



To move or not to move? Inequality, immobility and opportunity...

... towards a mobilities perspective

Fran Darlington-Pollock

f.darlington-pollock@liverpool.ac.uk | @F_Darlington

University of Liverpool

BSPS Annual Conference: Early Career Plenary, Cardiff 2019

Context

- Persisting social and spatial inequalities in health: males born in the least deprived areas in 2015-17 expect to live **almost a decade more** than those born in most deprived areas (ONS, 2019)
- Compounded by differences in **healthy life expectancy** and **significant increases** in socioeconomic inequalities in life expectancy at birth

“one of the most reliable findings in public health research”

(Kröger et al., 2015: 1)

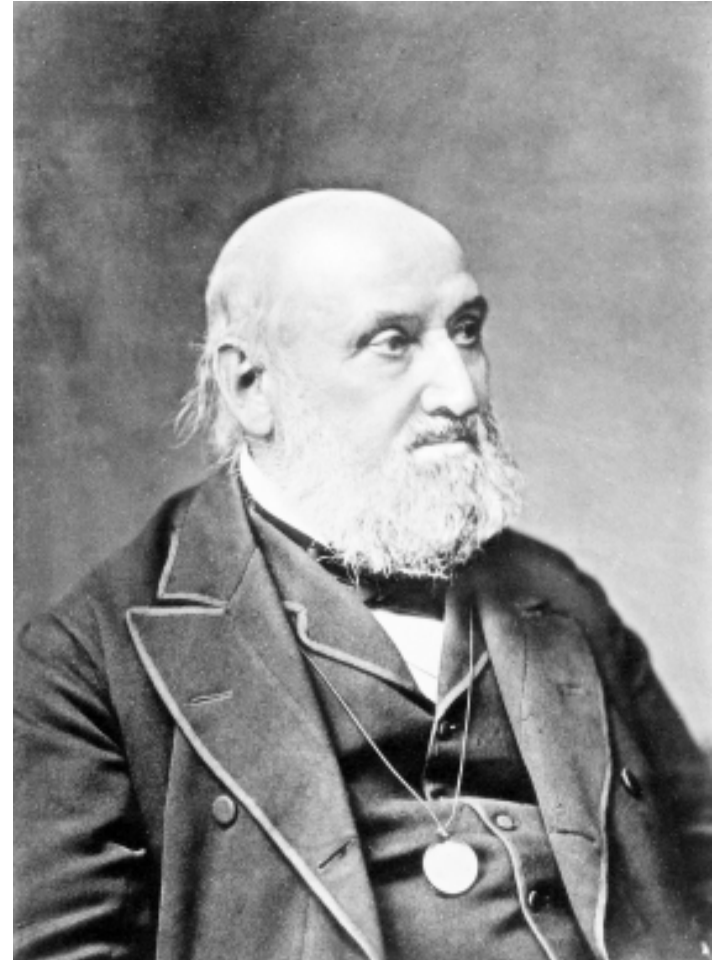
Explaining *changing* health gradients?

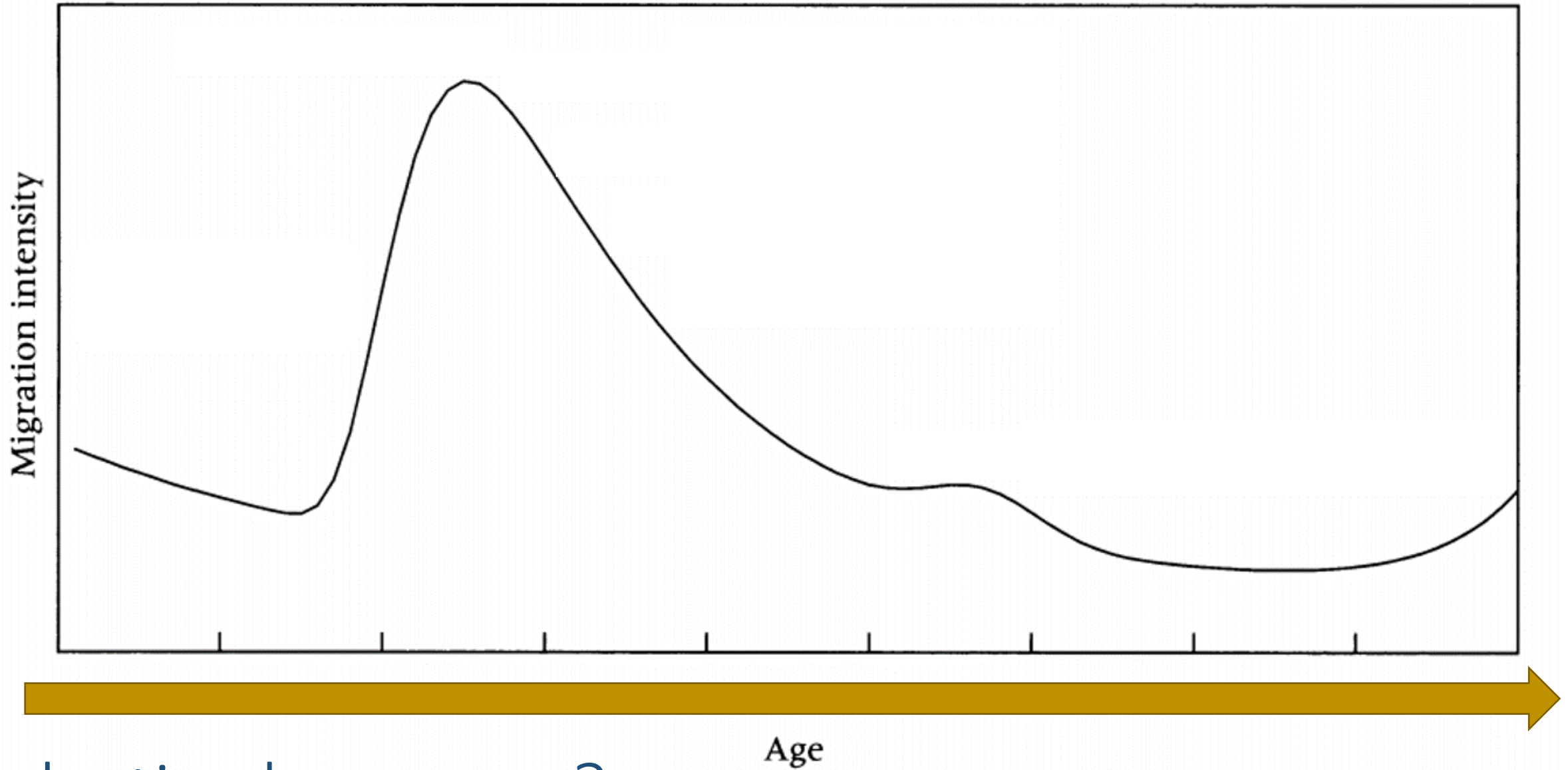
- The Black Report (Department of Health and Social Security, 1980): artefact, social selection, culture/behaviour, material/ structural conditions
- But, change over time?
- Over time, *changing* health gradients due to a process of selective sorting between area types (and / or social classes)

Migration and Local Health Rates

Far (1864) and Welton (1872)

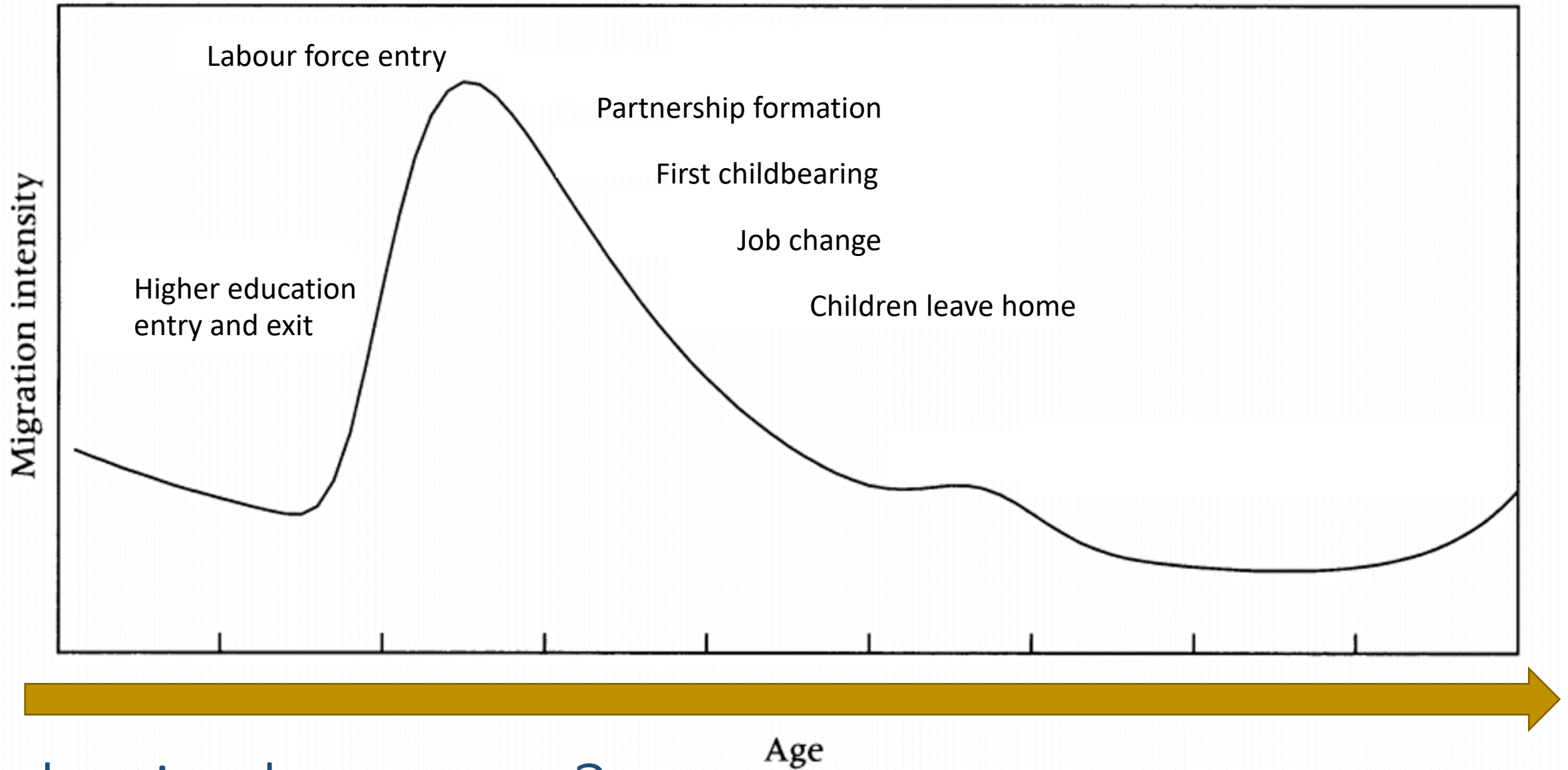
- Age dimensions, life course
- Area types
- Movements affecting both origins and destinations





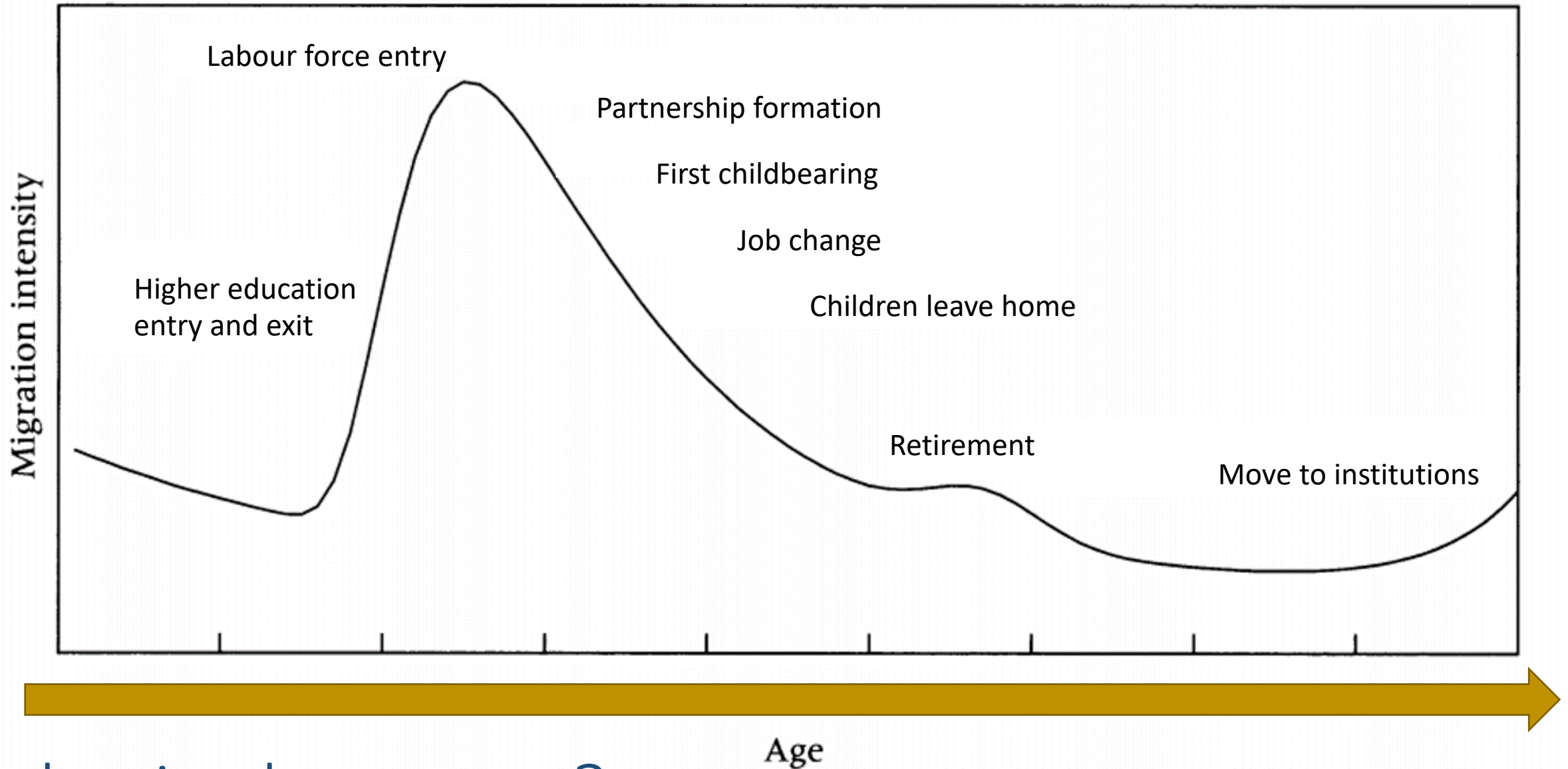
Selective because...?

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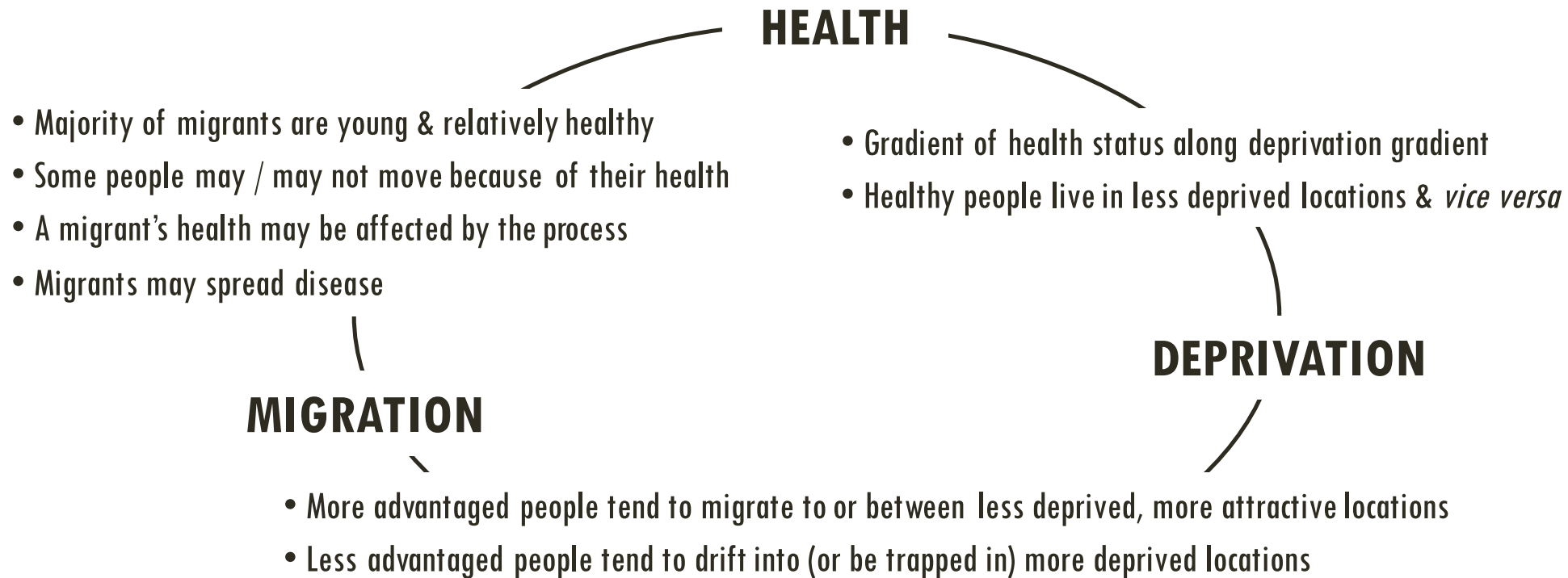
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Selective because...?

Conceptual Framework: the health-deprivation nexus

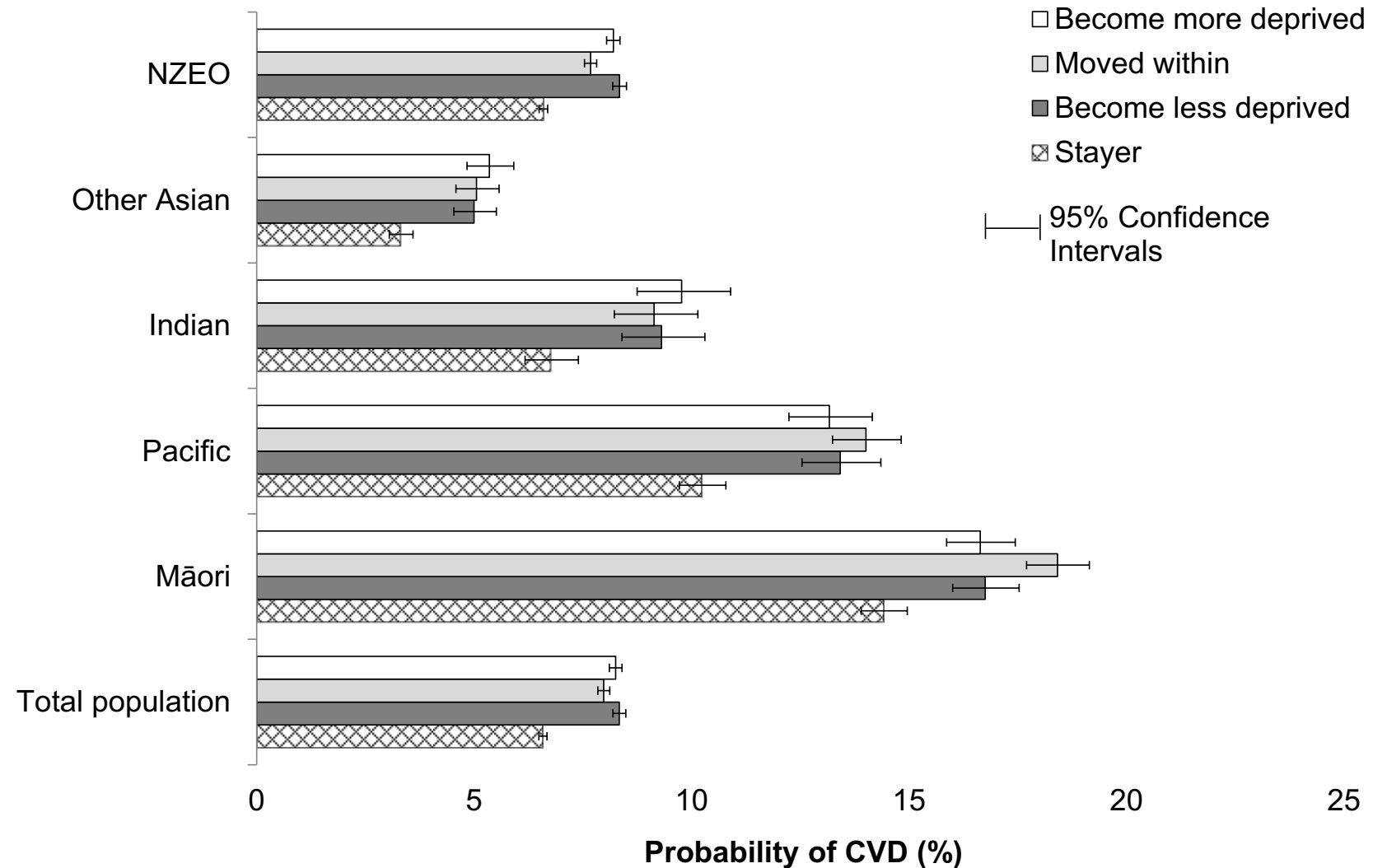


Model associations

- Controlling for socioeconomic variables *explains away* health differences (Verheij et al., 1998)
- Odds of poor health elevated for movers (Tunstall et al., 2014)
- Movers healthier than stayers... effect larger for those moving away from declining regions than into declining regions (Dijkstra et al., 2015)

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Source: Darlington-Pollock et al., 2016: 135

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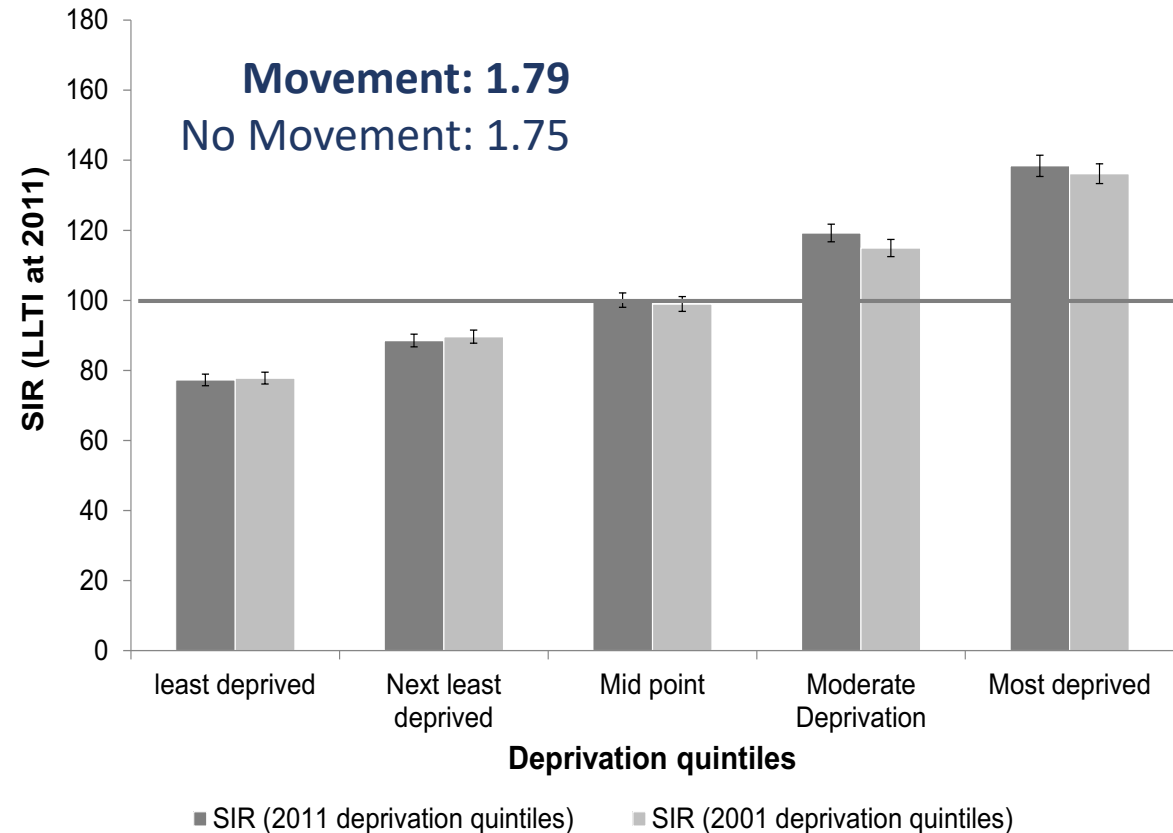
Compare Gradients

- Counterfactual approach, essentially 'putting people back' to where they started... and exploring *aggregate* influence on health outcomes (e.g. Brimblecombe et al., 1999; 2000; Norman et al., 2005)
- Is the health gradient *steeper* at destination than origin?

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2011 SIRs by deprivation quintile at 2011 and 2001



Source: Darlington-Pollock and Norman (under review)

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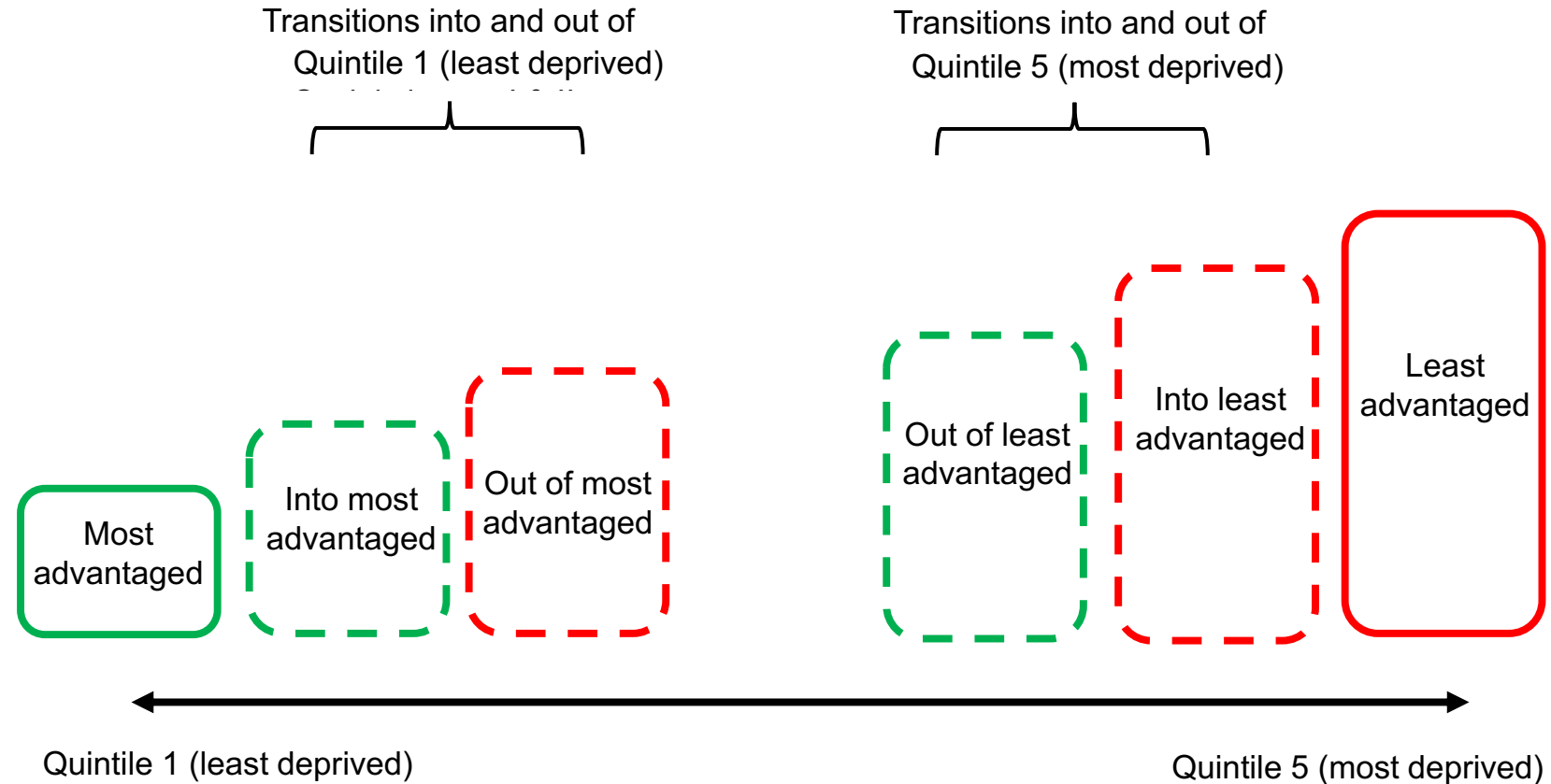
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Transitions

- To what extent does the health status of those entering the most and least advantaged areas, or highest and lowest social classes differ from those leaving these areas or classes?

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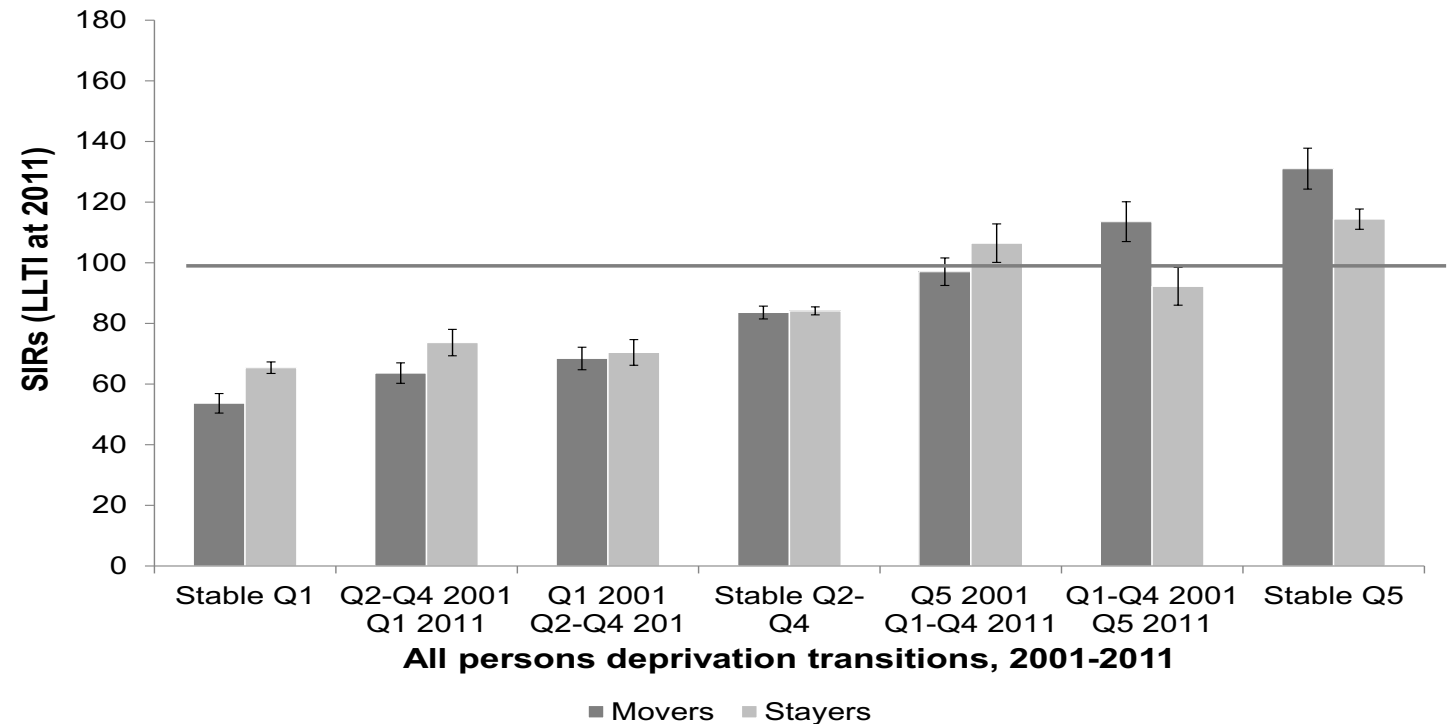
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SIRs for movers and stayers by deprivation transition, 01-11



Source: Darlington-Pollock and Norman (under review)

Timings and Trajectories?

- Ordering of events matters
- Differences in trajectories through deprivation → more nuanced than 'more' or 'less' deprived

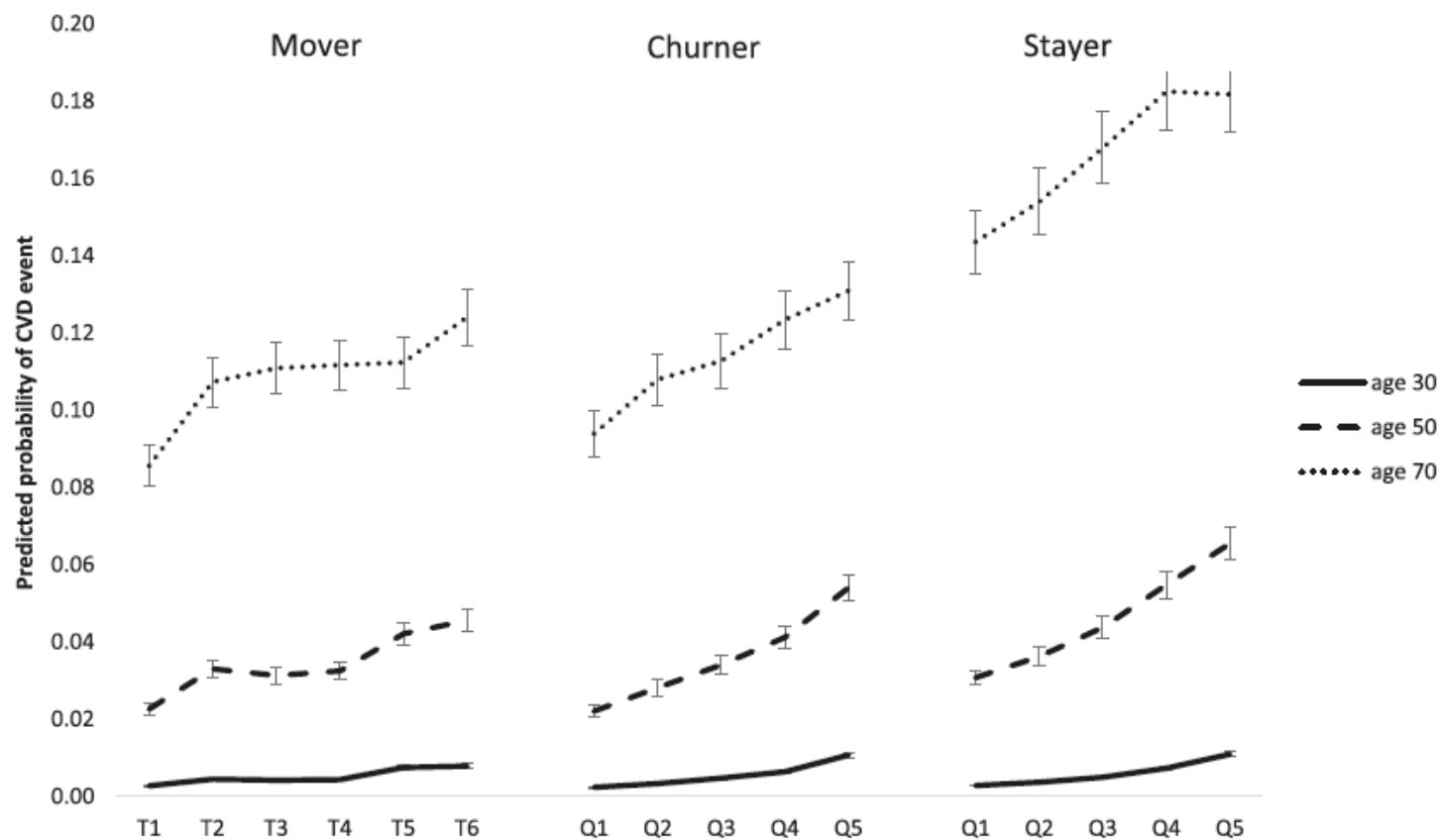
Table 2 Hazard ratios for residential mobility status and mover type by ethnic group, New Zealand (VIEW study, 2006–2014, New Zealand)

	All-persons (baseline models) <i>n</i> = 2,068,360	Māori <i>n</i> = 177,158	Pacific <i>n</i> = 110,777	Indian <i>n</i> = 54,463	Other Asian <i>n</i> = 128,597	NZEO <i>n</i> = 1 597,365
Model 1: mover status						
Stayer	1.00	1.00	1.00	1.00	1.00	1.00
Mover	0.64 (0.63–0.64)	0.59 (0.58–0.61)	0.66 (0.63–0.69)	0.65 (0.61–0.70)	0.63 (0.60–0.68)	0.64 (0.63–0.65)
Model 2: mover type by number of moves						
Stayer	1.00	1.00	1.00	1.00	1.00	1.00
Moves 1–3 times	0.66 (0.66–0.67)	0.65 (0.62–0.67)	0.71 (0.67–0.74)	0.67 (0.62–0.73)	0.67 (0.63–0.72)	0.66 (0.65–0.67)
Moves 4+ times	0.47 (0.46–0.49)	0.43 (0.41–0.46)	0.44 (0.40–0.49)	0.50 (0.41–0.60)	0.43 (0.36–0.51)	0.41 (0.48–0.51)
Model 3: mover type by deprivation change						
Stayer	1.00	1.00	1.00	1.00	1.00	1.00
To less deprived quintile	0.64 (0.63–0.65)	0.59 (0.56–0.63)	0.68 (0.63–0.73)	0.64 (0.59–0.72)	0.64 (0.58–0.71)	0.64 (0.63–0.66)
Churns in same quintile	0.63 (0.62–0.64)	0.60 (0.58–0.63)	0.64 (0.60–0.68)	0.67 (0.60–0.75)	0.63 (0.57–0.69)	0.64 (0.63–0.65)
To more deprived quintile	0.63 (0.62–0.64)	0.58 (0.55–0.61)	0.69 (0.64–0.75)	0.63 (0.56–0.71)	0.65 (0.59–0.72)	0.63 (0.62–0.65)

Source: Darlington-Pollock et al., 2017

Timings and Trajectories?

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- Differences in trajectories through deprivation → more nuanced than 'more' or 'less' deprived



Source: Shackleton et al., 2018

Shoring up a developing theoretical framework

POPULATION, SPACE AND PLACE
Popul. Space Place 21, 390–402 (2015)
Published online in Wiley Online Library
(wileyonlinelibrary.com) DOI: 10.1002/psp.1956

New Mobilities Across the Life Course Framework for Analysing Derivative Drivers of Migration

Allan Findlay^{1*}, David McCollum¹, Rory Coulter² and Vernon Gay³

¹Department of Geography and Sustainable Development, University of

²Department of Sociology, University of Cambridge, Cambridge, UK

³School of Social and Political Science, University of Edinburgh, Edinburgh

ABSTRACT

Taking the life course as the central concern, the authors set out a conceptual framework and define some key research questions for a programme of research that explores how the linked lives of mobile people are situated in time-space within the economic, social, and cultural structures of contemporary society. Drawing on methodologically innovative techniques, these perspectives can offer new insights into the changing nature and meaning

While researchers are increasingly re-conceptualized devoted to re-thinking short-distance residential mobility and immobility should be re-conceptualized over the last 5 years.

The research framework that is proposed in this paper is important for two reasons. Firstly, it is noticeable that recent theorisations of how changing social relations have impacted on demography, such as the concept of a Second Demographic Transition (see de Vries 2004) and

Article

Re-thinking residential mobility: Linking lives through migration

Rory Coulter

University of Cambridge, UK

Maarten van Ham

Delft University of Technology, The Netherlands

Allan M. Findlay

University of St Andrews, UK

Abstract

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Article

Residential mobility: Towards progress in mobility health research

Tim Morris

University of Bristol, UK

David Manley

University of Bristol, UK and OTB, Delft University of Technology, The Netherlands

Clive E. Sabel

University of Bristol, UK

Abstract

Research into health disparities has long recognized the importance of residential mobility as a crucial factor in determining health outcomes. However, a lack of connectivity between the health and mobility literatures has meant that the potential of mobility to link lives through migration has been largely overlooked.

Progress in Human Geography
2018, Vol. 42(1) 112–133
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DOI: 10.1177/0309132516649454
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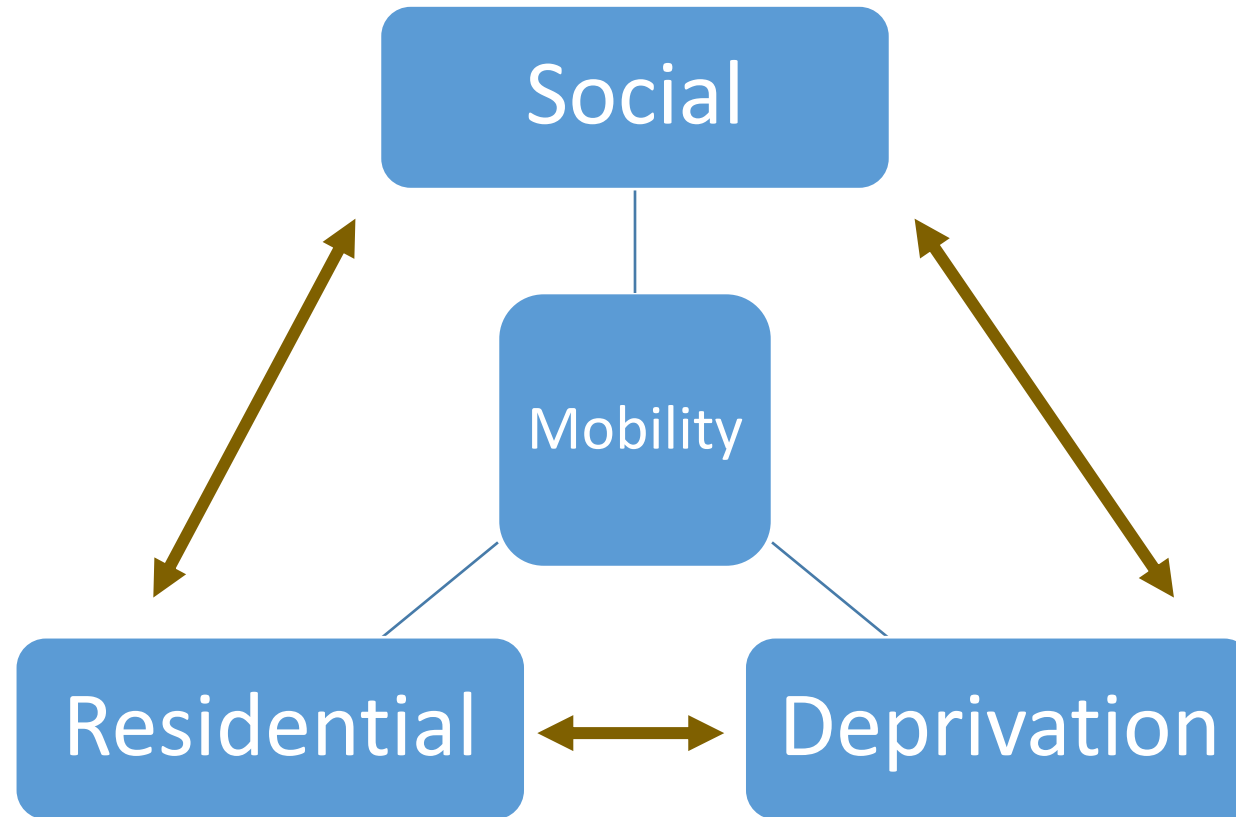
The 'mobilities' paradigm

- Coined by Sheller and Urry in 2006 (*The New Mobilities Paradigm*, EPA)
- Seeks to ask 'in what ways is the world mobile?' BUT, crucially, advances some studies in migration or transport by asking '**how is the world mobile**'.
- In other words, what are the **drivers, experiences and politics that underscore movement**. What happens between A and B? Movement never *just happens*. A mobilities perspective **adds depth** to the movements we see in mapped or aggregate form.
- Could health-selective migration research be progressed in future by *mobilising* the mobilities paradigm?



By Ralf Roletschek - Own work, GFDL 1.2, <https://commons.wikimedia.org/w/index.php?curid=48538782>

Inter-dependencies: and the space in between?



Conceptually...

- Objective versus cognitive approaches (White, 1980) / Macro versus Micro approaches (Cadwallader, 1989)
- Alternative conceptualisation of migration... migration not just “a discrete contemplative act” (Halfacree & Boyle, 1993: 337)
- Critically examine mobility, not as a “single thing” but “breaking mobility down into... its constituent parts” (Cresswell, 2010: 17)
- Apply Cresswell’s ‘politics of mobility’ to health-selective migration?

Politics of mobility framework

- Force (agency)
- Experience
- Friction
- Speed
- Routes
- Rhythms

Analytically...

- Mobility *versus* immobility
 - Passive immobile stayers...
 - ... or, non-migrations as 'critical and resistant' (e.g. Halfacree, 2018), deliberate and intended
- Operational decisions
 - Beyond the individual
 - Macro-events in longitudinal analysis (e.g. Falkingham et al., 2016)
 - Stages / events rather than ages

Methodologically

- Exploit big data and technological advances, embrace a mobilities informed conceptual and analytical framework
- Methods ‘mash-up’ (Peters, 2017):
 - More than triangulation → integration
 - Complementary data sources – clarify results (Green et al., 1989)
 - Correlate aggregate data with coded personalised data → ‘layering’ of data
 - Situate idiographic analyses within understandings of larger scale, population wide patterns
 - Off-set data limitations
- Disciplinary team ‘mash-ups’
- Layering of data
- Mobile methodologies

Concluding thoughts

- Mobilities thinking can enrich research into health-selective migration, enhancing understanding of the drivers, experiences, and politics of such migration
- Quantitative work can enrich the specificity of much of mobilities work – the ‘bigger picture’
- Begin research *attuned* to the *politics* of movement, what new insights will this yield?
- Appropriate conceptual, analytical, and methodological frameworks... but not necessarily all at once!

Thank you for listening

The permission of the Office for National Statistics to use the Longitudinal Study is gratefully acknowledged, as is the help provided by staff of the Centre for Longitudinal Study Information & User Support (CeLSIUS). CeLSIUS is supported by the ESRC Census of Population Programme (Award Ref: ES/K000365/1). The authors alone are responsible for the interpretation of the data.

All statistical results remain Crown Copyright.

This presentation is based on a paper in development with **Dr Kim Peters**, University of Liverpool, and draws heavily on various papers completed with **Dr Paul Norman** (University of Leeds). Special thanks to key co-authors on other papers including **Dr Dan Exeter** (University of Auckland), **Dr Nichola Shackleton** (University of Auckland).

- Brimblecombe, N., Dorling, D. and Shaw, M. (2000) 'Migration and geographical inequalities in health in Britain', *Social Science and Medicine*, 50(6), pp. 861–878. doi: 10.1016/S0277-9536(99)00371-8.
- Caldwallader, M. (1989) A synthesis of macro and micro approaches to explaining migration: evidence from inter-state migration in the United States. *Geografiska Annaler, Series B, Human Geography*, 72 (1): 85-94.
- Coulter, R., Ham, M. V., & Findlay, A. M. (2016). Re-thinking residential mobility: Linking lives through time and space. *Progress in Human Geography*, 40(3), 352-374.
- Cresswell, T. (2010). Towards a politics of mobility. *Environment and planning D: Society and Space*, 28(1), 17-31.
- Darlington-Pollock, F. and Norman, P. (under review) Establishing a framework for the analysis of selective sorting and changing health gradients.
- Darlington-Pollock, F. *et al.* (2016) 'To move or not to move? Exploring the relationship between residential mobility, risk of cardiovascular disease and ethnicity in New Zealand', *Social Science & Medicine*, 165, pp. 128–140. doi: 10.1016/j.socscimed.2016.07.041.
- Darlington-Pollock, F., Shackleton, N., Norman, P., Lee, A.C., Exeter, D. (2017) Differences in the risk of cardiovascular disease for movers and stayers in New Zealand: a survival analysis. *International Journal of Public Health*, doi:10.1007/s00038-017-1011-4.
- Department of Health and Social Security (1980) *Inequalities in Health: Report of a Working Group Chaired by Sir Douglas Black*. London: DHSS.
- Dijkstra, A. *et al.* (2015) 'Can selective migration explain why health is worse in regions with population decline?: A study on migration and self-rated health in the Netherlands', *European Journal of Public Health*, 25(6), pp. 944–950. doi: 10.1093/eurpub/ckv192.
- Falkingham, J., Sage, J., Stone, J., Vlachantoni, A. (2016) Residential mobility across the life course: Continuity and change across three cohorts in Britain. *Advances in Life Course Research*, 30: 111-123.
- Farr, W. (1864) *Supplement to the 25th Annual Report on the Registrar General*. London: HMSO.
- Findlay, A., McCollum, D., Coulter, R. and Gayle, V. (2015) New Mobilities Across the Lifecourse: A Framework for Analysing Demographically Linked Drivers of Migration. *Population, Space and Place*, 21: 390-402.

Halfacree, K., and Boyle, P (1993) The challenge facing migration research: the case for a biographical approach. *Progress in Human Geography*, 17 (3): 333-348.

Kröger, H., Pakpahan, E. and Hoffman, R. (2015) What causes health inequality? A systematic review on the relative importance of social causation and health selection. *European Journal of Public Health*, doi:10.1093/eurpub/ckv111

Morris, T., Manley, D., & Sabel, C. E. (2018). Residential mobility: Towards progress in mobility health research. *Progress in Human Geography*, 42(1), 112-133.

Norman, P., Boyle, P. and Rees, P. (2005) 'Selective migration, health and deprivation: A longitudinal analysis', *Social Science and Medicine*, 60(12), pp. 2755–2771. doi: 10.1016/j.socscimed.2004.11.008.

ONS (2019) 'Health state life expectancy by national deprivation declines, England and Wales: 2015 to 2017, Office for National Statistics'. Available at:

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthinequalities/bulletins/healthstatelifeexpectanciesbyindexofmultipledeprivationimd/2015to2017#main-points>.

Peters, K. (2017). *Your Human Geography Dissertation: Designing, Doing, Delivering*. SAGE: London.

Shackleton, N., Darlington-Pollock, F., Norman, P., Jackson, R., Exeter, D. (2018) Longitudinal deprivation trajectories and risk of cardiovascular disease in New Zealand, 53: 34-42.

Tunstall, H. *et al.* (2014) 'The general and mental health of movers to more- and less-disadvantaged socio-economic and physical environments within the UK', *Social Science and Medicine*. Elsevier Ltd, 118(C), pp. 97–107. doi: 10.1016/j.socscimed.2014.07.038.

Verheij, R. A. *et al.* (1998) 'Urban-rural variations in health in the Netherlands : does selective migration play a part ?', pp. 487–493.

Welton, T. (1872) 'On the effects of migrations in disturbing local rates of mortality, as exemplified in the statistics of London and the surrounding country, for the years 1851-1860. *Journal of the Institute of Actuaries*, 16: 153-186.

White, S. (1980) A philosophical dichotomy in migration research. *The Professional Geographer*, 31 (1): 6-13.