Response ID ANON-CWNW-U149-J

Submitted to UK Statistics Authority Inclusive Data Consultation Submitted on 2021-03-26 10:47:57

About y	ou/
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What is your name?

What is your name?:

Elizabeth Webb

What is your email address?

What is your email address?:

elizabeth.webb@ageuk.org.uk

Are you answering on behalf of an organisation or as an individual?

Organisation (please specify)

Are you answering on behalf of an organisation or as an individual?:

Age UK

If you are answering on behalf of an organisation, what sector do you work in? This will assist us in monitoring the range of people that have responded to this survey.

Charity and voluntary

If you are answering on behalf of an organisation, what sector do you work in? (other):

What is the name of the organisation that you represent?

What is the name of the organisation that you represent?:

Age UK

We may wish to contact you in relation to your response or to invite you to attend follow-up events. Would you be happy for us to do so?

Yes

What is your main area of interest or your broad area of research, in terms of topic and groups that you're interested in?

What is your main area of interest or your broad area of research, in terms of topic/theme, groups that you're interested in, geographical and other coverage?:

Age UK is a national charity for older people that works with a network of partners, including Age Scotland, Age Cymru, Age NI and local Age UKs across England. Last year Age UK nationally and locally responded to around 8.5 million information and advice enquiries, face-to-face, on the phone, online, and through written materials. Age UK's work – supported by our research – focuses on ensuring that older people: have enough money; enjoy life and feel well; receive high quality health and care; are comfortable, safe and secure at home; and feel valued and able to participate.

To support transparency in our decision-making process, responses to this consultation will be made public. This will include the name of the responding organisation or individual. Please confirm that you are content for your name to be published. We won't publish personal contact details.

Yes, I consent to my name being published with my response

Current Data or Evidence

Are there any questions you are currently unable to answer because of a lack of data or evidence? If there are any, please tell us what they are.

What are the key questions you are currently unable to answer due to a lack of available data or evidence?:

Age UK are unable currently limited in our ambitions to develop and communicate a good quantitative understanding of older people's need for and use of social care. This is due to various limitations with the data collected and published. The key limitations with these data are well articulated in the OSR report of January 2020 (https://osr.statisticsauthority.gov.uk/publication/report-on-adult-social-care-statistics-in-england/). We currently rely on a combination of the following sources of data:

• Data collected by local authorities and published by NHS Digital. These data are free to access but are limited in what they can tell us. For instance, they only

cover the state funded part of the adult social care sector, and do not tell us about individuals' need for or use of social care in the round, or journeys through the system.

- Data collected and published by Laing Buisson in their annual reports, such as Care Homes for Older People Market Report. These focus on the private pay part of the adult social care sector, and do not tell us about how individuals use social care. They are expensive to access, a cost which would be prohibitive for a smaller organisation.
- Survey data from the English Longitudinal Study of Ageing (ELSA) and the UK Household Longitudinal Study (UKHLS). This provides us with information on older people's unmet needs for social care, the ways individuals receive formal care and informal care, and ways individuals provide informal care. This survey data also enables us to have a better understanding of the sociodemographics of the people who need and use social care, and provide informal care. These data are free to access and simple for analysts with the relevant skills to analyse, but have the disadvantage of not being official statistics.

We are currently unable to answer questions on older people's experiences of crime victimisation as to date the Crime Survey for England and Wales has not requested responses to the self-completion module – which includes questions on experiences of domestic abuse and other sensitive topics – to adults aged 75 or older. We are pleased that, following Age UK discussions with the ONS during the past year, it has been agreed that when the CSEW returns to face-to-face data collection following the coronavirus pandemic this upper age limit will be removed. As a general principle we would like to see removal of any upper age limits from data collections. We look forward to statistics on older people's experiences of domestic abuse and other crimes being available so that organisations, including our own, which offer support to victims and survivors of domestic abuse can use these statistics to evidence older people's need for services.

In addition to upper age limits on data collection, data collection is often not truly inclusive in other ways. For instance:

- If data are collected online only this will exclude older people who are not online, who are disproportionately older and more socioeconomically disadvantaged
- Surveys usually only sample people who live in private residences, resulting in the exclusion of older people who live in residential care homes and sheltered accommodation, who are disproportionately older, have higher care needs and poorer health
- Surveys usually exclude people who lack the capacity to consent to participation

All these restrictions can lead to underestimates of the levels of disadvantage, poor health, disability and need for care among older people.

We are often not able to answer research questions regarding intersectional issues, for example how older people of particular minority ethnicities are impacted by an issue. This can mean that we are not fully able to describe inequalities between different groups of older people. This tends to be because official statistics when published are cut by either age or ethnicity, but not both. One solution to this is to provide tools, such as DWP's StatXplore, which enable analysts to tabulate the available data in the way they require it.

Further, when we are analysing survey data we often find that sample sizes are not adequate to answer questions about intersectional issues. For example, there are usually only a very small number of older people of each minority ethnicity included in a survey sample. In order to enable us to answer these questions it would be helpful to boost samples for older ethnic minority participants, and for older people with other protected characteristics.

Please tell us the reasons why you are unable to answer these questions. (Please provide further details below)

Gaps in the current data?, Problems with measurement?, The level of detail available?

Please tell us the reasons you are unable to answer these questions. Is it because of::

Please see my response to the first question for details.

Data and Evidence Accessibility

Are you currently able to access the data you need for your purposes?

Yes, some of it

If you are not able to access all the data or evidence you need for your purposes, what data are you unable to access and what are the barriers to you accessing this data?

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Please see my response to the first question for details.

Are there any issues with how the data or evidence that you currently rely on are presented? If so, please provide details.

10. Are there any issues with how the data or evidence that you currently rely on are presented? If so, please provide details.:

Please see my response to the first question for details.

Making Improvements

Thinking of all the issues you may have experienced with the data and evidence, which of the following improvements would you like to see? Please provide details.

Fill gaps in the current data?, Address problems with measurement?, Improve the level of detail available?, Enable greater access to data?, Improve presentation of the evidence?

Thinking of all the issues you may have experienced with the data and evidence, what improvements would you like to see to::

Please see my response to the first question for details.

Please tell us about how important it is for your purposes that data or evidence are comparable across different geographies, for example, across the 4 countries of the UK, internationally or at a more local level? Please give details of what geographies you would like to be able to compare across.

How important is it for your purposes that data or evidence are comparable across different geographies, for example, across the 4 countries of the UK, internationally or at a more local level? Please also tell us about any impacts you've experienced due to a lack of comparable data or evidence.:

Age UK needs to access data using a number of geographies. We are often interested in talking to Members of Parliament about their constituents, so data at a constituency level is useful. Further, we need data at local authority level, at the level of the various NHS geographies, as well as at regional and national geographies. Where possible it is always useful to have data at lower level geographies (e.g. LSOA, MSOA) but we understand that this is often not feasible given survey sample sizes.

Please tell us about any impacts you've experienced due to a lack of comparable data or evidence.

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Please see my response to the first question for details.

What change to the current data or evidence would you most like to see to be able to answer the questions that are most relevant to you?

13. What change to the current data or evidence would you most like to see to be able to answer the questions that are most relevant to you?:

Please see my response to the first question for details.

Please tell us about any examples of inclusive data and evidence that you think work well. If relevant, please include a link.

14. Please tell us about any examples of inclusive data and evidence that you think work well. If relevant, please include a link.:

If there is anything else you would like to add that hasn't already been covered, please share your views here.

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Age UK's key recommendations are:

- Social care data needs substantial improvements, in line with OSR report on adult social care statistics published in January 2020
- Data collection must be truly inclusive, and should not exclude any older people, including those above a certain age, who live in settings other than private residences, who lack mental capacity, or who are not online
- When data are published this should be done in a way that allows intersectional estimates to be produced e.g. by age and ethnicity, rather than just age or ethnicity.