



UNDERSTANDING SOCIETY INSIGHTS 2015

2015 findings from the UK household longitudinal study



01	Thanks to...
02	Index
03	Foreword
06	Introduction

CHAPTER 1: HOUSING

08	Commentary: Current trends need to inform debate about future of housing
09	The growth of private renting in Great Britain: Characteristics and flows
11	Through the keyhole of involuntary home moves
14	Financial struggle connected to neighbourhoods

CHAPTER 2: HEALTH BEHAVIOURS

16	Commentary: Building a better understanding of behaviour change
17	Investigating the effects of active commuting
19	Health burden of the daily commute
22	Access to sports facilities: a hurdle to physical activity?
23	The social and spatial context of urban health inequalities

CHAPTER 3: YOUNG PEOPLE'S WELLBEING

26	Commentary: Winning the economic argument for doing the right thing
27	Parent-child relationships count the most, more than friends or siblings
29	Connections between parent and child wellbeing
32	Neighbourhood influences on child mental wellbeing and behaviours
33	About the Study
37	Final word



FOREWORD

DAVID WALKER,
CHAIR OF THE ESRC'S GOVERNING BOARD FOR UNDERSTANDING SOCIETY

A very senior civil servant (I couldn't possibly reveal my sources!) was asked after the general election what the priorities were for social research. The reply was terse: productivity and obesity. Understanding Society got there first. As the most recent findings show, researchers have been probing both of these complex phenomena to fascinating effect. The results lend themselves to informing important policy debate. For example, productivity at work links to time (and wellbeing) expended on travel to work. Performance may suffer if we face exhausting and stressful journeys. Here is Understanding Society data showing change in commuting patterns may matter more than length of journey, depending on mode of transport.

Findings from the Study presented at this year's Understanding Society Scientific Conference relate hiring and firing to productivity, suggesting the UK's flexible labour markets may cause low productivity. The research's author, Panagiotis Giannarakis, has established a suggestive connection between the rate at which staff lose their jobs involuntarily and the UK's productivity record over the past two decades.

Understanding Society data on commuting presented here confirms that mounting Shanks's pony or following Chris Froome's lead are beneficial. This work uses Understanding Society's kit of biomarkers. Blood and other samples collected in the Study allow researchers to compare and contrast what people say about their health and wellbeing with what the biological evidence shows.

Walking or cycling to work is good for us. Employers and policy makers could score a two-for-one: encouraging staff to get to work under their own steam (through subsidised bike purchase schemes, safer cycle routes?) would potentially reduce obesity rates and raise staff morale, boosting productivity.

To get fitter, people need easier access to sports centres – new studies using Understanding Society allow us to pick through the associations and likely causation. Where sports centres are located and how much they cost matter a lot, it turns out. Research points to household income as a factor in stopping people staying fit and at a reasonable weight. Gender matters here, too.

Understanding Society got going just as recession hit in 2008. Households in the sample were interviewed as things started to get better and again, got worse and, most recently, as economic growth has resumed - albeit in conditions of austerity for public spending. Along the way the government has changed, at Westminster and in Wales and Scotland – though one of the underlying findings from this longitudinal Study may be how little changes of administration affect households, or attitudes.

In our households, as in our own lives, change is matched by stability. (Longitudinal studies can be a useful corrective to suggestions that everything is changing all the time.) That's true for Understanding Society itself. Professor Michaela Benzeval succeeds Professor Nick Buck as Director. But Nick is still with us as he morphs – we hope – into a consumer of Understanding Society data, stimulating further investigations by his colleagues at the Institute for Social and Economic Research.

I succeed Professor Patricia Broadfoot as chair of the Governing Board, deeply appreciative of her wise judgement over the years: for me it's a return, having helped set the Study going as chair of the ESRC's Methods and Infrastructure Committee.

Early on, we spent a lot of time on the title. Nothing we could have chosen was going to be entirely appropriate. The name,

'Understanding Society' captures only part of the potential of this data source. It's also about jobs and attitudes so it's 'understanding economy and culture' as well.

All perspectives and disciplines share access, as Understanding Society peers inside households and charts how our respondents fare over time, simultaneously mistresses or masters of their own fate and subject to trends and tendencies sweeping through markets and policy. Inescapably, we all age. Strong forces control how much we earn and where our children end up. But we still possess discretion and choice. Only longitudinal data can provide researchers with the instruments to capture and describe this rich and ever-changing picture of society.

Understanding Society is an investment that appreciates in value the longer it continues – that's the beauty of longitudinal studies. In terms of scientific quality and practical usefulness Understanding Society goes on being one of the ESRC's 'jewels in the crown'.



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INTRODUCTION

PROFESSOR MICHAELA BENZEVAL,
DIRECTOR OF UNDERSTANDING SOCIETY

Good government requires sound evidence about the nature of the economic and social problems it faces and the impact of policies on different sections of society. By tracking individuals and households over a period of time data from Understanding Society is a vital resource for obtaining such evidence and for providing insights into the causes and consequences of social change. It enables researchers to understand fundamental deep-rooted social issues such as family change, poverty dynamics, social inclusion, non-employment, education, behavioural change and poor health.

As the time such data have been collected increases, the opportunities for researchers to produce findings of real value to policy makers grows considerably. In this volume of Insights we are beginning to see the fruits of such labour, with many of the reports using data collected at different time points to investigate changes over time.

The purpose of Insights is to share a small selection of research carried out using these data to highlight the policy issues that are being identified, and to showcase the unique features of the Study for policy learning. The three themes of research findings presented here in Insights 2015 were chosen both because they are pressing policy imperatives, as noted by David Walker in his Preface, and because they demonstrate five unique features of Understanding Society as a resource for policy (see About the Study for the full set of Study features).

In Chapter 1 – Housing, findings on the growth of the rented housing market (Sissons and Houston) and involuntary home moves (Baxter) make use of the long run of annual data available. This starts with the British Household Panel Survey in 1991 and continues to the most recent wave of Understanding Society (wave 4), released in November 2014. These findings underline the significant growth in private renting and involuntary moves plus the changing nature of the people involved in both situations. While administrative data may tell us the numbers involved in these changing social phenomena, only rich survey data such as those from Understanding Society can tell who experiences them and what the consequences are for other aspects of their lives both at the time, and in the future.

In Chapter 2 – Health Behaviours, the four papers use the breadth of topics covered in the Study to examine the ways in which different environments and personal circumstances impact on people's behaviours, and health, exploiting the data

available on people at the same time and over time. Flint and Cummins use novel biomarker information about the risk of heart disease taken from blood samples to show that the complicated associations between active commuting and health risk differ for men and women. Munford and colleagues make use of the way Understanding Society collects consistent data over time to identify those people whose commute time has changed (but not their job or commuting mode) to more effectively investigate the health and wellbeing effects of commuting.

In Chapter 3 - Young People's Wellbeing, the researchers utilise data on people of all ages collected from everyone in the household. In particular, they use the youth questionnaire of the Study, which directly asks children aged 10 to 15 about their lives and experiences, as well as questions asked of the adults in the household. For example, Webb investigates the links between mothers, fathers and children's wellbeing, showing that it is the mother's mental health that is central to the family's wellbeing, influencing the health of her partner and her children.

In future Insights we will not only highlight other important policy themes, but illustrate the value of other key features of the Study.

As David notes in his Preface I recently became the Director of Understanding Society. It is an exciting time to lead the Study. The fifth wave of data is now available, providing researchers with rich opportunities to investigate changes in people's lives. As the Study becomes better known, the number and breadth of people using the data and publishing findings from it is growing steeply. Despite the challenge of tracking so much new and cross-disciplinary evidence, this profusion demonstrates the real benefits of investing in longitudinal studies. At the same time, we are encouraging users to get involved in shaping the Study through proposing experiments in the Innovation Panel (see About the Study) or to run Associated Studies, and we ourselves are experimenting with new ways to collect better quality data. The Policy Unit, which is now a little over a year old, is a new way for studies to work with policy makers and is beginning to create a solid foundation for much greater use of the Understanding Society data in government departments than ever before (see Final Word, P37). None of this would have been possible without the vision and hard work of my predecessor – Nick Buck – in establishing such strong foundations for the Study to go forward.



IN THIS VOLUME OF
INSIGHTS WE ARE
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HOUSING

- 09 **Commentary: Current trends need to inform debate about future of housing**
— *Stephen Howlett*
- 10 **The growth of private renting in Great Britain: Characteristics and flows**
— *Dr Paul Sissons and Professor Donald Houston*
- 12 **Through the keyhole of involuntary home moves**
— *Darren Baxter*
- 15 **Financial struggle connected to neighbourhoods**
— *Professor Sarah Brown*



CURRENT TRENDS NEED TO INFORM DEBATE ABOUT FUTURE OF HOUSING

STEPHEN HOWLETT
CHIEF EXECUTIVE, PEABODY TRUST

Housing in the UK has undergone some huge changes since I began my career at the Housing Corporation in the 1970s. We've seen social and cultural components such as households becoming smaller; a house price boom and political decisions which have focused on demand at the expense of supply. We're now faced with a serious shortage of homes in all tenures, and a particular problem of affordability.

Peabody was created by a philanthropic donor, the American banker George Peabody, over 150 years ago. Our history gives us a unique insight into the transformations housing has been through; and all the while Peabody has provided good quality, low cost homes to hundreds of thousands of Londoners. Governments come and go but the need for good quality homes never does.

There is a fantastic value in the national longitudinal data sources we have in the UK. Housing is a long-term sector, but the changes the sector has been through, even in the past five years, will almost certainly continue apace. It's crucial we record and understand the impact of those changes and what they mean for individuals and communities.

The articles in this year's Insights offer an invaluable contribution to the debate on the future of housing; demonstrating trends we may have noticed happening on the ground but now have data to substantiate.

Sissons and Houston's research with data on the private rented sector shows just how diverse the tenure has become. Where the tenure was previously used by young people starting out before they bought their own home, or used for short-term accommodation, the research shows people are now remaining longer in the private rented sector. There are serious policy implications resulting from more families living in the sector, not to mention vulnerable households. The private rented sector is not a well-established tenure, there are pockets of good provision but it is largely unprofessionalised and does not necessarily meet the needs of the large number of people living there. The imperative to improve the sector is now great indeed.

There is strong evidence on the importance of a stable home for people to thrive, and especially for young people to get the best start in life. Baxter's research suggesting a rise in involuntary home moves is therefore worrying. It gives an important indication about the realities of insecure housing, especially for families. The insecurity people face depends, of course, on the

tenure they are living in and for renters, on their landlord. There is an alarming divide forming where some households – home owners or social renters – have better quality, stable homes whilst others – usually private renters – do not. Expanding the number of homes provided by organisations like housing associations, who have an interest in the long-term success of tenancies and communities, is one important way we can move towards a better housing offer for more people.

The research on household repayment behaviour and neighbourhood effects is also an interesting new area to explore. The power and value of community relationships is something which Peabody sees every day on the ground with our residents. Sarah

Brown's research adds to the body of evidence showing that the value of community ties is more than the sum of its parts. The more connected we are to other people in our neighbourhoods, the more likely we are to find the help and support we need. It's an important finding for housing providers who should be striving to provide opportunities for residents to get together; and for policy-makers in government, who should ensure policies do not inadvertently lead to fragmented communities. July's Budget risks putting enormous pressure



THE RESEARCH IN THIS YEAR'S INSIGHTS GIVES CAUSE FOR CONCERN FOR THE FUTURE OF HOUSING

on our communities.

Taken together, the research in this year's Insights gives cause for concern for the future of housing. We are seeing a trend towards more insecurity, less stability and a lower quality housing offer for many people. It's vital we understand the impact of these trends on mixed and stable communities as well as on individuals. We are already seeing the impact of unstable housing on family life – people are being held back from settling down and when people do start families, children can end up living in poor quality or over-crowded housing. Policy-makers should also recognise the benefits of stable housing on the wider community.

Understanding Society, with its household focus, longitudinal data and multi-topic content, brings a unique perspective on the impact of housing and changing nature of families. With multiple waves of data published, it is now becoming a rich resource for research as well as evidence for policy makers and practitioners working in the housing sector and those supporting families and communities.

THE GROWTH OF PRIVATE RENTING IN GREAT BRITAIN: CHARACTERISTICS AND FLOWS

Research by Dr Paul Sissons from the Centre for Business in Society, Coventry University and Professor Donald Houston from Urban Studies, School of Social and Political Sciences, University of Glasgow



TENANTS ARE ON AVERAGE NOW OLDER AND MORE LIKELY TO HAVE CHILDREN LIVING WITH THEM

Issue Examined

The growing reliance on the private rental sector (PRS) to meet housing needs.

Related factors

The characteristics of renters and of people who leave the PRS.

People included

Private renters from Waves 2-4 of Understanding Society (2011-2014) and all waves of its predecessor the British Household Panel Survey (1991-2008). For renter leavers we focus on those aged 16-64 in independent households (i.e., we exclude individuals moving from the PRS into owner-occupation with their parents or a resident landlord).

After a long-period of decline, there has been substantial growth in the private rented sector (PRS) since the early 1990s. In England, the sector now houses 19% of all households. The number of households reliant on the PRS for accommodation has grown as access to other housing sectors has become more constrained - the social rented sector due to the sale of council housing and owner-occupation because of increasing unaffordability.

This research addresses the nature of tenure change in recent decades. It first examines characteristics of tenants in the private rented sector and then describes changes in the flows of individuals from the PRS to other tenures. The research is currently being extended to identify the most important determinants of making a transition from the PRS into owner-occupation, and to examine whether these have changed over time.

The growth of the private rented sector has been associated with a number of changes in the characteristics of tenants (see chart, right). These include:

- People are remaining in the sector to an older age. The proportion of private rented sector tenants aged between 35 and 44 increased from 13% to 16% between 1991-2000 and 2001-2008, before growing to 20% during the period 2011-2014.
- More families are now found in the private rented sector. The number of individuals living in the tenure with children aged 16 or below increased from 21% to 25% between 1991-2000 and 2001-2008, by 2011-2014 this had risen to 36%.

The rate at which tenants leave the private rented sector to enter owner-occupation has been declining over the past fifteen years. Excluding cases where individuals move into owner-occupied housing with their parents (the majority of whom will be returning to the parental home) or with a resident landlord, we find that between 1999-2001 the proportion of tenants leaving the private rented sector for owner-occupation annually was 17%; by 2006-2008 this had fallen to 14%. Over the period 2011-2014 this declined markedly to around 7%, meaning that renters are now moving into owner-occupation at a much slower rate than has been the case in the past two decades. Flows from the private rented sector to the social rented sector have also declined from around 8% annually in the early 1990s to 5% by the end of the 2000s.

The age at which PRS tenants are moving into owner-occupation has also increased over time. The average age of exiting the PRS for owner-occupation grew by more than 2.5 years between the early 1990s and late 2000s; with an average age of exit of 32.8 years between 1991 and 2000, and of 35.5 between 2001 and 2008. A similar average is observed for the 2011-2014 period.

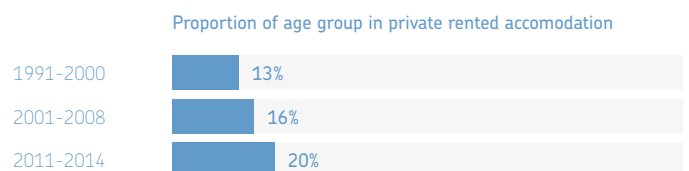
As access to other tenures has become increasingly constrained, the private rented sector has experienced significant growth. The role of the tenure also appears to be shifting. In particular, PRS tenants are on average now older, and more likely to have children living with them.

There are a number of important implications to these findings. The private rented sector has grown beyond a niche tenure catering largely for transitory groups such as students or mobile workers. For families (and other tenants) a central issue relates to the relative lack of security of tenure in the private rented sector. This might present a particular issue, for example, for parents with school age children. Governments in the UK are tackling issues relating to private renting

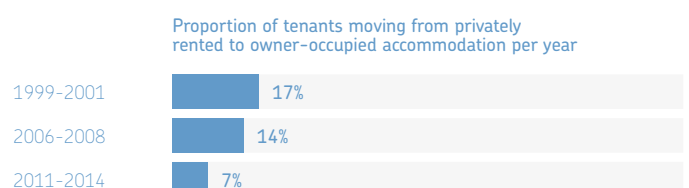


differently. In England and Wales a ‘family friendly model’ of private renting is being introduced; whereas in Scotland new legislation has been created. Both seek to ‘change the culture’ of private renting. The extent to which such a ‘change of culture’ will occur is as yet unknown. There is also a sizeable minority of tenants in the sector under financial pressure, around one in ten tenants report that they have problems with paying housing costs. The quality of housing in the sector is comparatively low and suffers from under-investment. Institutional investment in the private rented sector, which might help address some of these issues, remains low.

Private rented sector tenants aged 35-44



Annual average rate tenants move from rented to owner-occupied accommodation



THROUGH THE KEYHOLE OF INVOLUNTARY HOME MOVES

Research by **Darren Baxter** from the *University of York*



THESE COUNTER-INTUITIVE FINDINGS SHOULD BE USEFUL TO POLICY MAKERS AND HOUSING PROFESSIONALS IN GUIDING THEIR FOCUS IN REDUCING UNWANTED HOME MOVES

Issue examined

Involuntary home moves.

Related factors

Which types of households and individuals move involuntarily, and how often this happens.

People included

Households in wave two of the British Household Panel Survey, who remained in the Study until wave 4 of Understanding Society with no more than three missing waves. 4,026 people in total.

Involuntary home moves have been of increased policy, media and academic interest in recent years. However research has typically considered involuntary home moves as singular events rather than exploring the extent to which these moves may occur multiple times over the life course. This research combines 20 waves – two decades – of the British Household Panel Survey and Understanding Society in order to determine the extent to which individuals move multiple times involuntarily and to assess the characteristics of those who do so.

Involuntarily mobility occurs when an individual's home is destroyed or their access to it is removed and they have limited control over the timing or occurrence of that home move. This includes people who move after a divorce or separation, have had their house repossessed, need care in sheltered accommodation, or move for health reasons. Involuntary mobility may also occur when an individual still has access to the home but circumstances in their lives or the local environment mean remaining within it is less reasonable than moving. These include moving for job-related reasons, or due to issues in their neighbourhood, such as unfriendliness, isolation or the absence of facilities.

Over the twenty Study waves, first in BHPS and now Understanding Society, 16% of adults moved home involuntarily at least once and a further 7% moved more than once. This means that of all those who moved home involuntarily around a third did so two or more times. What's more, 11% of moving adults had only ever made involuntary moves (see infographic, right).

Young, single adults are more likely than other household types to move multiple times voluntarily. 14% of those aged below 34 had moved two or more times compared to 3% for the 35 to 54 age category and only 2% of those aged over 55.

However, the picture shifts when looking at those who have moved multiple times involuntarily. This group still tends to be young but has some notable differences when it comes to family type.

Single adult households move more often than other household types, but these moves are more often voluntary than those made by other households who move often. To put it another way, young single adults make more voluntary moves, but fewer involuntary moves than other household types. This suggests that despite making multiple moves, young single adults are avoiding a similarly high proportion of forced moves. Whereas couples and lone parents, though less likely to move overall, are as likely to move multiple times involuntarily as their single counterparts.

These counter-intuitive findings should be useful to policy makers and housing professionals in guiding their focus to reduce unwanted home moves. It is interesting that couples and lone parents, who might have been expected to be more stable, are as likely to move involuntarily multiple times. This is of particular interest given the number of households moving which include children.

BREAKDOWN OF ALL MOVES



TYPES OF INVOLUNTARY MOVING

Forced moves occur when an individual's home is destroyed or their access to it is removed or controlled. Coerced moves occur when an individual still has access to the home but personal or environmental circumstances mean it's easier to move.



Job related



Home is destroyed



Divorce or separation



Problems in the neighborhood

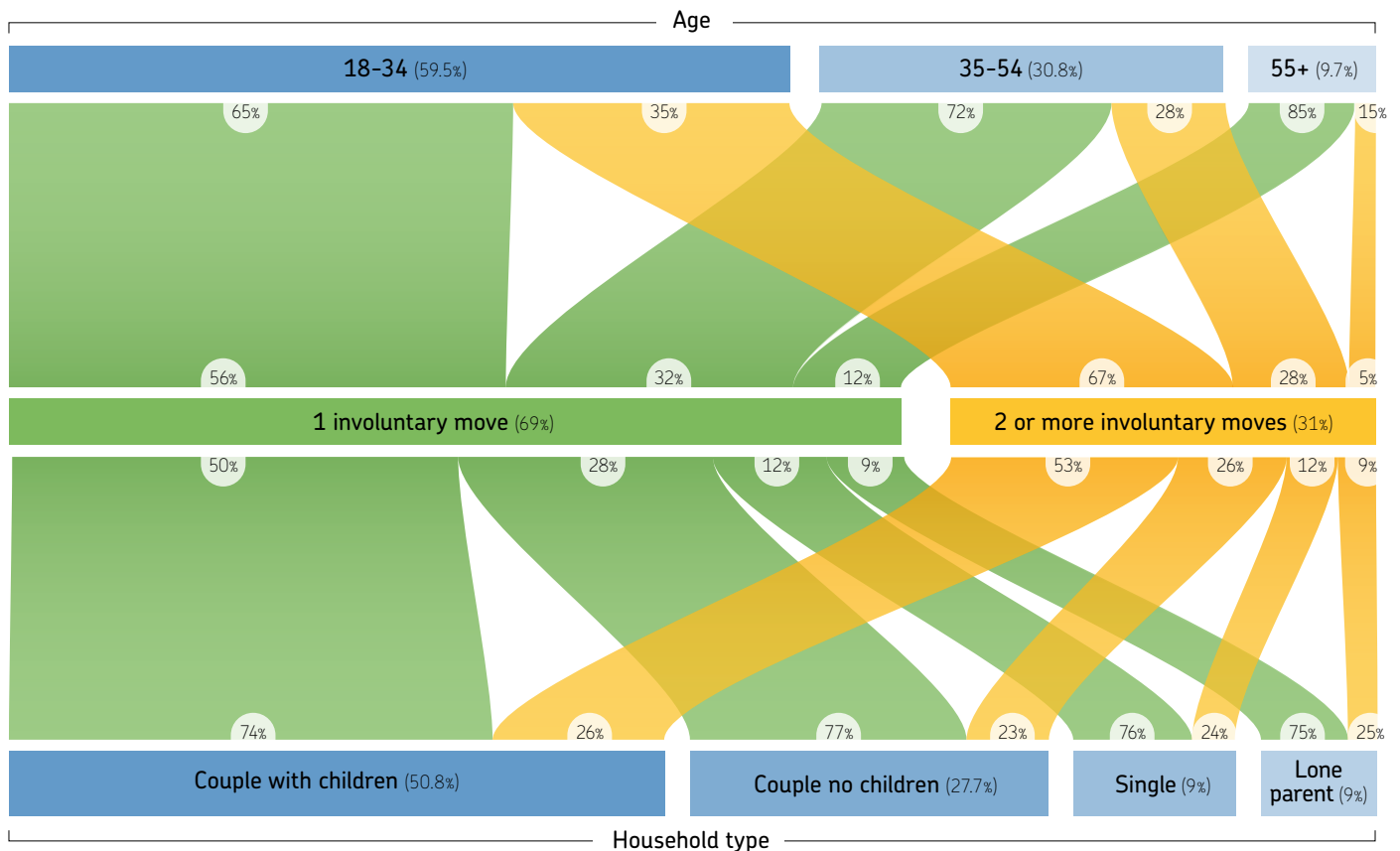


Eviction or repossession

BREAKDOWN OF INVOLUNTARY MOVES BY AGE AND HOUSEHOLD TYPE

The graphic below traces involuntary moves by age and household type between 1991 and 2011. For example, it shows that among those who report moving involuntarily, just over half are a couple with children (in terms of household type). This is surprising given that involuntary moves for such household

would be disruptive. Moreover, among this group approximately a quarter moves home involuntarily twice or more. In fact, this group accounts for more than half of all respondents who report moving two or more times involuntarily.





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IN GENERAL, HOUSEHOLDS
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A LOWER PROBABILITY OF
BEING IN ARREARS WITH
HOUSING COSTS

FINANCIAL STRUGGLE CONNECTED TO NEIGHBOURHOODS

Research by *Professor Sarah Brown from the University of Sheffield*



THE INFORMAL PROVISION OF SUPPORT AND ADVICE IN NEIGHBOURHOODS IS IMPORTANT FOR HOUSEHOLDS IN FINANCIAL DIFFICULTY

Related factors
Neighbourhood ties.

Issue Examined
Arrears in household payments.

People included
48,906 individuals in 17,723 households in wave 1.

The 2008 financial crisis revealed the financial vulnerability and stress faced by many households in the UK. It is apparent that households encountering financial problems may find themselves falling behind with meeting financial obligations such as rent, mortgage payments or household bills and hence fall into arrears with respect to such payments. Such arrears have been regarded by policymakers and academics as one of the most direct measures of financial stress at the household level. This research investigates the association between repayment behaviour at the household level and neighbourhood ties in order to help to identify potential mechanisms of support for households experiencing financial problems and stress.

In general, households in regions with strong neighbourhood ties have a lower probability of reporting being in financial arrears. This relationship is particularly strong for housing costs. Given that falling into arrears in housing costs can ultimately lead to eviction or repossession, this finding may reflect the importance of meeting mortgage or rent payments for continuing to live in a particular area. The relationship is most pronounced in regions characterised by a high density of individuals who feel able to turn to someone in the neighbourhood for support or advice. Similarly, living in an area where a large proportion of people feel that they are able to borrow things or exchange favours from people in the neighbourhood is associated with a lower probability of being in arrears with housing costs.

Such findings are consistent with the interpretation that the informal provision of support and advice in neighbourhoods is important in providing support for those households in a position of financial difficulty. This is further endorsed by the finding that the probability of being in arrears with housing costs is lower in regions where there is a high density of individuals who regularly stop and talk to people in the neighbourhood thereby highlighting the potential importance of informal social interaction in mitigating financial problems.

Neighbourhood and community groups, which facilitate social interaction and neighbourhood ties, may be effective channels of support for financially vulnerable households. In areas where there is a high concentration of people expressing a sense of belonging to the neighbourhood as well as identifying with individuals in the neighbourhood, there tends to be a lower likelihood of being in arrears with housing costs. This supports the idea that avoiding arrears in housing costs may be related to a desire to conform with 'socially acceptable' behaviour.

More accurate forecasting of repayment problems and being in arrears may serve to provide a more comprehensive regional picture of financial distress and vulnerability for policymakers. In particular, the findings highlight the potential role of community and neighbourhood influences in financial behaviour and decision-making at the household level and the support and advice that such networks may provide. Neighbourhood ties and social interaction may then provide informal channels of support and/or financial advice to households facing repayment difficulties. It is important to acknowledge that the analysis serves to identify associations rather than causal relationships and hence the findings should be interpreted in this context.

HEALTH BEHAVIOURS

- 17 **Commentary: Building a better understanding of behaviour change**
— *David Buck*
- 18 **Investigating the effects of active commuting**
— *Dr Ellen Flint and Professor Steven Cummins*
- 20 **Health burden of the daily commute**
— *Dr Luke Munford, Professor Nigel Rice and Professor Jennifer Roberts*
- 23 **Access to sports facilities: a hurdle to physical activity?**
— *Dr Heather Brown, Dr Frauke Becker and Mr Kofi Antwi*
- 24 **The social and spatial context of urban health inequalities**
— *Jens Kandt*



BUILDING A BETTER UNDERSTANDING OF BEHAVIOUR CHANGE

DAVID BUCK

SENIOR FELLOW, PUBLIC HEALTH AND INEQUALITIES AT THE KING'S FUND

I should come clean. I have both a personal and professional interest in writing this commentary. I am an archetypal rail commuter, biting my fist as we snake into London and, I'm very interested in how our health behaviours cluster and why. Therefore, I'm pleased to see insights on both in this selection of research.

Two papers explore the effects that commuting has on our health. Each makes use of different aspects of Understanding Society and its rich data. The first looks at commuting times and impacts on biomarkers of cardiovascular health; the second looks at the effect that changes in commuting time have on self-reported measures of wellbeing. Both also include analysis by mode of transport and the differential effects on women and men.

Flint and Cummins ask whether active travel and public transport are associated with better cardiovascular health than taking the car. Male active commuters have double the levels of "good cholesterol" compared to their driving counterparts. This effect is not found for women, but female active commuters do have lower levels of triglyceride (see page 18) than those who drive.

Like much good research, the study by Munford et al actually raises further questions than it can answer, due to its surprising and thought-provoking results. Particularly, it finds that women are affected more by the negative aspects of commuting and an increase in commuting time compares to becoming unemployed.

Lots of thoughts occur including whether we can reliably explain positive and negative effects on wellbeing in terms of other common events such as unemployment that the public and policy makers can better relate to. For example, does the comparison to unemployment mean that an extra 15 minutes commuting makes women more likely to withdraw from the workforce, or seek to switch jobs in order to improve their wellbeing? Does the finding that women are affected more than men link to relative roles in caring (as the authors speculate)? Do long distance commuters factor in the idea that, "it's going to be a pain"? In other words, are threshold effects in play? I must say there is an element of that for me personally. More work is needed to understand and check the robustness of these effects, but they do show how important commuting is to our wellbeing.

The important question here is how these new findings play into cost-benefit analyses of different forms of travel and decisions being made on which transport schemes to invest in, particularly in relation to the pros and cons of cycling and traffic-related mortality risk. Both these studies find important gender differences. It seems that in terms of the effects of

commuting on health, men may be from Mars and women from Venus. This points to the importance of developing health policies that take account of gender differences in behaviours and examine the causes of these.

Brown et al look at whether the perceived difficulty in accessing sports facilities is associated with reductions in physical activity, and whether this differs in men and women or by socio-economic status. Whilst the findings reinforce the results of previous studies, further research is needed to understand how perceptions themselves are formed, and whether they are related to motivation, previous use or knowledge of sporting facilities.

The final study looks at the clustering of health behaviours. The King's Fund has been involved in papers using Health Survey for England and other data on how clustering of health behaviours has been changing over time. In one of these we identified four clusters, or groups, with different combinations of health behaviours. Kandt follows a similar approach but includes a deeper cultural theory to develop 10 "health milieus" and their link to health behaviours and self-reported health. Impressively, the study also links to the 2011 census allowing a mapping of where the milieus are on the ground. Kandt argues, rightly, that health lifestyle behaviours are part of wider overall lifestyle routines; the more we understand this the more likely it is that our actions will be tailored to our circumstances. For me, the next step is to discover how and in

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WHAT A DIVERSE
COLLECTION OF STUDIES,
EACH RAISING DEEP
QUESTIONS AS WELL
AS ANSWERING THEM

what way different clusters or milieus map on to other ways of grouping the population for policy targeting, for example with the Healthy Foundations model developed for the Department of Health in its efforts to understand the complexities of health behaviour change. That holds out the promise for a truly comprehensive and parsimonious understanding of behaviour change that is rigorous but practical enough to be useful to those in practice and policy.

So, what a diverse collection of studies, each raising deep questions as well as answering them. Finally, for the detectives amongst you, one common link between this diversity of findings is the amount of time we spend sedentary. In a recent interview, Una O'Brien, the Permanent Secretary of the Department of Health revealed that she stands to do her emails, phone calls and some meetings. Perhaps she has been reading these Understanding Society studies too. If she has, she may well be reaching for her bicycle to get to work next, if she doesn't already...

INVESTIGATING THE EFFECTS OF ACTIVE COMMUTING

Research by Dr Ellen Flint and Professor Steven Cummins from the London School of Hygiene & Tropical Medicine, Department of Social and Environmental Health Research

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AMONG WESTERN POPULATIONS LIFESTYLES HAVE BECOME INCREASINGLY SEDENTARY: TWO-THIRDS OF THE UK POPULATION ARE INSUFFICIENTLY ACTIVE

Issue Examined

Examine the importance of active commuting and cardiovascular health.

People included

Total of 6855 participants. 3205 male, 3650 female.

Related factors

The Study utilises blood biomarker data (see box), commuting data and individual economic and sociodemographic data available in Understanding Society to investigate the association between an individual's health, as measured by their cholesterol and triglyceride level which are associated with the likelihood of a cardiovascular disease and their mode of transport to and from work.

Research consistently shows that physical activity is good for our health. Engaging in regular exercise protects us from a range of health problems such as cardiovascular disease (CVD) and type 2 diabetes. However, among Western populations lifestyles have become increasingly sedentary: two-thirds of the UK population are insufficiently active. Promoting and enabling active lifestyles is therefore a key public health challenge. Commuting to work using active transportation modes has been recommended by National Institute for Health and Care Excellence as a readily adopted and easily maintained way of incorporating more exercise into daily life. This study set out to investigate whether Understanding Society participants who commuted to work by foot, bicycle or public transport had better cardiovascular health than their car-commuting counterparts. It uses objective measures of the risk of cardiovascular health based on analysis of blood samples participants gave.

The findings show that compared to their car-using counterparts, male active commuters were more than twice as likely to have protective levels of HDL 'good' cholesterol (see p18). This was the case despite statistical adjustment for a raft of other socioeconomic, behavioural and demographic factors which could independently influence both cholesterol and commuting behaviour. However, this effect was not observed for the women in the sample; in future research we hope to explore the reasons behind this in more detail.

We also find that women who commute via active modes were 30 percent less likely to have harmful triglyceride levels (see p18) than women who drove to work. This was the case after accounting for other factors as above including age, general health, educational attainment, occupational social class, occupational or leisure physical activity and relevant medications.

Investigating the relationship between active commuting behaviour and biomarkers such as cholesterol strengthens the evidence base by illuminating a hitherto unexamined part of the CVD causal chain. Previous studies have observed a significant, independent relationship between active commuting and diagnosed CVD, bodyweight and body composition. This study suggests that the association also exists at the blood analyte (see p18) level. Research using blood biomarker data to illuminate the interplay between social and biological factors is an exciting new area of scientific enquiry, enabled by studies such as Understanding Society.

Results are based on data at one particular point in time; albeit a very comprehensive and detailed snapshot. However this does mean we cannot use these cross-sectional data to infer whether active commuting 'causes' protective levels of good cholesterol. What is clear from our study is that men who commuted actively had significantly higher levels of good cholesterol than would be seen by chance alone. Women who commuted actively had significantly lower levels of triglycerides than would be seen by chance alone. Additionally, this is irrespective of other health, social, economic, behavioural and demographic factors which might affect both.

These findings are relevant to a wide range of organisations responsible for improving people's health, including public sector and third sector policymakers and practitioners in the fields of public health, transport, urban planning and active design. Results suggest we should support policies to increase functional physical activity whilst being mindful of the fact that important gender differences exist. Further research could illuminate the drivers behind these gender differences.



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WHAT IS CLEAR FROM OUR STUDY IS THAT MEN WHO COMMUTED ACTIVELY HAD SIGNIFICANTLY HIGHER LEVELS OF GOOD CHOLESTEROL THAN WOULD BE SEEN BY CHANCE ALONE

BIOMARKER JARGON-BUSTER

Biomarkers:

Objective measures of biological processes in the body; they provide doctors and researchers with information on how well different parts of the body are functioning, and identify people who are at risk of disease before they necessarily experience any symptoms.

In this article, three biomarkers based on the analysis of blood samples given by the respondents, are used. They are part of a set of biomarkers known as lipids or 'fats in the blood', which are risk factors for cardiovascular disease (CVD).

Cholesterol:

A fatty substance known as a lipid that is a vital component of the lining of cells. Because it is not soluble in blood, it is transported around the body in cells known as lipoproteins.

High-density lipoprotein (HDL):

Carries cholesterol away from cells and to the liver where it is broken down. For this reason HDL is often referred to as 'good cholesterol'.

Triglycerides:

Fats that are transported in the blood, which come from dietary sources or from the liver. They may be taken up by cells and used for energy or stored as fat. High levels of triglycerides are often found with low levels of HDL cholesterol.

If there are high levels of total cholesterol or triglycerides in the body, a build-up can occur in arteries, restricting the blood flow to the heart, potentially leading to blood clots or heart attacks. Total cholesterol and triglycerides are risk factors for CVD, while HDL-cholesterol is thought to be protective against it.

HEALTH BURDEN OF THE DAILY COMMUTE

Research by *Dr Luke Munford* from the *Manchester Centre for Health Economics, University of Manchester*, *Professor Jennifer Roberts* from the *Department of Economics, University of Sheffield* and *Professor Nigel Rice* from the *Centre for Health Economics and Department of Economics and Related Studies, University of York*

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AN INTERESTING FINDING FROM THE STUDY IS THAT IT IS CONSISTENTLY ONLY WOMEN WHO SUFFER FROM INCREASES TO SHORTER COMMUTES, AND NOT MEN

Issue Examined

Commuting and individual wellbeing.

People included

11,505 individuals in waves 1 to 4 of Understanding Society.

Related factors

The Study investigates the causal effects of an increase in commuting time on individual wellbeing. It also considers whether there are differences by gender exists or whether the association changes based on mode of transport.

Commuting places a significant constraint on the time-use of many working people. Over the recent past, average commuting times have risen in a number of developed countries and it has long been recognised that the burden of the daily commute is potentially detrimental to health and wellbeing. This research measures the burden of commuting by removing the effects of other factors that influence commuting decisions, such as quality of housing, neighbourhood effects and job characteristics.

Results indicate an increase in commuting time reduces wellbeing. For example, if an individual's one-way commute increased by 10 minutes, their wellbeing is reduced, and the size of this effect is statistically significant. When we consider men and women separately, we only observe significant reductions in wellbeing for women, and not for men. A 10 minute increase in female commuting time reduces their wellbeing by just under 1/10, to put this in practical terms this is about two-thirds of the wellbeing loss for a woman becoming unemployed. When we consider self-reported general health, we again only observe a statistically significant reduction for women, and not for men. A half-an-hour increase in commuting time reduces female health by around 1/20 of the effect of the onset of rheumatoid arthritis.

The study also considers the effect of mode of travel, exploring differences between (i) car users; (ii) public transport users; and (iii) active commuters (who walk or cycle). For car users, increases in commuting times reduce both health and wellbeing for females, but not for males. There are no health and wellbeing penalties associated with longer commutes amongst public transport users for either men or women. Amongst those who walk or cycle, there are reductions in wellbeing for women, but not for men. There are no health penalties associated with longer commutes for active commuters.

In all cases, we find that it is those individuals with the shorter commutes (below the median) who are negatively affected by increases in their commuting time.

One possible explanation is that it is relative changes in commuting times which matter most. For example, consider two similar individuals with initial commutes of 15 minutes for individual A and 60 minutes for individual B. If individual A and B experience a ten minute increase in their commuting time then the percentage increase in commute time for individual A is greater than that of individual B, and hence individual A's health and wellbeing suffers more.

An interesting finding from the study is that it is consistently only women who suffer from increased commutes, and not men. One explanation is that women, on average, have shorter commutes. A second speculative explanation is that women perform a greater share of household tasks, and hence the opportunity cost of commuting (time that cannot be spent doing other things) is greater for females than for males. However further work is needed to determine exactly why these gender differences exist.

The research findings highlight the importance of commuting time for health and wellbeing. Policies which improve transport networks, and hence reduce commuting times, will improve the health and wellbeing of females but not men. However, the findings suggest that to achieve meaningful gains in health and wellbeing sizeable falls in commuting times are required.



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AMONG INDIVIDUALS WITH LONG
COMMUTES, AN INCREASE IN
THEIR COMMUTE TIME DOES NOT
LEAD TO A DECREASE IN THEIR
HEALTH AND WELLBEING

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EVIDENCE SUGGESTS THAT ENVIRONMENTAL FACTORS ARE A KEY CONTRIBUTOR TO PHYSICAL ACTIVITY PARTICIPATION RATES IN COMMUNITIES



ACCESS TO SPORTS FACILITIES: A HURDLE TO PHYSICAL ACTIVITY?

Research by *Dr Heather Brown, Dr Frauke Becker and Kofi Antwi* from the *Institute of Health and Society, Newcastle University*

“ OTHER FACTORS THAT REDUCE THE LIKELIHOOD OF REPORTING BEING PHYSICAL ACTIVE ARE HAVING YOUNG CHILDREN AND BEING OBESE IN THE PREVIOUS YEAR

Issue Examined
Subjective access to sports facilities and socioeconomic position.

People included
11,101 adults across waves 1 and 2.

Related factors
The study investigates how much of the variation in access to sports facilities can be explained by an individual's socioeconomic position whilst controlling for a number of other important sociodemographic and economic individual and household characteristics.

Non-communicable diseases such as cardiovascular disease and type 2 diabetes are the leading cause of death in the UK. Sedentary behaviour is a key risk factor for non-communicable disease. Participation in physical activity in the UK tends to follow socioeconomic patterns which further worsen health inequalities. Evidence suggests that environmental factors are a key contributor to physical activity participation rates in communities, with access to sports facilities one important element of this.

This study explores the relationship between perceived difficulty in accessing sports facilities, being physically active, and socioeconomic status. If individuals from lower socioeconomic groups such as manual workers are more likely to experience or report barriers affecting their physical activity than more affluent counterparts such as individuals in managerial or professional occupations, then this may help to explain health inequalities.

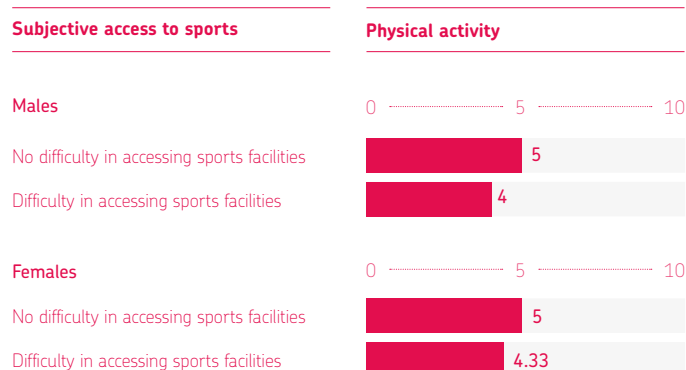
Perceived difficulty in accessing sports facilities is significantly and positively associated with lower levels of physical activity. Some of this association can be explained by differences in socioeconomic factors; about a quarter of the difference for women and one-eighth of the difference for men.

Other factors that reduce the likelihood of reporting being physically active are having children under the age of 12 living in the household and being obese in the previous year. Interestingly, the negative association between having young children and being physically active is larger for men whereas the negative association between being obese in the previous year and being physically active is larger for women. Men and women living in the Southwest are more likely to report being physically active than respondents living in London.

Sub-group analysis on the reasons that respondents give for having difficulty in accessing sports facilities show that cost is only a significant factor in explaining the association between physical activity and perceived difficulties accessing facilities for women.

These results are similar to those found in previous studies investigating links between neighbourhood environment and physical activity but builds upon existing work by highlighting the importance of socioeconomic status as a key moderating factor explaining how perceived barriers to accessing sports facilities are associated with being physically active.

Results could support the implementation of policy by local authorities to improve physical activity by identifying external factors associated with being physically active. The analysis and findings can also be used to develop interventions to reduce perceived barriers to physical activity and promote physical activity improving population health and reducing health inequalities.



THE SOCIAL AND SPATIAL CONTEXT OF URBAN HEALTH INEQUALITIES

Research by Jens Kandt from the University College London, Department of Geography

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BLANKET POLICY INTERVENTIONS, SUCH AS SMOKING BANS ON PUBLIC SQUARES OR THE INTRODUCTION OF 'SIN TAXES', WILL ONLY GENERATE LIMITED SUCCESS

Issue Examined

Health and health-relevant behaviours.

People included

41,639 individuals present in waves 2 and 3 of Understanding Society.

Related factors

The social, geographical and lifestyle context of health and health-relevant behaviours.

As non-communicable diseases rise to the leading cause of death worldwide, the World Health Organisation has ascertained in a recent report that behavioural risk factors pose the strongest threat to human health. Behavioural change campaigns are viewed as a way to reduce risks by persuading individuals to make healthier choices. Yet recent reviews of evidence found that such interventions are largely unsuccessful, if not counter-productive, because they fail to recognise the everyday life context, pragmatic logics and routines, in which behaviour is rooted, including their wider social determinants.

This research explores how health is associated with health-relevant behaviours - smoking, nutrition and physical activity and how these behaviours are distributed geographically. It conceptualises behaviours as 'social practices', which occur within a consciously or unconsciously adopted framework of social beliefs, subjective orientations and biographical tendencies, compounded by standard of living.

The research uses Understanding Society to characterise lifestyles - health milieus - based on health-relevant behaviours, enriched with information on socioeconomic circumstances, social integration, social and cultural participation, civic orientation and media use (see infographic, right). This notion of health milieus is developed to describe groups with distinct health-relevant practices in the context of everyday life routines, subjective orientations and perceptions.

Analysis of the data helps to identify 10 health milieus, which differ in their geographical distributions and which can be broadly grouped by socioeconomic circumstances. Three milieus Enduring Isolation, Unconcerned Starters and Retiring Generation are of lower status and exhibit unhealthy habits in particular with respect to physical activity and diet. But given their demographic and behavioural context, the drivers of those habits differ for each milieu and, respectively, are likely to constitute enduring experience of social exclusion, minor concerns about healthy living and retirement from hard labour in old age.

The four wealthier milieus Established Cultural Consumers, Rising Extroverts, Committed Citizens and Individualistic Independence show minor differences in overall healthy behaviours; they nevertheless reveal different behavioural tendencies with respect to social, civic and cultural participation. Another set of milieus with medium levels of income and basic qualifications, Locally Anchored, Laid-back Detachment and Digital Age Autonomy, vary with respect to levels of exercising, social orientations and leisure activities.

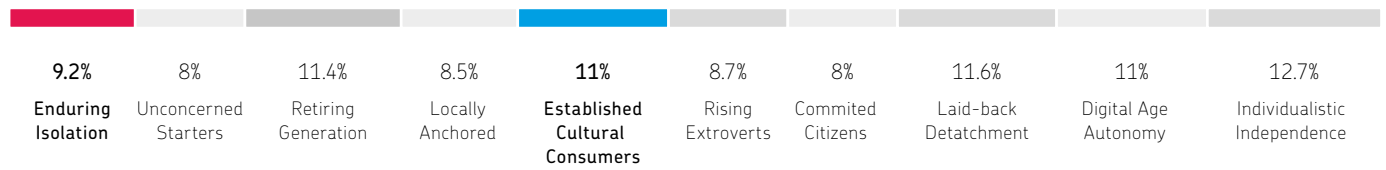
The findings show that the milieus also diverge substantially on a range of health indicators beyond what might be expected based on income (known as the social gradient in health). For example, members of the Enduring Isolation milieu are more than twice as likely as the Established Cultural Consumers to suffer from at least one diagnosed health condition despite similar age structure of the two milieus.

The research from this project is important in highlighting that health-relevant behaviours are part of overall lifestyle routines. Smoking and poor diet do not occur in isolation but are associated, in addition to social status, with a range of attitudinal, behavioural and psychological factors that structure and are structured by habits that directly affect health. These findings are immediately relevant for the design of interventions, as they highlight the need to address a range of associated lifestyle aspects and their social determinants rather than a single habit, such as smoking.

Hence, blanket policy interventions, such as smoking bans on public squares or the introduction of 'sin taxes', will only generate limited success. A mix between generic interventions and area-based initiatives that address the social root causes of milieus (increasing economic capital, improved access to social capital, e.g. to community services, affordable leisure, personalised health advice) should be considered as alternatives to target milieus and their specific material, behavioural and social contexts.

This research shows how Understanding Society data can be used to support intervention design; given that it has extensive information on lifestyles and its breadth of census-compatible socio-demographic information. Studying the different health milieus and their inferred geographies has potential to inform systematic and comprehensive debate about what it takes to encourage healthier lifestyles.

POPULATION BREAKDOWN

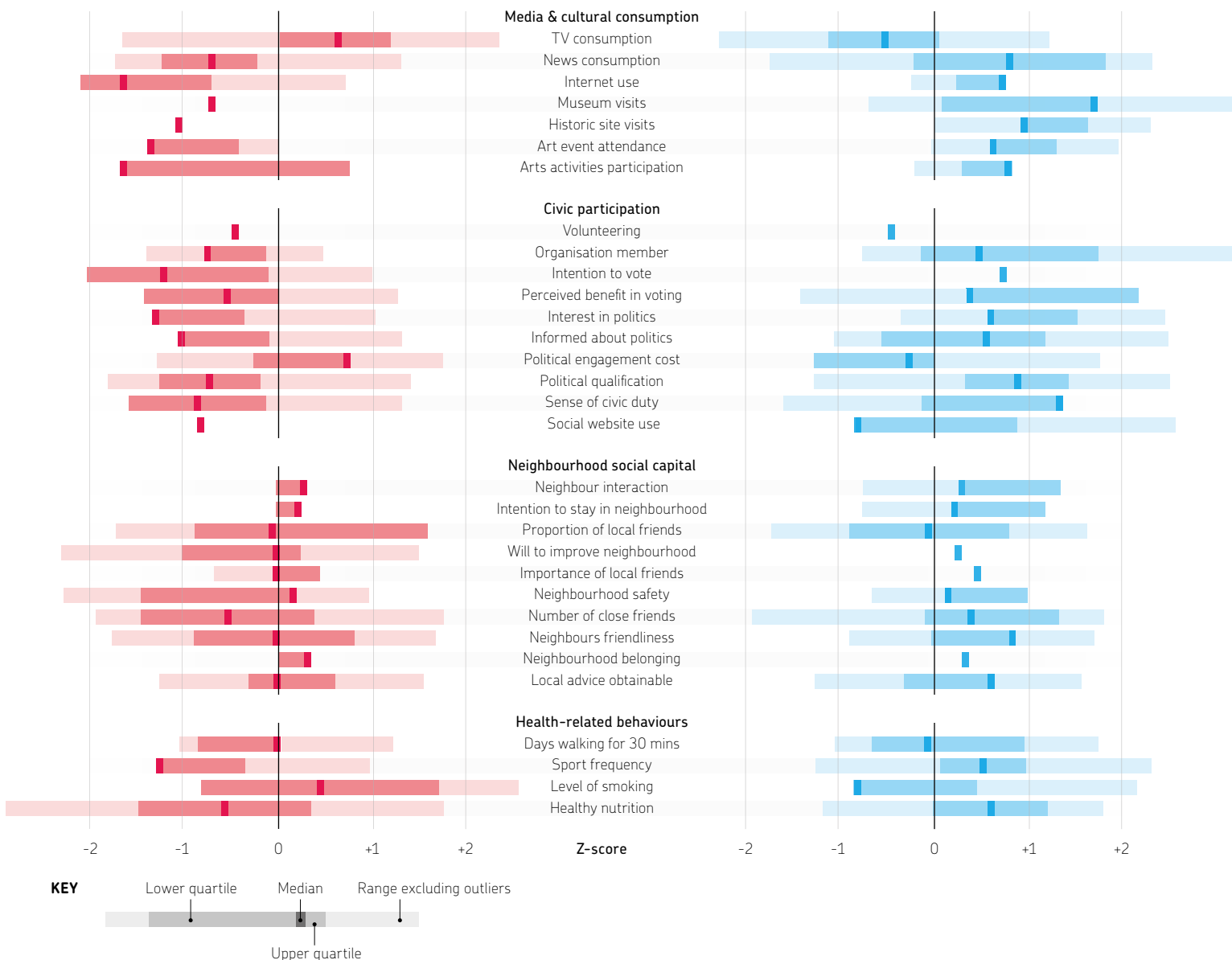
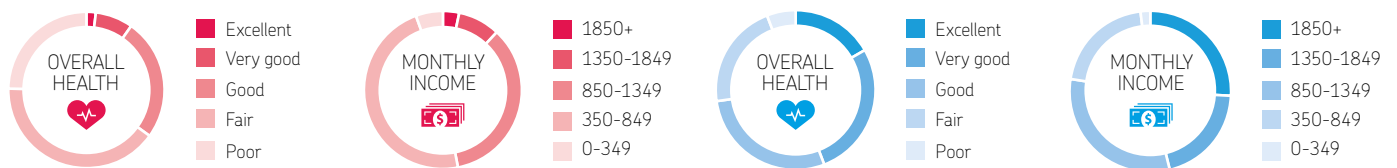


ENDURING ISOLATION

The **Enduring Isolation** milieu leads introvert, less active lives with low levels of physical activity, poorer nutrition and signs of social exclusion, enforcing psychosocial pathways that contribute to a quick depletion of biological capital.

ESTABLISHED CULTURAL CONSUMERS

Established Cultural Consumers form an affluent milieu that lead materially comfortable and active lives marked by manifold cultural consumption, helping to build material and psychological assets to maintain good health.



YOUNG PEOPLE'S WELLBEING

- 27 Commentary: Winning the economic argument for doing the right thing
— *Professor Paul Burstow*
- 28 Parent-child relationships count the most, more than friends or siblings
— *Dr Deniz Yucel and Dr. Anastasia Vogt Yuan*
- 30 Connections between parent and child wellbeing
— *Dr Elizabeth Webb*
- 33 Neighbourhood influences on child mental wellbeing and behaviours
— *Dr Ivy Shiue*



WINNING THE ECONOMIC ARGUMENT FOR DOING THE RIGHT THING

PAUL BURSTOW

PROFESSOR OF HEALTH & SOCIAL CARE, CITY UNIVERSITY

Relationships and places matter, they play a significant role in shaping who we are, how we act and how satisfied we are with our lives. Wellbeing is not simply about the absence of mental health problems but how satisfied we are with the quality of our lives, our day-to-day emotional experiences and our wider mental wellbeing.

In a recent international comparative study of children's life wellbeing in 15 countries, The Children's Society ranked children in England 14th out of 15 for satisfaction with life as a whole. Much more needs to be done. The three studies in this chapter underscore the value of adopting a wellbeing lens in research and in developing public policy responses. With a particular examination of young people's lives they demonstrate the value of approaches that tackle root causes of poor wellbeing and mental health problems.

But for these findings to have real impact they need to link to the public policy imperative: the challenge of finding policy approaches that reduce lifelong health costs. NHS England Chief Executive Simon Stevens has called for a major upgrade in preventative health policy to bridge the NHS £30 billion gap.

The finding by Yucel and Vogt Yuan that parent-child relationships, particularly with the mother, are the most significant influence over young teenagers' self-reported life satisfaction reinforces the need to invest in evidence-based family interventions.

There is a strong body of research to support early interventions to support secure attachment between parents and children which is so important for child development. Programmes like Mellow Parenting, for example, help parents with simple and practical strategies to help them confidently manage their children's – and their own – emotional behaviours, so preventing problems developing.

When this wider evidence is read along with the finding by Elizabeth Webb, that the mental health of the mother is central to the wellbeing of the whole family, this further reinforces the case for early intervention and whole family support. Poor maternal mental health can have profound consequences for mothers, and for their children.

Wellbeing services are needed that promote wellbeing and boost self-esteem. An example of this approach can be seen in Sandwell where they have set up an Esteem Team which supports people with mild to moderate mental health conditions and complex social needs at an early stage. The aim is to prevent deterioration and admission to secondary care by offering guided therapies and tools for self-help.

The importance of place is underlined by Ivy Shiue's finding that there is an association between neighbourhood dissatisfaction and poorer mental health. While investing in young people's mental health and family support will pay dividends there is a need to include the psychological perspective in spatial planning, looking at the role of wider settings in the community.

One area where this psychological perspective is relevant is school. Every school should be equipped to promote emotional wellbeing. Education standards agencies such as OFSTED should include wellbeing in its inspection regime. A whole school approach that integrates wellbeing into the ethos, culture, rhythms and core business would help to ensure the impact of environment on mental health and wellbeing was not overlooked.

The think tank 2020 Health recently argued that every secondary school, or chain of schools, should have a Head of Wellbeing. There is a strong case for it. Education professionals see a clear need to raise wellbeing support for both pupils and staff. The evidence demonstrates the economic sense and health benefits of prevention and early intervention. Taken together, the studies show that improving young people's

wellbeing requires taking into account all the 'moving parts' that contribute to wellbeing – positively and negatively. Public policy and service delivery need to focus effort on early identification and support for the whole family. Initiatives that equip parents to form good relationships with their children lay lasting foundations as a child develops.

There is a need for a more coordinated approach across government on mental health and the family. Understanding the interdependencies of different government departments' policies and interactions with families can help to improve the design of public policy and public services.

Adopting a wellbeing lens right across government and using it to measure the impact of public policy interventions was something the CentreForum Commission on Mental Health recommended. The absence of this lens and the lack of a coordinated approach to prevention and early intervention already cost the public purse and represent a huge waste of human potential. Studies, such as Understanding Society, with measures that take into account the context of young people's lives, are providing a deeper understanding of the drivers of wellbeing. A failure to act, using the mounting evidence now at our disposal, is condemning yet more generations of children and young people to lives less well lived.



THERE IS A NEED FOR A MORE COORDINATED APPROACH ACROSS GOVERNMENT ON MENTAL HEALTH AND THE FAMILY

PARENT-CHILD RELATIONSHIPS COUNT THE MOST, MORE THAN FRIENDS OR SIBLINGS

Research by Dr Deniz Yucel, Department of Sociology at William Paterson University of New Jersey and Dr Anastasia Vogt Yuan from the Department of Sociology at Virginia Polytechnic Institute and State University



POOR LIFE SATISFACTION IS STRONGLY LINKED TO PROBLEMATIC OUTCOMES SUCH AS POOR MENTAL HEALTH, SUBSTANCE USE BEHAVIOUR, AND LOW SELF-ESTEEM

Issue Examined

Exploring the determinants of life satisfaction among early adolescents.

People included

2,617 children between 10-15 years of age.

Related factors

The Study includes measures about sibling bullying, Understanding Society also includes measures that allow researchers to test all three social relationships: parent-child relationship quality, sibling and peer bullying.

Life satisfaction is just one way to understand and measure subjective wellbeing. Poor life satisfaction is strongly linked to problematic outcomes such as poor mental health, substance use behaviour, and low self-esteem. During adolescence, young people become more independent, their social worlds move beyond their immediate families, and friend and peer relationships become more prominent. Accordingly, to evaluate fluctuations in adolescents' life satisfaction, it is important to understand the impact of their social relationships, especially during early adolescence when these transitions are first occurring.

Relationships and their quality are known to be strongly related to life satisfaction among adolescents. Adolescents have three types of relationships that are particularly important for their wellbeing – parent-child, peer, and sibling relationships. Therefore, this research investigates the part that these three relationships play in adolescent life satisfaction, between the ages of 10 to 15. Specifically, the research examines the effect of parent-child relationship quality, and the effects of sibling and peer bullying, on adolescents' life satisfaction. It looks at how these factors influence adolescents, how they potentially work in combination, and whether their effects differ between girls and boys. Which relationship is most important to a teenager's reported happiness and to which degree? How do social relationships impact life satisfaction differently for males and females?

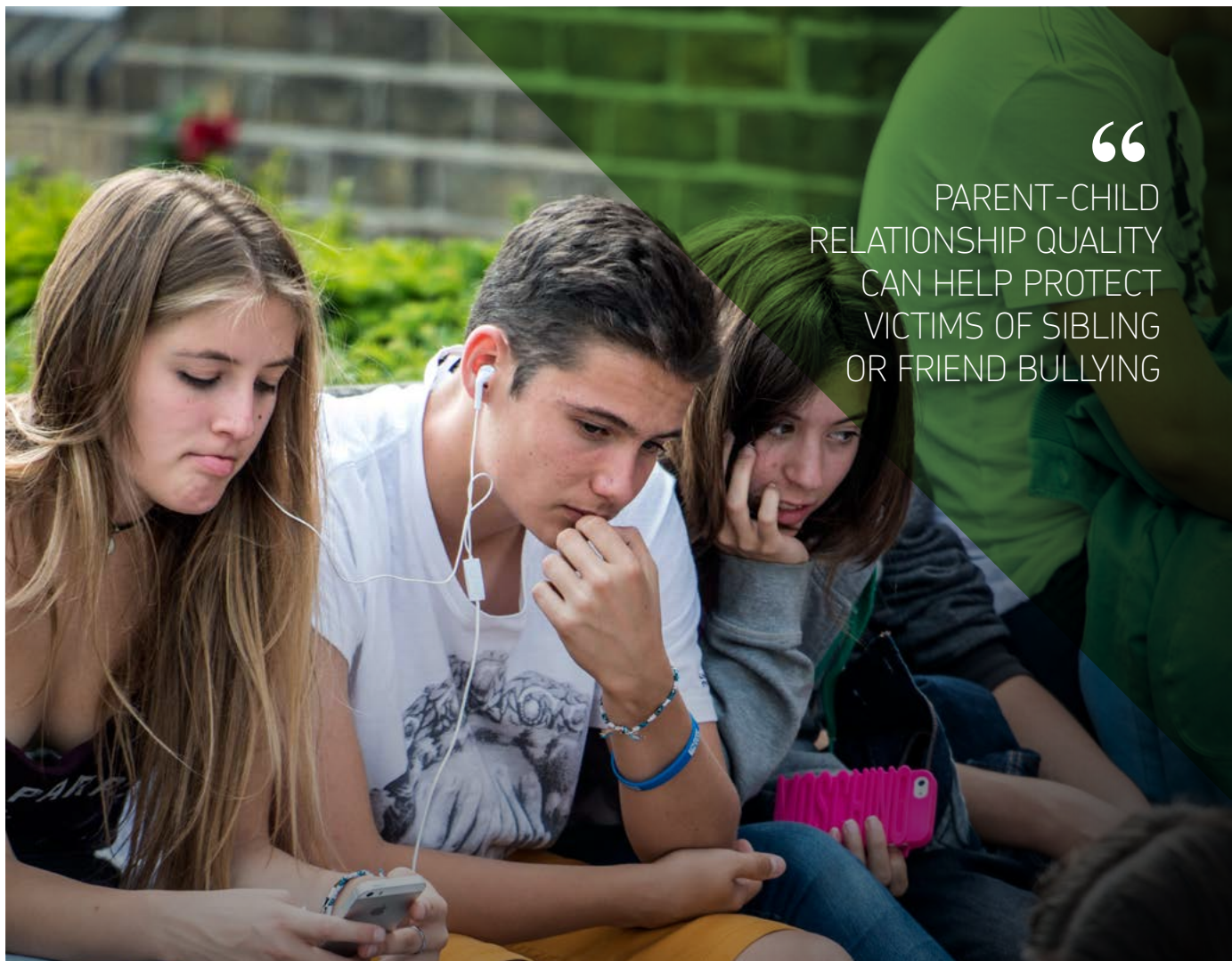
Family structure appears to have a relatively robust association with life satisfaction. Life satisfaction is higher among adolescents in two-parent families, which could be due to the higher amount of stress experienced by children in single-parent families. Therefore this study only explores the effects of these social relationships for adolescents living in two-parent families.

Adolescents are asked several questions about their relationships with their parents. These questions explore how often the child quarrels with his or her parents, how often the child and his or her parents talk about things that matter to him/her, and parents' involvement with their children's school (such as parents' interest in how their children do at school and how often they go to school parent evenings).

Whether the adolescent was involved in sibling bullying was identified using several questions relating to bullying perpetration and victimisation over the last six months. The questions asked how often their siblings hit, kick or push them, take their belongings, call them nasty names and make fun of them (or how often they hit, kick or push their siblings, take their siblings' belongings, call their siblings nasty names and make fun of their siblings). Adolescents were identified as being involved in peer bullying, using two questions relating to bullying perpetration and victimisation over the last six months. These two questions asked how often adolescents were physically bullied at school (or how often they physically bully others at school) or how often they were bullied in other ways at school (or how often they bully others in other ways at school).

Adolescent were asked about their overall life satisfaction as well as satisfaction with school work, appearance, family, friends, and the school they go to. Those who reported how they felt about their overall life satisfaction reported at the higher end of the scale, indicating high life satisfaction. Reports of being a victim or perpetrator of sibling bullying or being a victim or perpetrator of friend bullying were low. Moreover, respondents reported having high level of parental involvement and interaction.

The results show that each of these social relationships – parent-child, child and sibling, child and peer - are influential on life satisfaction. Of the



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PARENT-CHILD
RELATIONSHIP QUALITY
CAN HELP PROTECT
VICTIMS OF SIBLING
OR FRIEND BULLYING

three, parent-child relationship quality proved to be the most significant predictor of life satisfaction. This is followed by friend victimisation, and lastly by sibling victimisation.

The combined effects of each of these relationships were also tested. Results suggest that the effect of parent-child relationship quality on life satisfaction makes even more of a difference among adolescents who are victims of sibling and friend bullying, highlighting the protective element of a good parent-child relationship.

When it came to exploring whether these relationships impact male and female life satisfaction differently, the study found that the effects of parent-child relationship quality, sibling, and friend bullying, do indeed vary between male and female adolescents. Specifically, for young girls, the positive effects of better parent-child relationship and lower friend victimisation are stronger.

Although it is not entirely surprising that these different relationships have a unique and direct effects on life satisfaction, it is surprising that parent-child relationship quality had the strongest overall influence. Overall, the results are not consistent with some prior research which suggests that the perception of parents as the primary source of support generally declines during adolescence and the perceived support from friends increases.

Less surprising, but somewhat reassuring, is the finding that parent-child relationship quality can help protect victims of sibling or friend bullying, and that parent-child relationship quality and friend victimisation are especially influential for females' life satisfaction.

Overall, the main purpose of the research was to understand the relative importance of these three relationships for life satisfaction among early adolescents. Such research and findings provide valuable insight for parents, policy makers, educators, and administrators who are interested in improving life satisfaction among adolescents. For example, the main finding that parent-child relationship quality is highly influential for life satisfaction, and that this especially protects those early adolescents who are already victims of sibling and friend bullying, suggests that focusing on strengthening the parent-child relationship quality during this important time period should be the main goal. It also suggests that, given the importance of bullying both at school and at home on life satisfaction, that bullying prevention should be a main goal for policymakers and educators at schools as well as parents. Educators also need to work closely with parents where there is evidence of bullying. Future research should seek to understand what factors lead to individuals bullying others and being bullied by others during their youth.

CONNECTIONS BETWEEN PARENT AND CHILD WELLBEING

Research by *Dr Elizabeth Webb* from *University College London, Department of Epidemiology and Public Health*, *Dr Laia Bécarea* from the *University of Manchester, School of Social Sciences*, *Professor Yvonne Kelly*, *Dr Anne McMunn* & *Professor Amanda Sacker* from the *Department of Epidemiology and Public Health at University College London* & *Dr Lidia Panico* from the *Institute of Demographic Studies (INED), Paris*

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IN FAMILIES WITH
ADOLESCENT CHILDREN,
THE MENTAL HEALTH
OF THE MOTHER IN THE
HOUSEHOLD IS CENTRAL
TO THAT OF THE OTHER
HOUSEHOLD MEMBERS

Issue Examined

Wellbeing of parents and their children.

People included

4,733 families with a co-resident mother, father and adolescent child aged between 10 and 15 years who were observed at least two consecutive time points.

Related factors

Investigate the interrelationship between both parents' mental distress and their adolescent child's happiness.

The wellbeing of parents and their adolescent children is interrelated. There are social theories which suggest that individuals' mental health should not be considered in isolation and that lives are lived interdependently (Linked Lives Theory), and a co-resident family should be thought of as a system, rather than a collection of individuals (Family Systems Theory). With these theories in mind, this project investigates how the wellbeing of parents and their adolescent children interrelate. Does parental mental distress influence their adolescent children's happiness, and vice versa?

The project builds on previous findings from Understanding Society's predecessor, the British Household Panel Survey. It investigates the interrelationship between both parents' mental distress and their adolescent child's happiness (see infographic, right). Existing literature on parental mental distress and child wellbeing suggests that there are strong cross-sectional relationships (at the same point in time), and some longitudinal relationships (when one person's wellbeing at one point in time affects someone else's wellbeing at a later point in time).

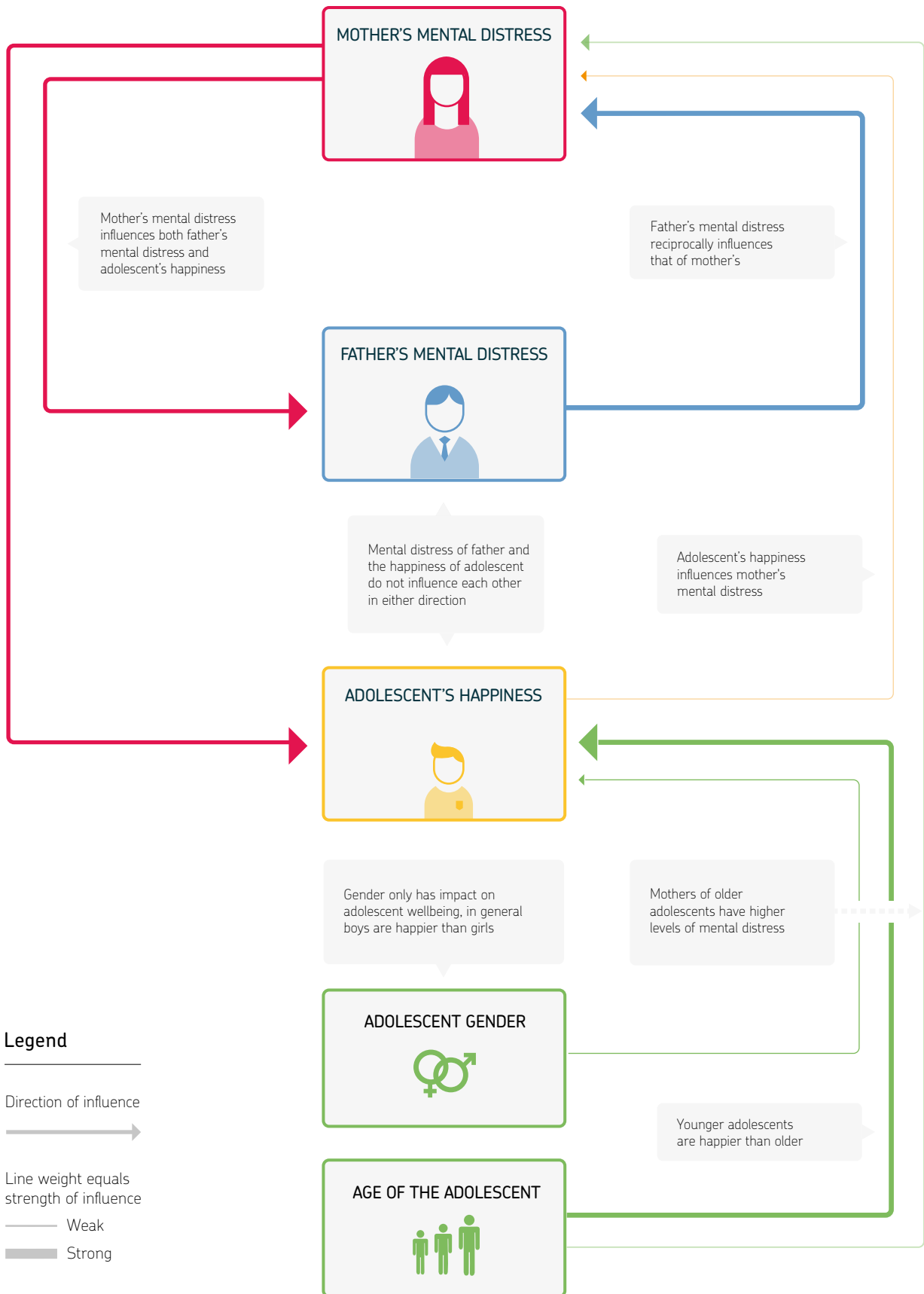
We find that fathers of adolescent children have lower levels of mental distress than mothers, which is consistent with existing literature on gender differences in mental health. Unlike fathers mental distress, mothers' is related to the age of their adolescent child: where the adolescent child is older, mothers' symptoms of mental distress were worse. Similarly, younger adolescents (aged 10-12 years) are happier than older adolescents (aged 13-15 years). The happiness of boys and girls does not differ, and the mental distress of mothers and fathers does not depend upon the gender of their child.

The first of three main findings shows there is continuity in mothers' and fathers' mental distress, and in adolescent children's happiness, over time. Secondly, whether these relationships are inspected over time (longitudinally) or across different groups (cross-sectionally), mothers' mental distress influences both fathers' mental distress and adolescent children's happiness, and fathers' mental distress reciprocally influences that of mothers. Thirdly, the mental distress of fathers' and the happiness of their adolescent child do not appear to influence each other, in either direction.

Our findings suggest that, in families with adolescent children, while the mother's and father's mental health influences each other's over time, only the mother's health appears important for their children's wellbeing. This is in contrast to earlier findings which put the father, rather than the mother, in the central role.

This research gives support to the policy of assessing mental health in a family, rather than individual, context. Mental health problems amongst parents should not be considered in isolation, and support should be offered to partners and children, taking into account the potential longitudinal effects.

THE HOUSEHOLD SYSTEM





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ADOLESCENTS WHO WERE
DISSATISFIED WITH THEIR
NEIGHBOURHOOD WERE
MORE LIKELY TO SMOKE
AND TO DRINK ALCOHOL

NEIGHBOURHOOD INFLUENCES ON CHILD MENTAL WELLBEING AND BEHAVIOURS

Research by Dr Ivy Shiue from Heriot-Watt University



NEIGHBOURHOOD SATISFACTION IS AN INDICATOR THAT ASSESSES ONE'S OVERALL SATISFACTION TOWARD ONE'S LIVING SURROUNDINGS

Issue Examined

Investigate how UK adolescents perceive their current neighbourhoods and how such perception is related to their mental health and behaviours.

People included

4427 nationally representative adolescents aged 10-15 in wave 3.

Related factors

Investigate adolescents' perception of their neighbourhoods, in conjunction with their mental health using the Strengths and Difficulties Questionnaire in order to identify the types of individuals who were more likely to have emotional and behavioural difficulties.

Your immediate environment can be an important factor in determining your wellbeing, particularly if where you live is challenging. It can have a profound impact on your current and future health and wellbeing. This might be particularly relevant for adolescents, who are in a challenging period of growth and identity change.

Life satisfaction is an indicator of subjective wellbeing. In a similar way, neighbourhood satisfaction is an indicator that assesses one's overall satisfaction toward one's living surroundings. The aim of this research is to investigate and understand how UK adolescents perceive their current neighbourhoods and how this perception is related to their mental health, psychological wellbeing and individual behaviours towards others.

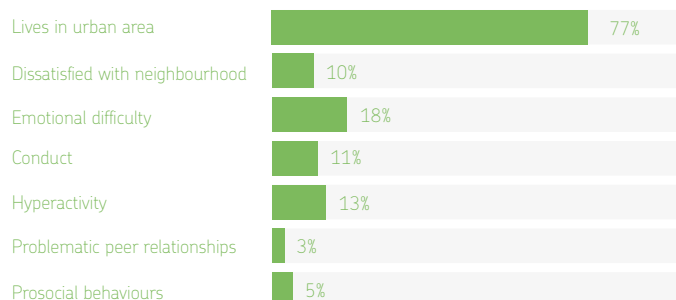
Most of the adolescents lived in urban areas (77%), but the majority were not dissatisfied with their current neighbourhood (about one in ten were dissatisfied). Seven percent of the adolescents were classified as suffering from emotional or behavioural difficulties, with 11% on the borderline. Amongst adolescents in the sample, emotional difficulty was more common (18%), compared to 11% who had difficulties in conduct, 13% had high levels of hyperactivity, 3% had atypically high problems in their relationships with peers and 5% had prosocial behaviours. See chart, below.

When these behavioural and emotional difficulties were compared with adolescents' perceptions of their neighbourhood, it became clear that adolescents with borderline or 'abnormal' scores tended to express dissatisfaction toward their current neighbourhoods (as compared to those with 'normal' scores). We cannot say from the results whether having emotional or behavioural difficulties makes adolescents more likely to dislike their neighbourhood, or whether a less supportive neighbourhood affects their wellbeing. These individuals also had negative perceptions towards other aspects of their lives including family, friends, school and even personal appearance.

Adolescents who were dissatisfied with their neighbourhood were also more likely to smoke and to drink alcohol. They also reported more troublesome individual behaviours towards others – for instance, stealing, fighting a lot, being accused of cheating, or not thinking before taking action. The study found no difference in neighbourhood satisfaction by gender, urbanisation level or country of residence (England, Northern Ireland, Scotland or Wales).

The findings from this research suggest that individuals who interact frequently with adolescents such as parents, school teachers, community workers, paediatricians and psychiatrists should consider how adolescents' living environment is affecting their wellbeing and behaviour. The research also has implications for local government and urban planners - these groups should not underestimate the extent to which the environments they shape or indeed even create may affect the wellbeing of adolescents.

Characteristics of adolescents in Shiue's study



ABOUT THE STUDY

Understanding Society is the UK Household Longitudinal Study, which annually collects information from all individuals in approximately (at wave 1) 40,000 households over time. It was set up by the Economic and Social Research Council, under the scientific leadership of the Institute for Social and Economic Research.

The study began in 2009 and includes four samples:

- a general sample of households representative of the population of the UK
- an ethnic minority boost (EMB) sample comprising around 1,000 individuals each of black African, Bangladeshi, Caribbean, Indian and Pakistani groups and smaller samples of other ethnic minority groups; a new immigrant and ethnic minority boost (IEMB) sample has been added at wave 6
- the former British Household Panel Survey (BHPS) sample (wave 2 onwards), which means that for a sizeable proportion of the sample data extend back to 1991
- an Innovation Panel (IP) which was set up to enable researchers to experiment with survey methods to improve the quality of data collected, particularly in longitudinal studies.

To date, five waves of the main study, and seven waves of the IP, have been deposited at the UK Data Service for researchers to download and use; over 2,000 people have downloaded the data and over 340 papers and reports have been produced (that we know of!).

Understanding Society has ten unique features, which taken together provide an unprecedented window on the changing lives of people in all countries of the UK.

1 - A PANEL STUDY OF ALL AGES

Unlike many longitudinal studies that focus on people born in a specific year (cohort studies), Understanding Society collects data from people of all ages. New people join the study as they move, or are born, into homes with original study members. This means it can be used to understand the experiences of the whole population over time.

2 - ANNUAL CONTINUOUS DATA COLLECTION

Understanding Society collects data annually so that short and long run changes in people's lives can be investigated. This means data collection takes place close to important events in people's lives – eg, getting married, becoming unemployed – so that the causes and consequences can be explored. It also means it is often possible for researchers to examine associations before and after policy changes. For the BHPS sample, contained within Understanding Society, we now have over 25 years of annual data on their lives. A continuous fieldwork period allows investigation of seasonal trends and event specific questions.



3 - THE WHOLE HOUSEHOLD

As a household study, Understanding Society collects information from everyone in the household so that inter-relations - between generations, couples and siblings – can be explored.

4 - NATIONAL, REGIONAL AND LOCAL DATA

Understanding Society includes all four countries of the UK, and can be used across a wide range of geographic levels, which means that researchers can compare the circumstances and experiences of people in different places, and increasingly with the devolution of power, different policy contexts. More detailed geographical information can be linked with different location indicators. For example, geographic linkage enables us to link to the level of deprivation, greenspace, air pollution, availability of transport and other services in people's local areas.



TAKEN TOGETHER, THE UNIQUE SIZE, SCOPE AND RICHNESS OF UNDERSTANDING SOCIETY PROVIDE RESEARCHERS AND POLICY MAKERS WITH THE DATA THEY NEED TO ADDRESS THE KEY SCIENTIFIC AND POLICY QUESTIONS OF THE 21ST CENTURY BOTH IN THE UK AND INTERNATIONALLY

5 - ETHNIC MINORITY BOOST

The EMB and more recent IEMB samples mean that Understanding Society has sufficient sample sizes of different ethnic minority groups to allow the experiences of specific ethnic minority groups (and across migrant generations) to be investigated. The scope of such analysis is enhanced by an extra five minutes of question time set aside each wave for asking specific questions (such as remittances, migration history, ethnic identity) to ethnic minorities and a comparison majority sample. It is currently the only open access, longitudinal household survey that covers ethnic minorities.

6 - MULTI-TOPIC

Understanding Society covers a wide range of social, economic and behavioural factors that are important to people's everyday lives and to society more generally. These include:

- family and household life
- education, employment and work
- income, housing, wealth, expenditure & deprivation
- health and wellbeing, health behaviours
- environmental behaviours, political attitudes
- neighbourhood conditions, transport, use of services
- social support and networks, caring and volunteering.

This means that the study has data relevant to a wide range of government departments and researchers. Furthermore, the impact of one aspect of people's lives eg, family change can be investigated on others, for example, health and behaviours. User consultations are held on the content periodically to ensure that emerging agendas are reflected but balanced alongside longitudinal and scientific consistency.

7 - INNOVATION

The Innovation Panel (IP) uses a sample of 1,500 households that have been interviewed every year since 2008. It creates a realistic testing ground for researchers who can apply to conduct methodological experiments each year. Accepted experiments are carried in the IP, and data made available for the wider research community to explore. In addition, Understanding Society has an associated study option, which allows researchers to design their own, usually qualitative studies, to be carried out on a subsample of respondents. The IP plays a key role in ensuring the future success of Understanding Society and shapes decisions about how to improve survey design around the world.

8 - BIOMARKERS AND GENETICS DATA

Nurses collected data (at waves 2 or 3) to measure people's health – for example, their height, weight, blood pressure, and lung function. Blood samples were taken which provide information on the risk of different diseases such as diabetes. These kinds of data better enable researchers to understand the two way relationship between social and economic circumstances and health, in ways that will improve policy development, for example on how different aspects of health affect people's ability to work.

9 - LINKED ADMINISTRATIVE DATA

Another unique source of data is the ability of Understanding Society to link (with consent) to administrative records that are available on respondents from other sources. We have linked to data from the National Pupil Database which has children's formal test results to examine the association between these and, for example, their family circumstances and support.

10 - POLICY ENGAGEMENT

A Policy Unit has been established to directly support government departments and devolved administrations to use the Understanding Society data for policy purposes and work with other organisations (eg, charities and think tanks) to promote policy learning across a wide range of topics.



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A POLICY UNIT HAS BEEN ESTABLISHED TO HELP GOVERNMENT DEPARTMENTS, DEVOLVED ADMINISTRATIONS AND OTHER ORGANISATIONS TO USE UNDERSTANDING SOCIETY DATA TO INVESTIGATE KEY PUBLIC POLICY ISSUES



FINAL WORD – MAKING A DIFFERENCE TOGETHER

RAJ PATEL,

IMPACT FELLOW AND ACTING DIRECTOR, UNDERSTANDING SOCIETY POLICY UNIT

High quality research and the use of evidence in policy can help develop strategies to reduce poverty, improve wellbeing, save lives, better target resources at a problem and quantify unmet needs. All in all this knowledge, where properly applied, can help us to make better decisions on issues that affect our society. In reality, a range of factors influence policy-making - judgement, experience and political values will always play a role. Nevertheless, policies which are based on systematic evidence are seen to produce better outcomes, benefitting public service users, tax-payers, communities and business.

The Understanding Society Policy Unit, established in 2014, facilitates knowledge exchange and policy learning. It works with government departments, devolved administrations and other organisations to investigate key public policy issues. The Unit provides training and support to data users and policy analysts, supports researchers in their efforts to generate policy-relevant impact from the Study, briefs policy audiences on the latest findings, hosts events to discuss the policy implications of research and undertakes collaborative projects with relevant organisations.

Understanding Society research reflects the challenges facing modern society and the study's ambition to facilitate pioneering research. For example, over 230 researchers and policy makers took part in the biennial Understanding Society Scientific Conference in July 2015 to present or listen to research findings. These covered a wide range of topics from sleep patterns to Scottish devolution, family change and poverty, education, work identity, intergenerational wellbeing, sibling and peer bullying among adolescents, active commuting and cardiovascular risk, genetics, social mobility, and survey methods to mention a few.

Over the past year, Understanding Society and its Policy Unit have been making a difference in a variety of ways. Here is a small selection:

The Policy Unit has been working with the Department of Health and Department for Work and Pensions to understand how to help people with a long-term health condition to stay in work, better manage their condition or return to work from benefits. There are 11.5 million working age people in the UK with a long-term health condition, therefore investigating the complex relationship between health and employment has never been more critical.

Tackling the gender pay-gap in Scotland is a priority for the Scottish Government. It is now in the process of trying to deconstruct what factors determine this inequality in earnings. In a separate project, the Policy Unit has recently aided the Scottish Government in gathering evidence and trying to understand why mothers downgrade their occupation after having children using Understanding Society data for Scotland.

Reducing smoking amongst 11 to 15 year olds in England is a key health objective for Public Health England (PHE). However,

very little is known about the geographical pattern of smoking amongst young people. Researchers using Understanding Society data found wide relative variations in the incidence of youth smoking across England. This evidence has now been incorporated into PHE's Local Health tool, an interactive website used by Health and Wellbeing Boards, local agencies, health workers and educationalists (www.localhealth.org.uk).

Judging the success of a country by

GDP alone is insufficient to effectively assess 'how a country is doing'. Given this growing acknowledgement, a range of international agencies such as the Organisation for Economic Co-operation and Development (OECD), along with the Office for National Statistics (ONS) in the UK, have been monitoring 'wellbeing'. The ONS started a programme on measuring wellbeing in November 2010, incorporating some indicators from Understanding Society. More recently, the government working with the Economic and Social Research Council and other partners, established a What Works Centre for Wellbeing to improve wellbeing, bring together the best evidence and make it easier to use. Wellbeing data is also being used by a number of charities - and even in the creative arts. A project with the Roundhouse theatre in London brings together children, artists and scientists to explore young people's happiness and how to increase it, including the creation of a personal piece of theatre. The Happiness Project was performed at the Edinburgh Fringe Festival and at the Roundhouse.

This is just a small selection of areas in which Understanding Society is playing an important role in informing policy and practice. The Policy Unit welcomes the opportunity to discuss research ideas that have the potential to make an impact.

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