

Reporting Address Changes through the Healthcare System in Northern Ireland

Key Findings:

- ‘lagers’ (delay in reporting address changes) and ‘non-reporters’ (fail to report address changes) are similar in that they tend to be male, single and resident in urban/deprived areas: however they are also more likely to be owner-occupiers and less likely to have a limiting long-term illness;
- lagers are different from non-reporters in that they tend to be: older, have some educational qualifications, be self-employed and are from an ‘other’ community background (neither Catholic nor Protestant/other Christian);
- non-reporters are different from lagers in that they tend to be: younger, separated, divorced or widowed and employed in professional jobs.

BACKGROUND TO THE RESEARCH

Address information is collected in Northern Ireland through patient registrations with healthcare professionals. This information is used for health screening programmes and interventions. It is also used for statistical purposes to estimate internal migration and small area level populations. This research was undertaken to understand the accuracy of address information by looking at the characteristics of ‘lagers’ and ‘non-reporters’.

METHODOLOGY & RESULTS

A longitudinal analysis was conducted using the Northern Ireland Longitudinal Study (NILS) based on Super Output Areas (SOAs) as the geography for analysis. The research was based on the reporting behaviour of internal migrants aged 25 to 74 and the attributes which previous research has associated with migration propensities (including: limiting long-term illness, education, marital status, socio-economic status and household tenure).

A lag was considered to have occurred when (a) a change of address recorded in the census one-year migration question¹ was reported more than one year after the census and (b) when an address change likely to have taken place before 2000 was later reported. A non-reported move occurred when an individual had reported a change of address between 2001 and 2007 but neither the origin nor destination SOA matched the SOA at which they were enumerated in the 2001 Census (suggesting that another move had been made which had not previously been reported).

Descriptive analysis was undertaken followed by multivariate analysis using logistic regression. A multilevel framework was used for this with individuals (Level 1) being nested in SOAs (Level 2).

¹ Census 2001 asked: What was your usual address one year ago?

Table: Statistically significant variables for ‘lagger’ and ‘non-reporter’

	Lagger		Non-reporter	
	Positive	Negative	Positive	Negative
Sex:				
Female (ref)				
Male	+		+	
Age:				
25<35 (ref)				
35<45	+			-
45<55	+			
55<64	+			
65<75	+			-
Housing Tenure:				
Owner occupier (ref)				
Social rented		-		-
Private rented		-		-
Education:				
Qualifications (ref)				
No qualifications		-		

+ statistically significant positive difference between a category and its reference (ref) category e.g. relative to females, males show an increased chance of being lagers and non-reporters

- statistically significant negative difference between a category and its reference (ref) category

POLICY IMPLICATIONS

- Knowledge about the accuracy of patient addresses is valuable - the research suggests that poor address information is not just a problem associated with the young and socially deprived but also with some unexpected groups such as older people, those with better health and other more affluent cohorts.
- The use and importance of address information may increase in the future. It is likely that considerations on the format of the next census of population will include the greater use of administrative data, such as that provided by the Health Card Registration System (HCRS).
- The research recommends that the checking of patients’ address information should be collected under the Quality and Outcomes Framework (QOF) as a performance indicator.

NORTHERN IRELAND LONGITUDINAL STUDY (NILS)

The NILS, a sister study to the Northern Ireland Mortality Study (NIMS), is a large-scale record linkage study based on an approximate 28% sample of the Northern Ireland population (c. 500,000 individuals). Both studies allow exploration of health and socio-demographic characteristics. The **NILS Research Support Unit** provides information, advice and support for users of the NILS and NIMS databases. Contact us at: www.nils-rsu.census.ac.uk.

This research brief is based on (1) Shuttleworth I & Barr P (2011) *Who reports address changes through the healthcare system? Describing the characteristics of lagers and non-reporters using the NILS*. Population Trends and (2) Barr P & Shuttleworth I (2012) *Reporting address changes by migrants: the accuracy and timeliness of reports via health card registers*. Health and Place.
For further information please go to: [NILS RSU Publications](http://www.nils-rsu.census.ac.uk).