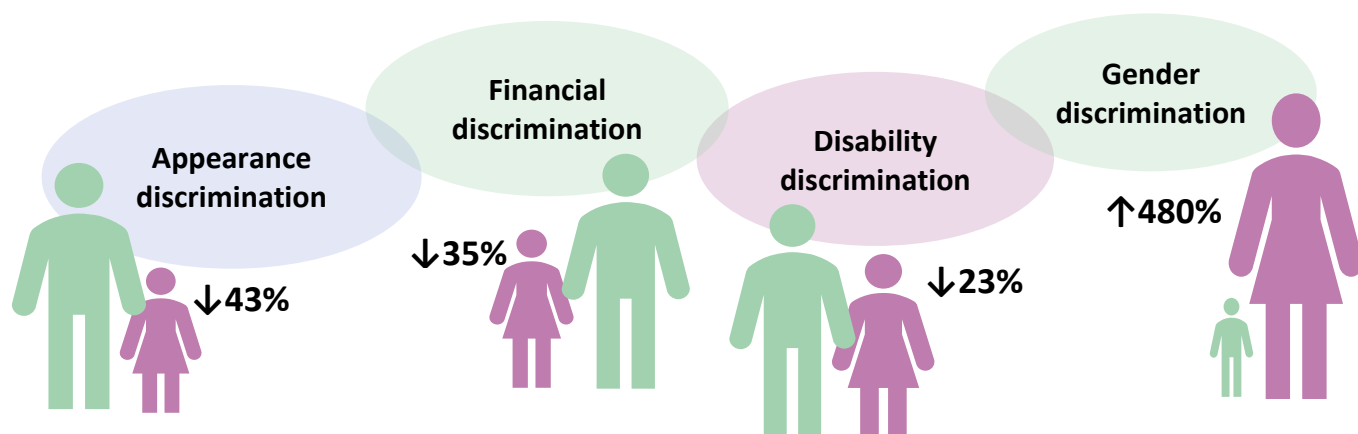
The analysis was carried out using an initial sample of 10,068 respondents, just over half of whom were female (55%), and older than 65 years (53%). Just over half of the sample (54%) reported having a disability, impairment, or limiting long-term illness (LLTI). Our interest was identifying where discrimination had taken place and in the sample. Descriptive analysis revealed that those with a disability, impairment, or LLTI were more likely to experience discrimination compared to non-disabled respondents due to age, disability, appearance, and financial status (Fig. 1).

FIGURE 1: TYPES OF DISCRIMINATION EXPERIENCED BY DISABLED AND NON-DISABLED RESPONDENTS

Binary logistic regression models predicted the experience of each of the five types of discrimination against factors such as age, disability, sex, education, and location (Government Office Region). Age was positively associated with disability and age discrimination, whereby the oldest age group (≥80 years) were substantially more likely to experience age discrimination and more than twice as likely to experience disability discrimination compared to the youngest group (50-54 years). In contrast, age was not a factor predicting gender, appearance, or financial discrimination. With regard to disability, those with an impairment were substantially more likely to be discriminated against because of their disability, and more likely to be discriminated against because of their appearance and financial status compared to non-disabled respondents.

Females were almost five times more likely to experience gender discrimination compared to males but significantly less likely to experience discrimination based on a disability, their appearance, or their financial status, which suggests that females are experiencing discrimination based almost entirely on their sex/gender. Significant differences in education were observed for gender, disability, and financial discrimination, whereby individuals with higher education were more likely to experience gender discrimination, but less likely to experience discrimination due to a disability or their financial status. Finally, location differences were only significant for age and gender discrimination; further analysis is required with more detailed location variables.

Keeping Sensitive Data Secure

We need very detailed individual information to undertake our analysis linking people, their experiences and characteristics, to the places they live. It is often possible to obtain, for research, datasets that meet some but not all of these criteria. For instance, we can access individual information from the English Longitudinal Study of Ageing through the UK Data Archive but the information about where the individuals live is not sufficient to locate them to city or town let alone a single community. As a result, most survey data with the detail we are interested in using (for example ELSA, UKHLS, and BCS) has controlled access and requires registration with the UK Data Service and agreement with detailed terms and conditions.

In order to work with this more detailed data, we need to apply for special licence access. This involves agreeing how the data will be stored and accessed securely, and what can be done with the analysis. Researchers need to have completed special training about the risks and responsibilities in handling sensitive data before working with it. This helps to ensure that the confidentiality of the individuals and/or households within the data is preserved. Ultimately, using Special Licence Quintile Index of Multiple Deprivation score variables from ELSA and Secure Access local authority district boundaries will allow us to use this more detailed information on where people live to account for relative deprivation across smaller areas and neighbourhoods.

Next Steps

We are currently applying for access to special licence use of this more sensitive data and will then conduct further analysis of variations in disability, discrimination and stigma across local areas. We look forward to reporting on this emerging analysis over the coming year.

Please also see our Youtube channel for a video looking at large social survey data to understand patterns of stigma, disability and ageing.

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