

**RESPONDENT:** 2944851748 – Dr Stephen Petterson  
**SECTOR:** Health

**Q1 - What are your views of the different census approaches described in the consultation document?**

Generally I agree with the findings of the independent review of the methodology of the Beyond 2011 programme. The online Census is viewed favorably but there is a need to show how an acceptable response rate will be achieved. Regarding the option for population estimates from administrative sources plus an annual 4% sample survey to measure population attributes, the results of research into this option are impressive but not all the problems involved in implementing this option have been fully considered and further research is needed. Problems with this option include how to adjust for possible over-coverage of population in administrative sources and the need for a means of validating population estimates calculated from administrative sources.

**Q2 - Please specify any significant uses of population and housing statistics that we have not already identified.**

In the public health department of Suffolk County Council we have made wide use of data from the 2011 Census and other ONS data in data analysis for a number of recent public health needs assessments, including needs assessments relating to children and young people, maternity services, dementia and mental health. In this work we have produced tables, graphs and maps of Census and other ONS data at the levels of local authority and ward, including population estimates, numbers of births and other statistics relating to maternity, marital status, distribution of single parents, distribution of social housing, distribution of unpaid care, ethnic population, educational achievement, economic activity and housing tenure. These data form only some of the sources of public health data used in this work but are important sources nevertheless.

**Q3 - Please specify any significant additional benefits of population and housing statistics that we have not already identified.**

Population and housing statistics used in public health needs assessments contribute to the planning of health services, health promotion and disease prevention and measures to tackle the wider determinants of ill health. In this way they benefit the health of the local populations to which they relate.

**Q4 - What would the impact be if the most detailed statistics for very small geographic areas and small population groups were no longer available? High, medium, low or no impact?**

High

**If medium or high, please give further information.**

In local authority public health we make frequent use of Census data and other data at the levels of MSOA, LSOA and ward, although less use of data at the level of Output Area. Also, in public health it is very useful to have access to local data relating to small population groups, such as certain ethnic groups and homeless persons, for example. To lose access to these data would reduce the scope of our data analysis. Also, in order to produce tidy small-area data for clinical commissioning groups, which are not coterminous with MSOAs or wards, we need access to data at the level of LSOA.

**Q5 - What would the additional benefit be if more frequent (i.e. annual) statistics about population characteristics were available for areas like local authorities and electoral wards? High, medium, low or no additional benefit?**

High

**If medium or high please give further information.**

The research for the Beyond 2011 programme has shown that more frequent statistics about population characteristics would allow change over time in these characteristics to be identified sooner. This would increase the usefulness of these data.

**Q6 - Please specify any significant uses of census information for historical research that we have not already identified.**

Census information contributes to the history of public health by providing long time-series of population estimates, which are useful for charting demographic change and as denominators in long-term trends of disease incidence and mortality, e.g. mortality from infectious diseases.

**Q7 - What advantages or disadvantages for genealogical or historical research can you see from a move to a solution based on archiving administrative data sources?**

If administrative data sources were archived, they would provide another rich source of data for historical research.

**Q8 - What are your views of the risks of each census approach and how they might be managed?**

If the decennial Census is abandoned, the long tradition of the Census in England and Wales will come to an end. The Office for National Statistics managed the 2011 Census well and achieved a high response rate. It has the skills and capacity to continue to run the Census, even in an online form. If the decision is taken to change to population estimation from administrative data and annual surveys of population attributes, a risk would be that this change is introduced too rapidly and that quality of data is reduced as a result. This change would need to be introduced carefully and with reference to the experience of other countries that have comparable systems for producing such data.

**Q9 - Are there any other issues that you believe we should be taking into account?**

Perhaps there is an argument for looking again at a population register for England and Wales. The experience of countries with population registers should be considered.