



Welsh Health Survey 2015: Health service use results

29 September 2015
SB 41/201

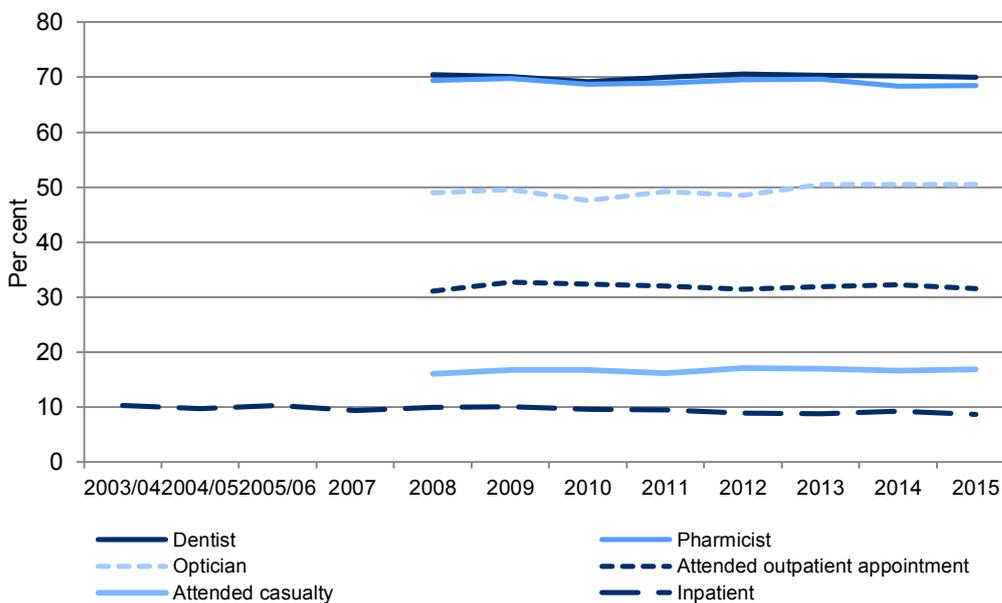
This Welsh Health Survey bulletin presents more detailed health service use results from the 2015 survey, relating to data collected between January and December 2015. It also includes Local Authority/Health Board level results which have been calculated using data from two years of the survey, January 2014 to December 2015.

Broad figures for Wales are provided along with age and gender breakdowns. For a selection of key measures, information is provided by socio-economic group and area deprivation, and by local authority / health board. Some comparisons with earlier years are also shown. Online tables showing further breakdowns are available as are trend data for a selection of key variables.

Key results:

Figure 1: Reported health service use of adults in Wales, 2003/04-2015*

*See section 6 for definitions



- 17 per cent of adults reported that they had talked to a GP about their own health in the past two weeks
- 9 per cent of adults reported being in hospital as an inpatient in the past 12 months, 32 per cent reported attending hospital as an outpatient, and 17 per cent reported attending a hospital casualty department.

About this bulletin

The Welsh Health Survey provides unique information about the health and health-related lifestyles of people living in Wales. It covers a range of health-related issues, including health status, lifestyle and health behaviours, and health service use. Some initial headline results from the survey were published in a statistical release in June 2016.

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Key results (continued)

- 70 per cent of adults reported using a dentist in the past 12 months, and 68 per cent of adults reported using a pharmacist. 51 per cent of adults reported using an optician.
- Use of many health services increased with age (but not casualty, where use fluctuated, or dentists, where use was lowest in the oldest age group). For some services, use by younger women was also relatively high, possibly linked to family planning and child bearing.
- 55 per cent of adults reported being on regular prescribed medication, and the percentage increased with age.
- Adults in the most deprived areas were more likely to report talking to a GP than those in the least deprived areas, and least likely to report using a dentist.
- There has been little change in reported levels of health service use since 2003/04.

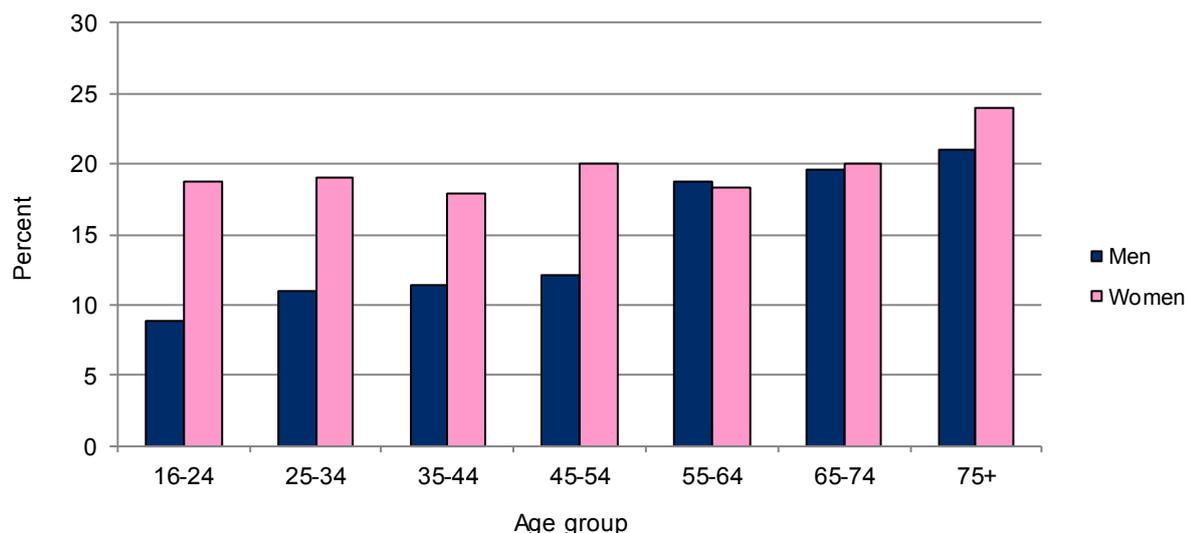
Background

The survey asked adults (aged 16 and over) whether they had used a range of health services recently. It complements other administrative sources of data about use of health services as it includes some information about the characteristics of people using them, includes those making little or no use of services, and covers some services for which information from other data sources is not available. The survey relies on a self-completion questionnaire - the results, therefore, reflect people's own interpretation of the health services they have used.

1. Use of GP services

17 per cent of adults reported that they had talked to a GP about their own health in the past two weeks, becoming more common with age. For younger adults, women were more likely than men to have talked to a GP or seen a practice nurse. Talking to a GP was more common in the most deprived areas compared with the least deprived. There has been little change since 2003/04 of those who talked to a GP in the past 2 weeks.

Figure 2: Percentage who reported talking to a GP about their own health in the past two weeks, by age and sex



In the past two weeks:

- 17 per cent of adults reported that they had talked to a GP about their own health.
- 9 per cent of adults reported that they had seen a practice nurse at the GP surgery about their own health.
- The percentage talking to a GP increased with age, particularly for men (as figure 2 shows)
- For younger adults, women were more likely than men to have talked to a GP or seen a practice nurse. Many consultations by women of this age may be associated with family planning or pregnancy, which could account for some of the difference.

Deprivation:

- The percentage of people reporting talking to a GP in the past 2 weeks was higher in the more deprived areas, with 20 per cent of adults in the most deprived fifth reporting talking to a GP compared with 14 per cent in the least deprived fifth (*age-standardised*).

Trend

- The percentage of people who reported talking to a GP in the past 2 weeks has shown very little variation since 2003/04.

Local authority:

- The percentage of people reporting seeing a GP in the past two weeks ranged from 14 per cent in Powys to 20 per cent in Neath Port Talbot (*age-standardised*).

Tables 1, 2, 6, A2 figure 2

2. Use of hospital services

9 per cent of adults reported being in hospital as an inpatient in the past 12 months, 32 per cent reported attending hospital as an outpatient, and 17 per cent reported attending a hospital casualty department. The proportion of adults using hospital services generally increased with age, but not for casualty, where rates fluctuated with age. There has been little change in reported use of hospital services since 2003/04.

Figure 3: Percentage who reported attending the outpatient department of a hospital in the past twelve months, by age and sex

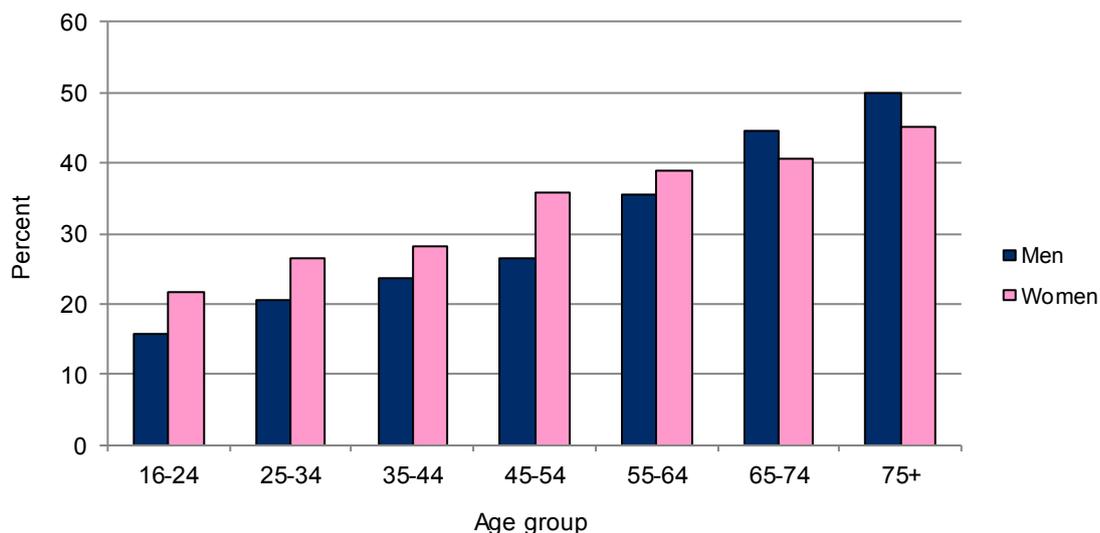
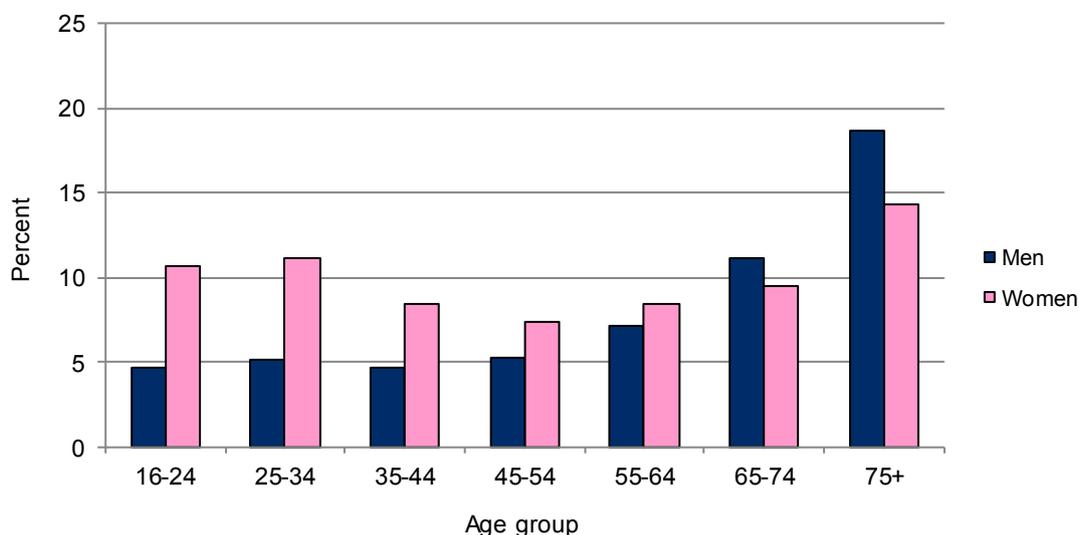


Figure 4: Percentage who reported being in hospital as an inpatient in the past twelve months, by age and sex



In the past three months:

- 5 per cent of adults reported an accident, injury or poisoning needing a visit to hospital.

In the past twelve months:

- 32 per cent of adults reported attending the outpatient department of a hospital.
- 17 per cent of adults reported attending the casualty department of a hospital.
- 9 per cent of adults reported being in hospital as an inpatient (overnight or longer).
- 9 per cent of adults reported being in hospital for treatment as a day patient.
- The percentage of adults using hospital services generally increased with age, with the exception of casualty and needing a visit to hospital following an accident, injury or poisoning (where rates fluctuated).
- For inpatients, rates were relatively high for women aged 16-34 (possibly linked to maternity stays). Figures 3 and 4 show the use by age and sex for outpatients and inpatients.

Deprivation:

- Adults in the most deprived areas were more likely to attend the casualty department (20 per cent) compared with those in the least deprived areas (15 per cent) and to be in hospital as an inpatient (11 per cent compared with 7 per cent). The differences for those attending hospital as an outpatient were small (*age-standardised*).

Trend:

- There has been little change in the use of hospital services since 2003/04.

Local authority:

- Adults reporting attending casualty over the last 12 months varied from 12 per cent in Gwynedd to 21 per cent in Ceredigion (*age-standardised*).
- The percentage of adults who reported attending hospital for an outpatient appointment ranged from 28 per cent in Gwynedd to 35 per cent in Denbighshire (*age-standardised*).
- Adults reporting being in hospital as an inpatient in the past 12 months ranged from 7 per cent in Monmouthshire to 11 per cent in Caerphilly (*age-standardised*).

Tables 1, 2, 6, figures 3, 4

3. Use of other selected health services

70 per cent of adults reported using a dentist in the past 12 months, and 51 per cent reported using an optician. The proportion of adults visiting a pharmacist, chiropodist or optician increased with age, while older people were less likely to have used a dentist. There has been little change since 2003/04. Use of dentists was more common in the least deprived areas.

In the past twelve months:

- 70 per cent of adults reported using a dentist.
- 68 per cent of adults reported using a pharmacist.
- 51 per cent of adults reported using an optician.
- 13 per cent of adults reported using a health visitor, district or other community nurse.
- 10 per cent of adults reported using a chiropodist.
- For pharmacists, chiropodists and opticians, the percentage of adults using them increased with age, while for dentists, older people were less likely to have used them.
- The percentage of men using health visitors, district or other community nurses increased with age, while for women, rates were also relatively high in younger women aged 25-34 (possibly linked with child and maternal health), and in older women.
- Overall, women were more likely than men to use many of the services.
- The survey also covered a range of other services, including physiotherapist (12 per cent), the NHS Direct helpline (8 per cent), GP out of hours services (8 per cent) and osteopath (6 per cent).

Deprivation:

- Adults' reported use of dentists was also most common in the least deprived fifth, with 78 per cent of adults reporting using a dentist in the least deprived fifth compared with 60 per cent in the most deprived fifth (*age-standardised*).
- Use of optician services was also slightly more common in the least deprived fifth compared with the most deprived fifth, there was no apparent relationship with use of a pharmacist and deprivation (*age-standardised*).

Trend:

- There has been little consistent change in reported levels of use for pharmacists, dentists and opticians since 2003/04.

Local authority:

- The percentage of adults reporting using a pharmacist in the past 12 months ranged from 62 per cent in Merthyr Tydfil to 74 per cent in The Vale of Glamorgan (*age-standardised*).

- Adults' reported use of a dentist in the past 12 months varied from 57 per cent in Merthyr Tydfil to 78 per cent in Pembrokeshire (*age-standardised*).
- The percentage of adults using an optician in the past 12 months ranged from 46 per cent in the Isle of Anglesey to 58 per cent in Monmouthshire (*age-standardised*).

Tables 1, 2, 7

4. Medicines

37 per cent of adults reported buying medicines in the past four weeks, overall more common amongst women than men. Around half (55 per cent) of adults reported being on regular prescribed medication, becoming more likely with age.

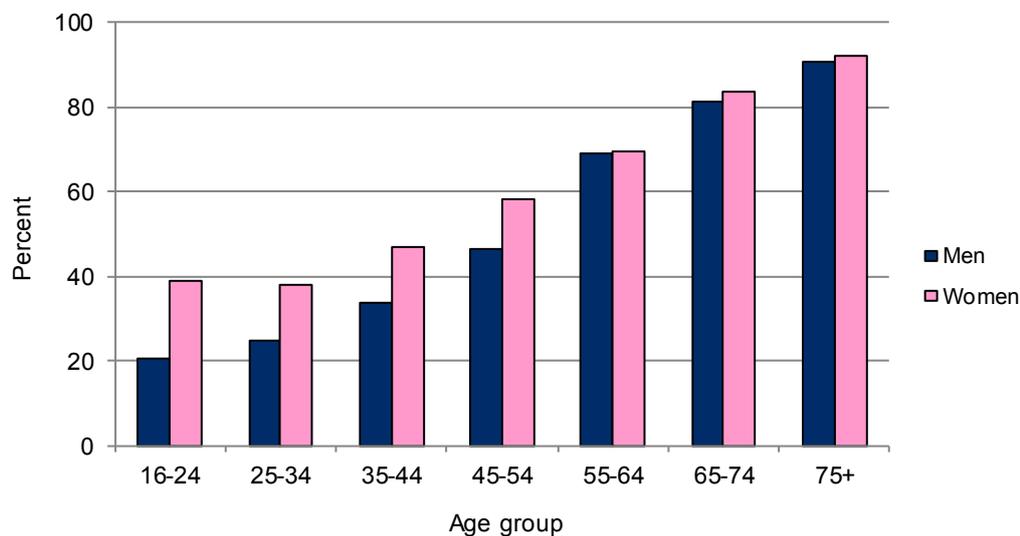
Buying medicine

- 37 per cent of adults reported buying medicine in the past four weeks.
- Overall, women were more likely than men to have bought medicines.
- Adults in the older age groups were less likely to report purchasing medicines.

Tables 3, 8

On regular prescribed medication

Figure 5: Percentage who reported being on regular prescribed medication (for a year or more), by age and sex



- 55 per cent of adults reported being on regular prescribed medication.
- The percentage of adults on regular prescribed medication increased with age, and was higher for women than men in the younger age groups (figure 5).

Tables 3, 8, figure 5

5. Tables

Table 1: Adults' reported use of health services, by broad age, sex (a) (b)

Per cent

	by sex:		by age:			All 16+
	Men 16+	Women 16+	16-44	45-64	65+	
Service use (c):						
Talked to family doctor (GP) (in past 2 weeks)	14	20	14	17	21	17
Saw practice nurse (in past 2 weeks)	8	10	6	9	16	9
Attended hospital due to accident (past 3 months)	5	4	5	4	4	5
Attended casualty department	17	17	18	15	17	17
Attended outpatient department	29	34	23	34	45	32
In hospital as a day patient	9	10	7	10	14	9
In hospital as an inpatient	7	10	7	7	13	9
Pharmacist	62	75	60	72	80	68
Dentist	66	73	68	75	66	70
Optician	45	55	37	55	69	51
District nurse (d)	9	16	12	10	19	13
Chiropodist	8	13	2	8	31	10
GP out of hours services	6	10	10	6	7	8
NHS Direct helpline	6	9	10	6	5	8
Physiotherapist	11	13	10	14	14	12
Osteopath	6	6	6	7	5	6
<i>Unweighted base (e)</i>	6,323	7,333	4,850	4,615	4,191	13,656

Welsh Health Survey 2015

- (a) Tables showing more detailed age breakdowns are available at <http://gov.wales/statistics-and-research/welsh-health-survey>.
- (b) See definitions at section 6 of the health service use statistical bulletin or the 'definitions' sheet at the front of the workbook.
- (c) Service use refers to the past 12 months, except where stated otherwise.
- (d) Health visitor, district or community nurse.
- (e) Bases vary: those shown are for the whole sample.

Table 2: Adults who reported using selected health services, by age and sex (a) (b)
Per cent

	In the past two weeks		In the past twelve months					Unweighted base (c)
	Talked to family doctor (GP)	Attended casualty department	Outpatient department	In hospital as an inpatient	Pharmacist	Dentist	Optician	
Men aged:								
16-24	9	22	16	5	45	69	36	631
25-34	11	16	21	5	48	58	27	707
35-44	11	18	24	5	57	65	30	893
45-54	12	15	27	5	61	69	47	1,027
55-64	19	15	36	7	74	70	56	1,105
65-74	20	15	44	11	78	70	63	1,161
75+	21	20	50	19	80	61	70	799
16-44	10	19	20	5	50	64	31	2,231
45-64	15	15	31	6	67	69	51	2,132
65+	20	17	47	14	79	66	66	1,960
Men aged 16+	14	17	29	7	62	66	45	6,323
Women aged:								
16-24	19	20	22	11	66	70	46	718
25-34	19	18	27	11	73	69	40	891
35-44	18	14	28	8	73	80	46	1,010
45-54	20	15	36	7	74	81	57	1,225
55-64	18	15	39	8	78	79	60	1,258
65-74	20	14	41	9	82	74	68	1,258
75+	24	20	45	14	80	56	74	973
16-44	19	17	25	10	71	73	44	2,619
45-64	19	15	37	8	76	80	58	2,483
65+	22	17	43	12	81	66	71	2,231
Women aged 16+	20	17	34	10	75	73	55	7,333
All aged:								
16-24	14	21	19	8	55	70	41	1,349
25-34	15	17	24	8	60	63	33	1,598
35-44	15	16	26	7	65	73	38	1,903
45-54	16	15	31	6	68	75	52	2,252
55-64	19	15	37	8	76	75	58	2,363
65-74	20	15	42	10	80	72	65	2,419
75+	23	20	47	16	80	58	72	1,772
16-44	14	18	23	7	60	68	37	4,850
45-64	17	15	34	7	72	75	55	4,615
65+	21	17	45	13	80	66	69	4,191
All aged 16+	17	17	32	9	68	70	51	13,656

Welsh Health Survey 2015

- (a) Tables showing more detailed health service use breakdowns are available at <http://gov.wales/statistics-and-research/welsh-health-survey>.
- (b) See definitions at section 6 of the health service use statistical bulletin or the 'definitions' sheet at the front of the workbook.
- (c) Bases vary: those shown are for the whole sample.

Table 3: Adults' reported purchase and use of medicine by broad age, sex (a) (b)
Per cent

	by sex:		by age:			
	Men 16+	Women 16+	16-44	45-64	65+	All 16+
Purchase and use of medicine:						
Purchased medicine	29	44	38	39	33	37
On regular prescribed medication	50	60	34	60	87	55
<i>Unweighted base (c)</i>	6,323	7,333	4,850	4,615	4,191	13,656

Welsh Health Survey 2015

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- (c) Bases vary: those shown are for the whole sample.

Table 4: Adults who reported using selected health services, (age-standardised), by socio-demographic factors (a)
Per cent

	In the past two weeks		In the past twelve months					<i>Unweighted base (b)</i>
	Family doctor (GP)	Attended casualty department	Outpatient department	In hospital as an inpatient	Pharmacist	Dentist	Optician	
Socio-economic classification of household reference person (NS-SEC)								
Managerial and professional	15	14	33	7	72	77	55	5,045
Intermediate	17	17	30	9	66	70	50	2,578
Routine and manual	19	19	31	10	67	65	47	5,350
Never worked and long-term unemployed	30	20	30	12	64	55	43	340
2014 Welsh Index of Multiple Deprivation quintile								
1 (least deprived)	14	15	32	7	72	78	56	2,792
2	15	16	30	7	67	72	53	2,927
3	17	17	32	9	69	71	49	3,008
4	19	18	31	9	67	66	48	2,539
5 (most deprived)	20	20	33	11	70	60	45	2,390
All Aged 16+ (c)	17	17	32	9	69	70	50	13,656

Welsh Health Survey 2015

- (a) See definitions at section 6 for explanations of age-standardisation and socio-demographic factors or the 'definitions' sheet at the front of the workbook.
- (b) Bases vary: those shown are for the whole sample.
- (c) These are age-standardised totals and may differ slightly from the observed totals shown elsewhere in the bulletin and workbook.

Table 5: Adults who using selected health services, 2003/04-2015 (a) (b)
Per cent

	In the past two weeks		In the past twelve months					Unweighted base (d)
	Family doctor (GP)	Attended casualty department	Outpatient department	In hospital as an inpatient	Pharmacist	Dentist	Optician	
Men aged 16+:								
2003/04	14	-	-	9	-	-	-	7,486
2004/05	14	-	-	8	-	-	-	7,437
2005/06	13	-	-	9	-	-	-	6,691
2007 (c)	14	-	-	8	-	-	-	6,418
2008	15	18	29	9	62	66	43	6,119
2009	15	17	30	9	64	66	43	7,412
2010	15	18	30	8	62	65	42	7,420
2011	14	17	29	8	62	66	44	7,458
2012	15	18	29	8	63	66	42	7,309
2013	15	17	29	7	63	67	45	6,943
2014	14	17	29	7	62	67	45	6,554
2015	14	17	29	7	62	66	45	6,323
Women aged 16+:								
2003/04	19	-	-	11	-	-	-	8,812
2004/05	19	-	-	11	-	-	-	8,598
2005/06	20	-	-	12	-	-	-	7,614
2007 (c)	19	-	-	11	-	-	-	7,499
2008	19	15	33	11	77	74	55	7,194
2009	20	16	35	11	75	74	56	8,606
2010	20	16	34	11	75	73	53	8,579
2011	20	16	35	11	75	73	55	8,600
2012	20	16	34	10	76	74	55	8,378
2013	19	17	34	10	76	74	56	8,064
2014	21	17	35	11	75	73	56	7,616
2015	20	17	34	10	75	73	55	7,333
All aged 16+:								
2003/04	16	-	-	10	-	-	-	16,298
2004/05	17	-	-	10	-	-	-	16,035
2005/06	17	-	-	10	-	-	-	14,305
2007 (c)	17	-	-	9	-	-	-	13,917
2008	17	16	31	10	69	70	49	13,313
2009	18	17	33	10	70	70	50	16,018
2010	17	17	32	10	69	69	48	15,999
2011	17	16	32	9	69	70	49	16,058
2012	17	17	31	9	69	71	48	15,687
2013	17	17	32	9	70	70	50	15,007
2014	17	17	32	9	68	70	51	14,170
2015	17	17	32	9	68	70	51	13,656

Welsh Health Survey 2015

- (a) Tables showing more detailed health service use breakdowns are available at <http://gov.wales/statistics-and-research/welsh-health-survey>.
- (b) See definitions at section 6 of the health service use statistical bulletin or the 'definitions' sheet at the front of the workbook.
- (c) From 2007 the fieldwork runs on a calendar year basis.
- (d) Bases vary: those shown are for the whole sample.

Table A1: Adults who reported using selected health services 2014 & 2015, by Local Authority and Local Health board (observed) (a)(b)

Per cent

	In the past two weeks		In the past twelve months					Unweighted base (c)
	Talked to family doctor (GP)	Attended casualty department	Outpatient department	In hospital as an inpatient	Pharmacist	Dentist	Optician	
Local authority:								
Isle of Anglesey	16	13	29	8	63	77	46	1,127
Gwynedd	15	13	28	9	63	70	47	1,223
Conwy	16	15	32	9	70	74	50	1,093
Denbighshire	17	16	36	10	69	72	47	1,242
Flintshire	15	17	34	8	70	71	50	1,319
Wrexham	18	18	32	9	67	72	47	1,256
Powys	14	15	31	9	65	76	53	1,268
Ceredigion	16	22	29	9	70	73	50	1,144
Pembrokeshire	17	18	34	9	71	78	55	1,055
Carmarthenshire	15	18	32	9	68	72	50	1,282
Swansea	19	17	33	9	69	71	49	1,501
Neath Port Talbot	20	19	34	10	67	66	51	1,210
Bridgend	18	16	31	7	67	71	53	1,143
The Vale of Glamorgan	19	15	35	10	75	73	57	1,201
Cardiff	17	16	30	8	69	67	49	1,893
Rhondda Cynon Taf	19	19	33	9	68	67	51	1,589
Merthyr Tydfil	17	19	32	9	62	56	47	1,117
Caerphilly	17	20	33	11	68	65	51	1,517
Blaenau Gwent	18	19	33	10	68	63	51	1,083
Torfaen	18	16	32	9	70	66	52	1,187
Monmouthshire	16	14	31	7	72	76	59	1,155
Newport	16	15	29	9	69	69	49	1,221
Local health board:								
Betsi Cadwaladr University	16	16	32	9	67	72	48	7,260
Hywel Dda	16	19	32	9	70	74	52	3,481
Powys Teaching	14	15	31	9	65	76	53	1,268
Abertawe Bro Morgannwg	19	17	32	9	68	69	51	3,854
Cwm Taf	18	19	33	9	67	65	50	2,706
Cardiff & Vale University	18	15	32	9	71	68	51	3,094
Aneurin Bevan	17	17	32	9	69	68	52	6,163
Wales	17	17	32	9	68	70	51	27,826

Welsh Health Survey 2014 + 2015

- (a) More information on the Welsh Health Survey is available at <http://gov.wales/statistics-and-research/welsh-health-survey>.
- (b) See definitions at section 6 of the health service use statistical bulletin or the 'definitions' sheet at the front of the workbook.
- (c) Bases vary: those shown are for the whole sample.

Table A2: Adults who reported using selected health services 2014 & 2015, by Local Authority and Local Health Board (age-standardised) (a) (b)

Per cent

	In the past two weeks		In the past twelve months					<i>Unweighted base (c)</i>
	Talked to family doctor (GP)	Attended casualty department	Outpatient department	In hospital as an inpatient	Pharmacist	Dentist	Optician	
Local authority:								
Isle of Anglesey	16	13	29	8	63	77	46	1,127
Gwynedd	15	12	28	9	64	70	47	1,223
Conwy	16	15	31	8	69	74	48	1,093
Denbighshire	16	16	35	10	69	73	46	1,242
Flintshire	15	17	34	8	70	71	50	1,319
Wrexham	18	18	32	9	67	72	47	1,256
Powys	14	15	30	9	63	76	51	1,268
Ceredigion	17	21	29	8	70	74	50	1,144
Pembrokeshire	16	18	32	9	70	78	52	1,055
Carmarthenshire	15	18	31	9	68	72	49	1,282
Swansea	20	16	34	9	70	71	50	1,501
Neath Port Talbot	20	19	33	10	67	65	51	1,210
Bridgend	18	16	31	7	67	71	52	1,143
The Vale of Glamorgan	19	15	34	10	74	73	56	1,201
Cardiff	18	16	33	9	72	68	52	1,893
Rhondda Cynon Taf	19	19	33	9	69	67	51	1,589
Merthyr Tydfil	17	18	33	9	62	57	48	1,117
Caerphilly	18	20	34	11	69	65	52	1,517
Blaenau Gwent	19	19	33	10	68	63	52	1,083
Torfaen	17	17	32	9	69	65	52	1,187
Monmouthshire	16	14	30	7	71	76	58	1,155
Newport	16	15	29	9	70	68	50	1,221
Local health board:								
Betsi Cadwaladr University	16	15	32	9	67	72	48	7,260
Hywel Dda	16	18	31	9	69	74	50	3,481
Powys Teaching	14	15	30	9	63	76	51	1,268
Abertawe Bro Morgannwg	19	17	33	9	69	70	51	3,854
Cwm Taf	19	19	33	9	67	65	50	2,706
Cardiff & Vale University	18	15	33	9	72	69	53	3,094
Aneurin Bevan	17	17	32	9	69	67	52	6,163
Wales	17	17	32	9	69	70	51	27,826

Welsh Health Survey 2014 + 2015

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- (b) See definitions at section 6 of the health service use statistical bulletin or the 'definitions' sheet at the front of the workbook.
- (c) Bases vary: those shown are for the whole sample.

6. Definitions

Use of GP services

The survey asked adults whether they had talked to a GP (family doctor) about their own health in the past two weeks (either in person or by telephone). Those who had were asked how many times they had done so, and whether they received a prescription. The survey also asked whether adults had seen a practice nurse at the GP surgery about their own health in the past 2 weeks.

Use of hospital services

The survey asked adults whether they had attended the outpatient or casualty department of a hospital as a patient in the past twelve months (apart from straightforward ante- or post-natal visits), and whether they had been in hospital for treatment as a day patient (admitted to a hospital bed or day ward but not remaining overnight) or inpatient (overnight or longer) in the past twelve months. They were also asked if any of their visits were paid for privately.

The survey also asked adults whether they had had any accident, injury or poisoning needing hospital treatment or a visit to casualty in the past three months. If so, they were asked what the accident was and where the most recent accident took place.

Use of other selected health services

The survey asked adults if they had used a range of other services in the past twelve months and for some services asked whether they had any private treatment.

Medicines

The survey asked adults whether they had bought any medicine (conventional and others) during the past four weeks. Medicine was defined as anything taken or put on the skin, such as tablets, powders, creams, sprays and drops, to treat a medical condition. Those who had bought medicine were asked what kinds they bought.

Adults were also asked whether they were on regular medication (for a year or more) prescribed by a doctor.

Socio-Demographic Factors

Socio-economic group

The socio-economic classification in use in this report is the 3-class version of the National Statistics Socio-Economic Classification (NS-SEC) of the Household Reference Person (HRP).

Area deprivation

Area deprivation is based on the Welsh Index of Multiple Deprivation¹ 2014 (WIMD). WIMD gives deprivation scores for small areas in Wales. These small areas were split into five groups (“fifths”) of deprivation according to overall WIMD scores and each respondent to the Welsh Health Survey was allocated to the relevant fifth.

Age Standardisation

Age standardisation has been used in selected tables in order to enable groups to be compared after adjusting for the effects of any differences in their age distributions. When different sub-groups are compared in respect of a variable on which age has an important influence, any differences in age distributions between these sub-groups are likely to affect the observed differences in the proportions of interest.

Age standardisation was carried out using the direct standardisation method. The standard population to which the age distribution of sub-groups was adjusted was adapted from the 2013 European Standard Population. Calculations were done using Stata. The age-standardised proportion p' was calculated as follows, where p_i is the age specific proportion in age group i and N_i is the standard population size in age group i :

$$p' = \frac{\sum_i N_i p_i}{\sum_i N_i}$$

Therefore p' can be viewed as a weighted mean of p_i using the weights N_i . Age standardisation was carried out using the age groups: 16-24, 25-34, 35-44, 45-54, 55-64, 65-74, 75 and over.

¹ Welsh Index of Multiple Deprivation 2014
<http://gov.wales/statistics-and-research/welsh-index-multiple-deprivation/>

7. Notes

Overview of survey design

WHS was established in 2003 and runs all year round. During the 2015 survey, around 13,700 adults and 2,600 children participated in the survey.

The survey was based on a representative sample of people living in private households in Wales. A random sample of addresses from the Postcode Address File (PAF) was selected. By surveying the general population, WHS is able to measure the health and lifestyle of a cross-section of the population, not just those who are in ill health or have regular contact with health services.

WHS 2015 was carried out by NatCen Social Research on behalf of the Welsh Government. Interviewers conducted a short interview with a responsible adult in the household, covering basic socio-demographic information about the household. Self-completion questionnaires were then left for completion by all adults in the household (aged 16+) for later collection by the interviewer. In households with children, a maximum of two children were randomly selected for inclusion in the survey. For selected children, questionnaires were left for completion (with older children completing their own questionnaires).

Further details of WHS methodology, definitions and questions are given in statistical bulletins and technical reports, available on the Statistics for Wales website².

Differences in methodology and questions mean that, in general, results from WHS are not comparable with health surveys in the other UK countries. [More information on comparability of the headline indicators \(including obesity, smoking and alcohol consumption\).](#)

Uses of WHS results

The information collected through WHS meets a range of important needs and is used in many ways, including to:

- provide national estimates of health and health-related lifestyle.
- examine differences between population sub-groups (e.g. age, sex, social class) and local areas (health boards and local authorities).
- provide evidence to inform and monitor targets, indicators and policies for promoting better health, such as *Our Healthy Future* and *Together for Health*.
- provide local authority level information for development of joint local health, social care and wellbeing strategies / single integrated plans.

² <http://gov.wales/statistics-and-research/?lang=en>

It is used by a wide range of users, including those working in national and local government, NHS organisations, research and academic settings. It is also useful to a wider general audience, particularly those in Wales.

Key quality information

- a) There are no planned revisions to the statistics in this release, but if revisions were made, they would be in accordance with the Revisions, Errors and Postponements Policy for Statistics for Wales³.
- b) The small proportion of people not covered by the PAF, including those living in institutions, was not covered by the survey. It should be noted that people in institutions are likely to be, on average, in poorer health than those in private households – this should be kept in mind when considering the results from the survey.
- c) Interpretation of the results should take account of the questionnaire design, as the mode of collection (self-reporting on paper) and the questions themselves affect the information collected. The survey relies on a self-completion questionnaire. The results, therefore, reflect people's own understanding of their health rather than a clinical assessment of their medical condition and their own interpretation of the health services they have used.
- d) Survey results are weighted to take account of unequal selection probabilities, and for differential non-response, i.e. to ensure that the age and sex distribution of the responding sample matches that of the Welsh population.
- e) This release is based on data collected by the WHS between January and December 2014. During this period, a household interview was obtained with 76% of eligible households in the sample. Self-completion questionnaires were obtained for 77% of adults and 73% of selected children in participating households. Local Authority/ Local Health Board information was calculated from data collected between January 2014 and December 2015.
- f) Missing answers occur for several reasons, including refusal or inability to answer a particular question, and cases where the question is not applicable to the informant. Missing answers have been omitted from all tables and analyses.
- g) Base numbers (sample sizes) of respondents replying to individual questions vary slightly. The tables provide an indication of overall base numbers - that is, all those taking part in the survey, although a small number may not have answered particular questions. It should be noted that the design of the survey means that the effective sample sizes will be somewhat smaller than the sample sizes, so these should be interpreted as a guide to precision only.
- h) A confidence interval can be calculated around a survey estimate and gives a range within which the true value is likely to fall. There is a 95% chance that the 95% confidence intervals include the true value. In general, the smaller the sample size the wider the confidence interval. As a rough guide to interpretation, when comparing two years, if the confidence intervals around the

⁴ <http://gov.wales/statistics-and-research/about/statement-of-compliance/revisions-errors-postponements/>

estimates overlap, it can be assumed that the estimates are not statistically significantly different – this approach is not as rigorous as doing a formal statistical test, but is straightforward, widely used and reasonably robust. Confidence intervals for a selection of key variables are published in some WHS outputs and NatCen’s technical report.

i) From 2007, fieldwork has run on a calendar year basis (January – December) and includes more detailed data for children than previously. Prior to that, fieldwork covered the twelve month periods October 2003 - September 2004 (2003/04), October 2004 - September 2005 (2004/05) and November 2005 – October 2006 (2005/06).

National Statistics status

The [United Kingdom Statistics Authority](#) has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the [Code of Practice for Official Statistics](#).

National Statistics status means that official statistics meet the highest standards of trustworthiness, quality and public value.

All official statistics should comply with all aspects of the Code of Practice for Official Statistics. They are awarded National Statistics status following an assessment by the UK Statistics Authority’s regulatory arm. The Authority considers whether the statistics meet the highest standards of Code compliance, including the value they add to public decisions and debate.

It is Welsh Government’s responsibility to maintain compliance with the standards expected of National Statistics. If we become concerned about whether these statistics are still meeting the appropriate standards, we will discuss any concerns with the Authority promptly. National Statistics status can be removed at any point when the highest standards are not maintained, and reinstated when standards are restored.

Well-being of Future Generations Act (WFG)

The Well-being of Future Generations Act 2015 is about improving the social, economic, environmental and cultural well-being of Wales. The Act puts in place seven well-being goals for Wales. These are for a more equal, prosperous, resilient, healthier and globally responsible Wales, with cohesive communities and a vibrant culture and thriving Welsh language. Under section (10)(1) of the Act, the Welsh Ministers must (a) publish indicators (“national indicators”) that must be applied for the purpose of measuring progress towards the achievement of the Well-being goals, and (b) lay a copy of the national indicators before the National Assembly. The 46 national indicators were laid in March 2016.

Information on indicators and associated technical information - [How do you measure a nation’s progress? - National Indicators](#)

The WHS bulletin on health-related lifestyle includes the national indicator *percentage of adults who have fewer than two healthy lifestyle behaviours* and 5 contextual indicators, namely not smoking, not drinking above guidelines, eating five fruit or vegetables a day, meeting physical

activity guidelines and maintaining a healthy weight, which were referenced in the technical document in the previous link.

As a national indicator under the Act they must be referred to in the analyses of local well-being produced by public services boards when they are analysing the state of economic, social, environmental and cultural well-being in their areas.

Further information on the [Well-being of Future Generations \(Wales\) Act 2015](#).

The statistics included in this release could also provide supporting narrative to the national indicators and be used by public services boards in relation to their local well-being assessments and local well-being plans.

Availability of unpublished data

Some additional summaries may be produced on request, subject to the availability of resources, data quality and robustness, and provided the confidentiality of respondents is preserved. For further details, contact stats.healthinfo@wales.gsi.gov.uk.

An anonymised version of the main dataset, together with supporting documentation, is deposited with the UK Data Archive each year (some information is removed to ensure confidentiality is preserved). These datasets may be accessed by registered users for specific research projects. Some examples of uses made of the data by researchers are shown on the website. The UK Data Archive can be accessed via the UK Data Service⁴ website.

From time to time, researchers may wish to analyse more detailed data than is available from the Data Archive. Requests for such data will be considered on a case by case basis. For further details, contact stats.healthinfo@wales.gsi.gov.uk.

⁵ UK Data Service <http://ukdataservice.ac.uk/get-data/key-data.aspx#/tab-uk-surveys>

Future of WHS

It has been decided to replace existing surveys, including WHS, with a new survey of adults starting during 2016-17 which will include health-related questions. WHS ceased in its current form at the end of 2015, the results for 2015 will therefore be the final set of WHS results. Future health-related information will be available from the National Survey for Wales.

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Further details

The document is available at:

<http://gov.wales/statistics-and-research/welsh-health-survey/?lang=en>

Next update

No longer updated

We want your feedback

We welcome any feedback on any aspect of these statistics which can be provided by email to stats.health@wales.gsi.gov.uk.

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