Attitudes towards immigration and their antecedents

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This proposal is for a repeat of the module on immigration attitudes fielded in the first round of the ESS in 2002/3, which has been extensively used in cross-national research and has made a major contribution to policy debates. A decade on, major political, cultural, economic and demographic developments make this a highly opportune time for a repeat module. The proposal is to replicate those items that have been most widely used by scholars and that have been shown to have good methodological properties. These include items designed to measure attitudes to levels of immigration, the criteria for accepting migrants, attitudes to integration policy and multiculturalism, together with measures of explanatory concepts such as realistic threat and social distance. Drawing on the state-of-the-art literature, we plan to supplement these items with new items designed to strengthen the measurement of symbolic threat and of contact with migrants and minorities (which recent research suggests can be of considerable explanatory power), together with additional items designed to cover topics of current policy and theoretical debate.

Social inequalities in health and their determinants

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Health inequalities emerge in the intersection between social structures, individual actions and biological processes. While disease and premature mortality ultimately are biological phenomena taking place in individual bodies, social inequalities in ill health, disease and mortality are caused by socially determined conditions and processes of social inequality and stratification. Recently there has been a strong increase in the interest for health inequalities and how to tackle these, both among policymakers and in academia. A key element in this wave of interest is social determinants, in particular represented in the final report by the WHO Commission on Social Determinants in Health led by Michael Marmot (WHO 2008). Therefore, we suggest a ESS-wave, which can establish a comprehensive and comparative pan-European data set on the social determinants of health and health inequalities. The data will be used to compare the influence of different European policy regimes and to test theories of health and health inequalities for a range of health outcomes. More specifically, we suggest a wave which includes a range of health measurements (mental health, BMI, self-reported diagnoses) and social determinants (childhood conditions, working environment, psychosocial factors, and lifestyle factors).