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Time to Talk
Public Health
Wales



Time to Talk Public Health

February 2024 Panel Survey Findings, including a parent boost sample:

Parenting information needs, Perceptions of breastfeeding, Role of educational settings in child health, Child behavioural strategies, Mental well-being, and Technology use with family and friends

Published: April 2024



- **Time to Talk Public Health** is a national panel of Welsh residents aged 16+ years established by Public Health Wales to enable **regular public engagement** to inform public health policy and practice.
- The panel is designed to be broadly representative of the Welsh population by age, sex, deprivation, ethnicity and health board.
- Members of the public are recruited to the panel using a variety of methods and subsequently invited to participate in regular surveys to provide insight into key public health issues.
- This report presents findings from the February 2024 survey covering:
 - **Parenting information needs**
 - **Perceptions of breastfeeding**
 - **Role of education settings in child health**
 - **Child behavioural strategies**
 - **Mental well-being**
 - **Technology use with family and friends**
- The February 2024 survey included a boost sample of parents of children aged under 18 years. This report presents survey findings for both the general population sample (standard reported sample) and for parents of children aged under 18 years (which includes general population and boost sample participants).
- We are very grateful to the residents of Wales who have given their valuable time to participate in the panel.



- Initial recruitment to the Time to Talk Public Health Panel (Nov 2022-Jan 2023) was undertaken by telephone, face-to-face and social media advertising.
- Recruitment is continuous with individuals able to sign up via [the Time to Talk Public Health Panel website](#) (opens in new window) at any time. Based on initial demographic screening, individuals are either recruited directly to the panel or invited to join a waiting list if the quota for their demographic profile is full.
- From April 2023-March 2024, panel members were invited to complete a survey every two months, either online or by telephone. From April 2024, surveys will be conducted quarterly.
- During the delivery of each survey, additional targeted recruitment is undertaken through face-to-face interviews and social media advertising to increase sample representativeness as required. For the February 2024 survey, programmatic advertising (e.g. in online games, websites) was trialled as an additional method of targeted recruitment. The advertising directed potential participants to take part via the online survey platform.
- Further information on the methods of the survey is provided in the Appendix.
- Due to the panel being partially self-selected and focused on public health topics, the sample may be affected by bias towards residents with greater interest in public health topics and healthcare issues. This should be considered when interpreting findings.

Parent boost

- The February 2024 survey had a focus on topics relating to children's health, including questions of specific relevance to parents. Previous survey samples have included around 300 parents of children under 18 years.
- To increase participation of parents in the survey, a boost sample of 400 parents with children under 18 years was commissioned. The boost sample targeted parents through face-to-face interviews, telephone interviews and social media advertising. This activity resulted in 454 additional parents completing the February 2024 survey.
- The parent sample presented in this report includes all parents with children aged under 18 years who completed the survey, combining those that are existing panel members and those recruited via the parent boost.

- This report presents the findings of the February 2024 survey separated into the following two samples:
 - The **Time to Talk Public Health (TTPH) general population sample** (N = 1,261)
 - **Parents of children aged under 18 years** (N = 717)
- The sample of **parents of children aged under 18 years** includes 454 parents recruited from the boost sample and 263 parents who participated in the TTPH general population survey. Thus, 263 parents are included in both samples.
- Data for **TTPH general population sample** has been weighted to reflect national population demographics by age, sex and deprivation (unless stated otherwise).
- Data for the **Parents of children aged under 18 years** sample is unweighted.
- Where sample sizes differ from the full sample sizes shown above, this is acknowledged with the relevant question.
- Due to the weighting application and duplication between samples, direct comparison between the two samples should not be undertaken.
- Along with labeling, a colour scheme has been applied to help clearly show which sample the graphs and tables refer to. Graphs and tables presenting data from the general population sample use an aqua colour. Graphs and tables presenting data from parents of children under 18 years use an orange colour. For all graphs and tables, deeper colours represent higher percentages and paler colours represent lower percentages.
- Demographic breakdowns of current panel members who were invited to complete the February 2024 survey and subsequent TTPH general population survey participants (those who completed the survey as per the standard reporting); and the parent sample (including both the boost sample and TTPH general population sample parents) is provided in the Appendix.
- Please note: Percentages in this report may not total 100% due to rounding.

- 1,261 participants took part in the February 2024 survey to provide a general population perspective (1st Feb – 3rd March 2024).
- An additional 454 parents of children aged under 18 years were recruited as a boost sample.
- Figures presented in this summary slide are for the general population sample.

Parenting information needs

- The top three (of ten) types of child-related information that people thought it was 'very important' for parents to receive from the NHS were:
 - Spotting signs of serious illnesses in children (93%),
 - How perform first aid (87%),
 - Supporting children's speech, language and communication skills (83%).

Role of education settings

- Of nine child health and well-being areas, those that most people said they 'strongly support' education having a role in were:
 - Supporting online safety (77%),
 - Preventing smoking and vaping (76%),
 - Accessing support for mental health difficulties (74%),
 - Preventing alcohol and drug misuse (74%).

Technology use with family and friends

- 41% of people said their partner's technology use had a negative impact on their relationship with them at least some of the time, while only 34% had this view when asked about the impact of their technology use on their relationship with their partner.

Child behavioural strategies

- The top three (of ten) child behaviour management strategies that people rated as 'very effective' were:
 - Praising good behaviour (74%),
 - Rewarding good behaviour (65%)
 - reasoning with a child (48%).Only 5% considered physical punishment to be 'very effective'.
- 91% of people knew that all physical punishment of children is illegal in Wales.

Perceptions of breastfeeding

- 58% of people said they think breastfeeding is 'very important' for babies' health and development, with 31% thinking it is somewhat important.

Mental well-being

- 37% of people said they take 'a lot' of action to help protect and improve their mental well-being; 50% take 'a little' action and 12% take no action.

Parenting information needs

This section asked about parenting and different types of information available to support with raising a child. By parents we are referring to anyone with a primary caring responsibility for a child.

How important, if at all, do you think it is that parents receive information from the NHS on the following child-related topics?

General population weighted data

	Very important	Somewhat important	Not at all important
Ideas for ways to stay physically active as a family	56%	39%	4%
Helping a child to learn about their emotions	72%	22%	5%
Ideas for ways to encourage children to eat a balanced diet	73%	24%	2%
Spotting the signs of serious illnesses in children	93%	5%	1%
How to perform first aid on children	87%	11%	1%
Understanding children's brain development	65%	31%	3%
How to effectively discipline a child	56%	32%	10%
Supporting children through school transition periods	61%	30%	7%
How to support the development of children's speech, language and communication skills	83%	14%	2%
Key developmental milestones children can expect to reach before starting school	66%	28%	5%

Prefer not to say for all statements: ≤3%

How important, if at all, do you think it is that parents receive information from the NHS on the following child-related topics?

Parents of children aged under 18 years unweighted data

	Very important	Somewhat important	Not at all important
Ideas for ways to stay physically active as a family	55%	40%	4%
Helping a child to learn about their emotions	80%	17%	3%
Ideas for ways to encourage children to eat a balanced diet	72%	26%	1%
Spotting the signs of serious illnesses in children	94%	6%	0%
How to perform first aid on children	91%	8%	0%
Understanding children's brain development	74%	24%	2%
How to effectively discipline a child	49%	36%	14%
Supporting children through school transition periods	63%	29%	7%
How to support the development of children's speech, language and communication skills	81%	18%	<1%
Key developmental milestones children can expect to reach before starting school	64%	32%	3%

Prefer not to say for all statements: ≤1%

How important, if at all, do you think it is that parents receive information from the NHS on the following parent-related topics?

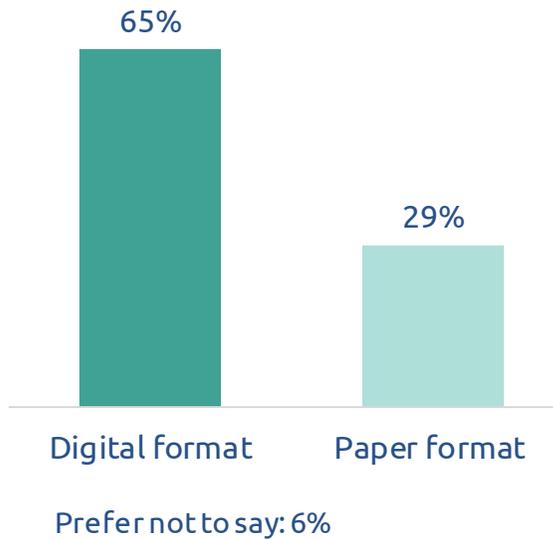
	General population weighted data			Parents of children aged under 18 years unweighted data		
	Very important	Somewhat important	Not at all important	Very important	Somewhat important	Not at all important
Where to find help to manage difficult family relationships (e.g. domestic abuse)	77%	18%	4%	79%	18%	2%
Ways to look after their own health and well-being	74%	24%	2%	74%	25%	1%
Where to find help to manage finances	51%	32%	15%	47%	34%	17%

Prefer not to say for all statements: ≤2%

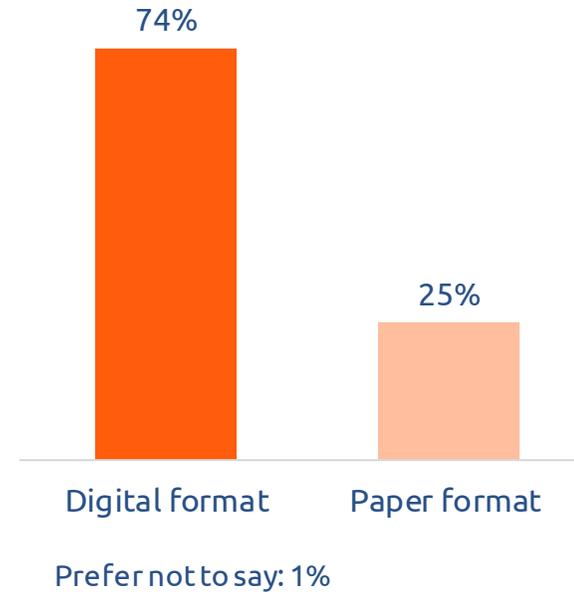
Prefer not to say for all statements: ≤1%

If you received information from the NHS on child health, would you prefer to receive this in digital or paper format?

General population
weighted data

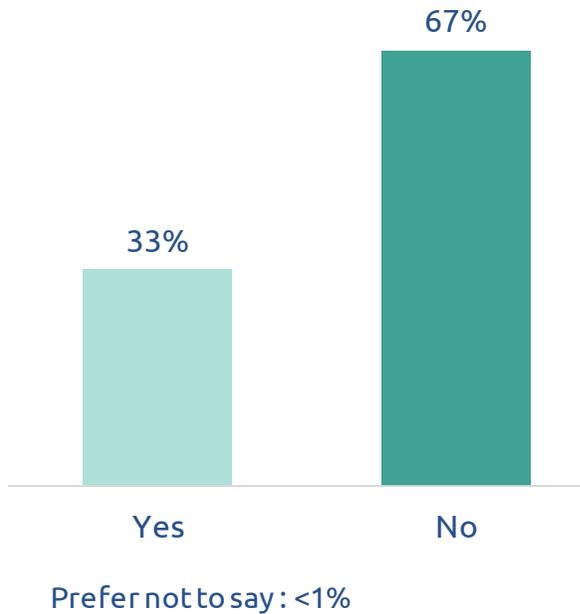


Parents of children aged under 18 years
unweighted data

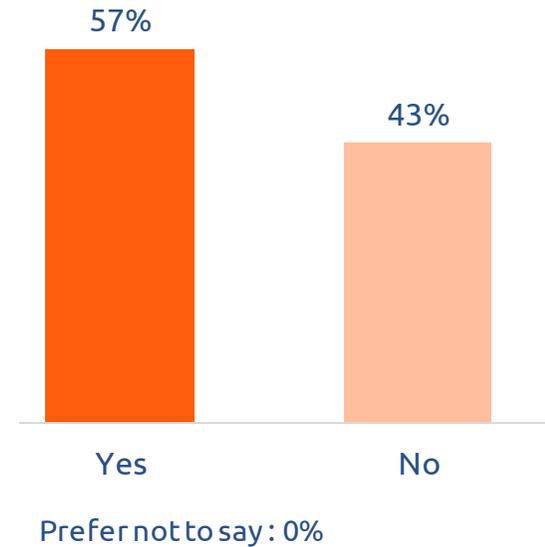


Have you heard of the NHS Healthy Start Scheme?

General population
weighted data

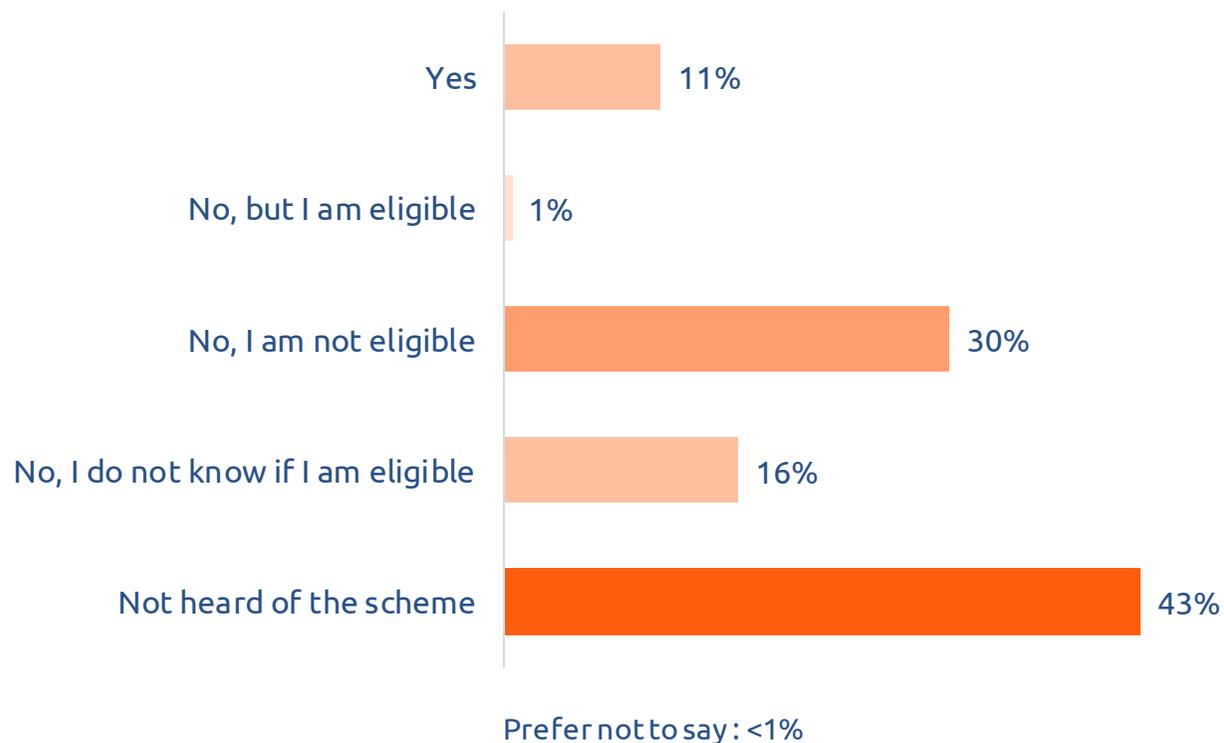


Parents of children aged under 18 years
unweighted data



Have you used the NHS Healthy Start Scheme?

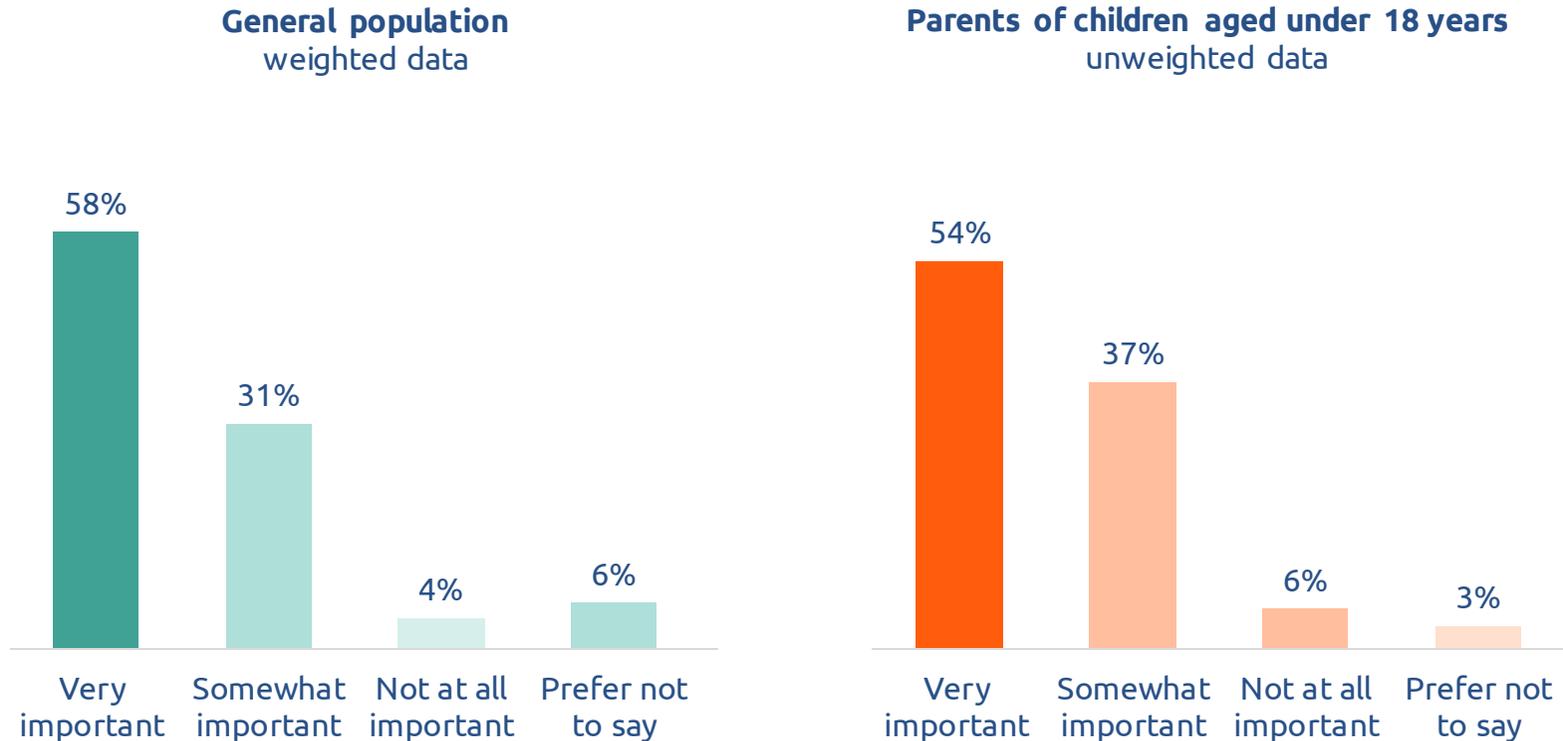
Parents of children aged under 18 years
unweighted data



Perceptions of breastfeeding

This section asked about the importance and acceptability of breastfeeding.

How important, if at all, do you think breastfeeding is for babies' health and development?



To what extent do you support or oppose babies being breastfed in the following places?

General population
weighted data

	Strongly support	Tend to support	Tend to oppose	Strongly oppose	Don't know
Workplaces	64%	22%	5%	3%	4%
Supermarkets and shops	59%	22%	9%	2%	5%
Schools	58%	21%	9%	2%	8%
Leisure and entertainment facilities	67%	20%	6%	1%	3%
Cafes and restaurants	67%	22%	5%	2%	3%
Outdoor spaces (e.g. parks)	72%	20%	2%	2%	2%

Prefer not to say for all statements: ≤3%

To what extent do you support or oppose babies being breastfed in the following places?

Parents of children aged under 18 years
unweighted data

	Strongly support	Tend to support	Tend to oppose	Strongly oppose	Don't know
Workplaces	81%	13%	3%	1%	3%
Supermarkets and shops	84%	12%	2%	<1%	2%
Schools	80%	11%	4%	<1%	4%
Leisure and entertainment facilities	87%	10%	1%	<1%	2%
Cafes and restaurants	87%	10%	<1%	0%	1%
Outdoor spaces (e.g. parks)	89%	8%	<1%	<1%	1%

Prefer not to say for all statements: ≤1%

Role of educational settings in child health

This section asked about the role of educational settings (e.g. schools and nurseries) in child health and well-being outcomes.

Role of educational settings in child health

To what extent do you support or oppose education settings having a role in the following health and well-being outcomes for children (under 18 years)?

General population
weighted data

	Strongly support	Tend to support	Tend to oppose	Strongly oppose	Don't know
Supporting online safety	77%	18%	1%	1%	1%
Developing positive relationships	66%	28%	1%	1%	2%
Developing positive coping mechanisms	68%	26%	1%	1%	3%
Accessing support for mental health difficulties	74%	21%	2%	1%	2%
Promoting physical activity	68%	28%	1%	<1%	1%
Promoting a healthy balanced diet	61%	33%	2%	1%	1%
Preventing smoking and vaping	76%	18%	2%	1%	2%
Preventing alcohol and drug misuse	74%	20%	2%	1%	2%
Promoting good sleep patterns	54%	33%	5%	1%	5%

Prefer not to say for all statements: ≤2%

Role of educational settings in child health

To what extent do you support or oppose education settings having a role in the following health and well-being outcomes for children (under 18 years)?

Parents of children aged under 18 years

unweighted data

	Strongly support	Tend to support	Tend to oppose	Strongly oppose	Don't know
Supporting online safety	84%	15%	1%	0%	<1%
Developing positive relationships	78%	20%	1%	<1%	1%
Developing positive coping mechanisms	80%	17%	1%	<1%	1%
Accessing support for mental health difficulties	80%	16%	1%	<1%	2%
Promoting physical activity	74%	23%	1%	<1%	1%
Promoting a healthy balanced diet	68%	28%	3%	1%	1%
Preventing smoking and vaping	78%	18%	1%	<1%	2%
Preventing alcohol and drug misuse	76%	19%	2%	<1%	3%
Promoting good sleep patterns	54%	35%	5%	1%	4%

Prefer not to say for all statements: ≤2%

Child behavioural strategies

This section focused on understanding people's views and experiences of different ways of managing children's behaviour. Participants were asked to be as honest as possible when answering these questions, and they were reminded that their responses would be treated confidentially.

How effective do you think the following discipline strategies are in managing children’s behaviour?

General population
weighted data

	Very effective	Somewhat effective	Not at all effective	Don't know
Praising good behaviour	74%	22%	1%	2%
Rewarding good behaviour	65%	30%	2%	2%
Reasoning with them (e.g. explaining why their behaviour is wrong)	48%	43%	6%	2%
Taking away privileges (e.g. stopping them from doing something they like to do)	30%	55%	9%	5%
Sending them to their room or for time out	17%	56%	18%	7%
Shouting at them	2%	29%	62%	6%
Diverting them (e.g. giving them something else to do)	45%	43%	5%	6%
Physically punishing them (e.g. smacking or slapping)	5%	21%	65%	7%
Making them do extra chores	10%	52%	27%	9%
Ignoring them when they are misbehaving	7%	41%	43%	7%

Prefer not to say for all statements: ≤2%

How effective do you think the following discipline strategies are in managing children’s behaviour?

Parents of children aged under 18 years
unweighted data

	Very effective	Somewhat effective	Not at all effective	Don't know
Praising good behaviour	78%	21%	1%	<1%
Rewarding good behaviour	67%	31%	2%	<1%
Reasoning with them (e.g. explaining why their behaviour is wrong)	50%	45%	3%	1%
Taking away privileges (e.g. stopping them from doing something they like to do)	26%	56%	16%	2%
Sending them to their room or for time out	12%	51%	31%	6%
Shouting at them	1%	28%	69%	2%
Diverting them (e.g. giving them something else to do)	51%	43%	5%	1%
Physically punishing them (e.g. smacking or slapping)	1%	8%	86%	4%
Making them do extra chores	5%	36%	47%	10%
Ignoring them when they are misbehaving	7%	46%	43%	3%

Prefer not to say for all statements: ≤1%

In the last 12 months, have you used any of the following approaches to discipline a child for their behaviour?

General population
Only asked of those with children under 18 years or who reported taking on childcare responsibilities^[Note 1]
unweighted data (n=666)

Parents of children aged under 18 years
unweighted data

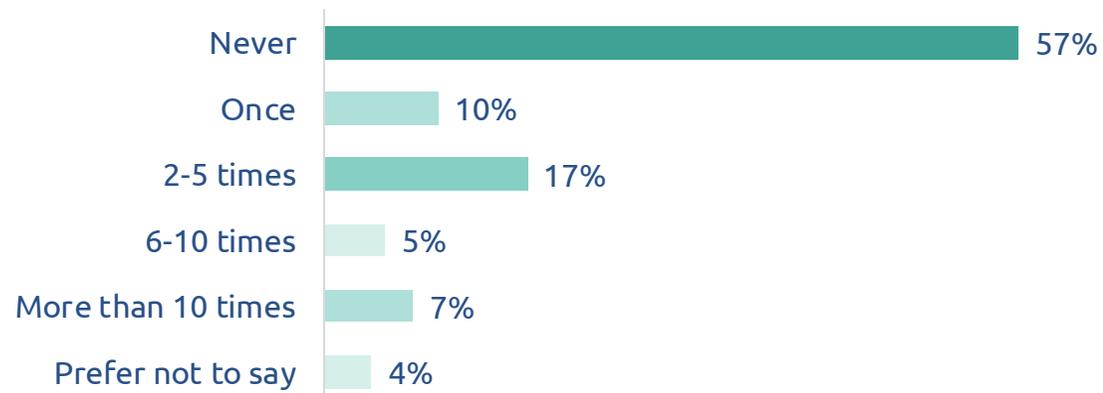
	Yes	No	Yes	No
Praising good behaviour	92%	7%	97%	3%
Rewarding good behaviour	87%	11%	93%	7%
Reasoning with them	85%	13%	92%	8%
Taking away privileges	46%	52%	60%	40%
Sending them to their room or for time out	28%	70%	41%	58%
Shouting at them	34%	64%	55%	45%
Diverting them	79%	20%	83%	17%
Physically punishing them (e.g. smacking or slapping)	2%	96%	1%	98%
Making them do extra chores	17%	81%	19%	81%
Ignoring them when they are misbehaving	38%	60%	47%	52%

Prefer not to say for all statements: ≤3% Prefer not to say for all statements: ≤1%

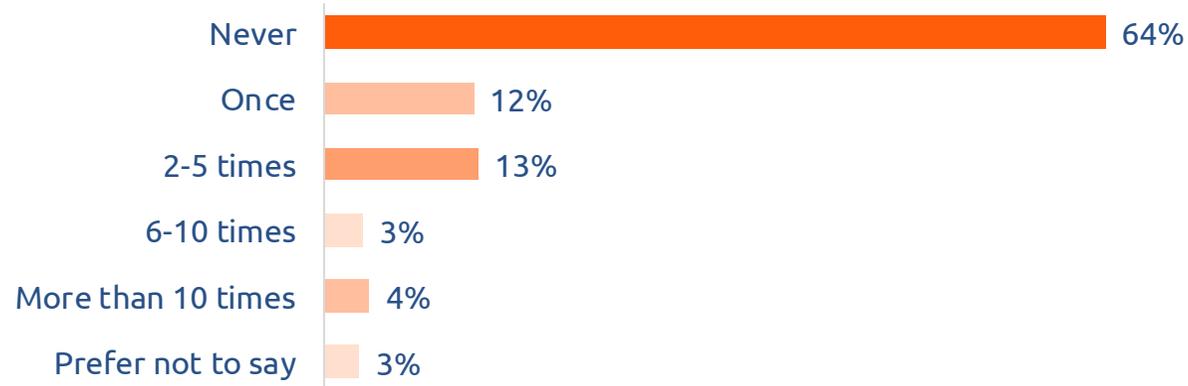
Note 1. This question was only asked to people who reported being a parent of a child under 18 years and to those who reported independently looking after other people's children in the last 12 months (e.g. as a relative, friend or babysitter).

About how many times in your life have you smacked or slapped a child for misbehaving?

General population weighted data

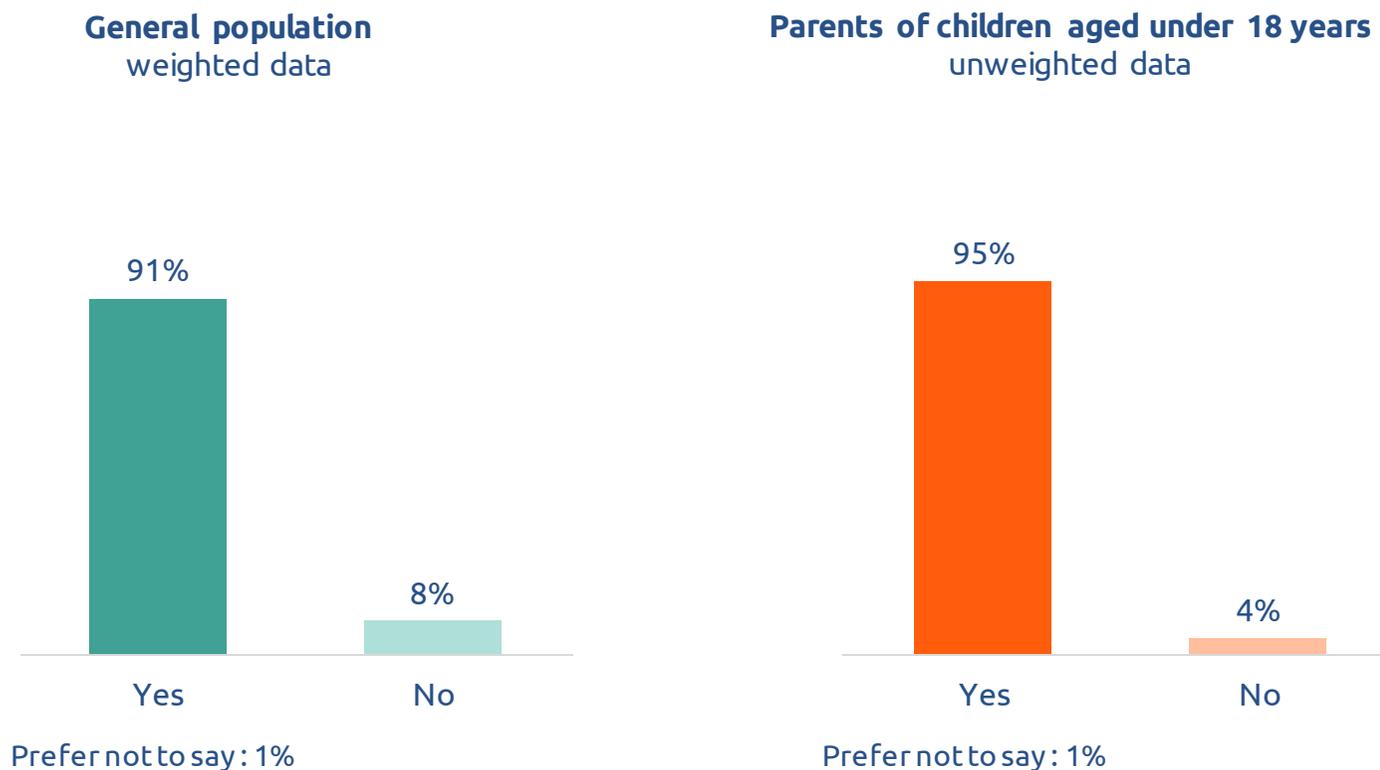


Parents of children aged under 18 years unweighted data



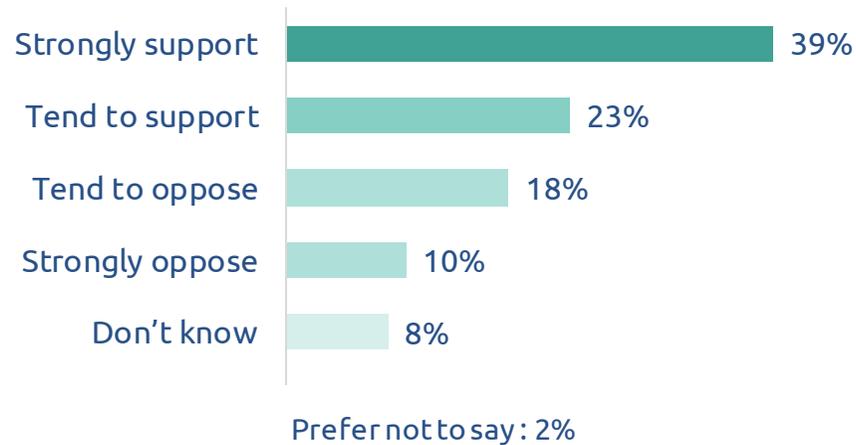
In March 2022, Welsh Government removed the defence of reasonable punishment against children. This means that all physical punishment of children is illegal in Wales, including smacking.

Before today, did you know that all physical punishment of children is illegal in Wales?

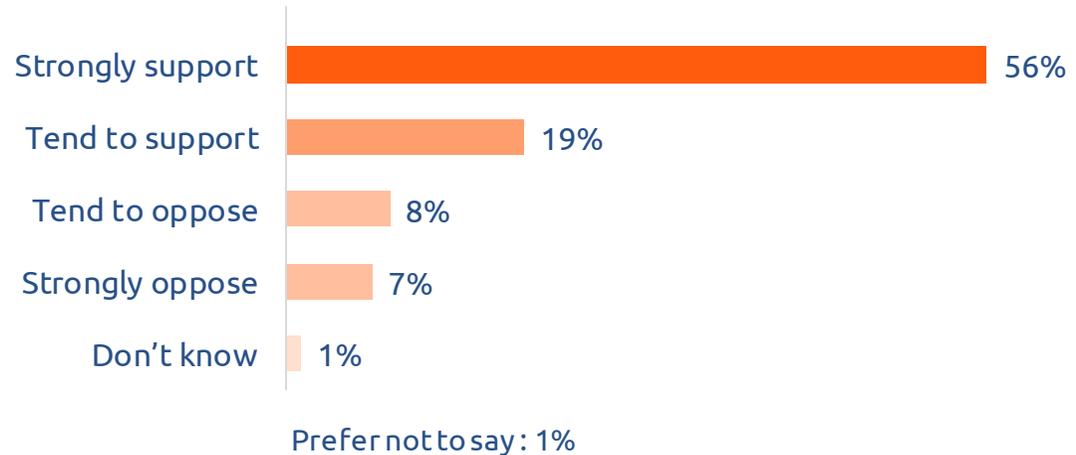


To what extent do you support or oppose the removal of the defence of reasonable punishment of children in Wales (i.e. any physical punishment being illegal)?

General population weighted data



Parents of children aged under 18 years unweighted data



To what extent do you agree or disagree with the following statements?

General population
weighted data

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Prefer not to say
Most parents in Wales do not use physical punishment towards their children	7%	33%	38%	13%	2%	6%
It is sometimes necessary to physically punish a child	5%	18%	17%	23%	34%	2%
Physically punishing children does more harm than good	30%	30%	20%	13%	5%	1%
No one has the right to tell a parent how to discipline their child	6%	18%	24%	35%	15%	1%
If I saw someone I knew smacking a child, I would do something about it (e.g. say something to them)	12%	30%	30%	17%	5%	5%
If I saw a stranger smacking a child, I would do something about it	16%	31%	28%	16%	5%	4%
Knowing physical punishment is illegal in Wales makes me more confident to do something if I saw a child being physically punished by an adult	14%	31%	26%	17%	7%	4%

To what extent do you agree or disagree with the following statements?

Parents of children aged under 18 years

unweighted data

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Prefer not to say
Most parents in Wales do not use physical punishment towards their children	8%	43%	30%	13%	3%	3%
It is sometimes necessary to physically punish a child	2%	8%	11%	25%	52%	2%
Physically punishing children does more harm than good	46%	32%	12%	6%	3%	2%
No one has the right to tell a parent how to discipline their child	5%	17%	22%	38%	16%	2%
If I saw someone I knew smacking a child, I would do something about it (e.g. say something to them)	16%	39%	28%	11%	2%	4%
If I saw a stranger smacking a child, I would do something about it	15%	34%	29%	15%	3%	4%
Knowing physical punishment is illegal in Wales makes me more confident to do something if I saw a child being physically punished by an adult	15%	36%	24%	18%	4%	3%



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Mental well-being

This section asked about participants' mental well-being. Mental well-being relates to how we think, feel and act. We experience good mental well-being when we are "feeling good and functioning well". These questions have previously been asked in our January 2023 and June 2023 surveys.

For each of the following statements, please answer on a scale of 0 to 10, where 0 is “strongly disagree”, 5 is “neither agree nor disagree”, and 10 is “strongly agree”.

General population
weighted data

	Strongly disagree				Neither agree nor disagree				Strongly agree			
	0	1	2	3	4	5	6	7	8	9	10	
I am confident I understand what the term mental well-being means	1%	<1%	<1%	<1%	1%	4%	5%	8%	16%	18%	48%	
I think it is important people take action to protect and improve their mental well-being	1%	<1%	<1%	0%	<1%	3%	5%	9%	17%	11%	52%	
I know what actions I can take to protect and improve my mental well-being	1%	<1%	1%	2%	3%	9%	9%	15%	22%	12%	26%	
I am able to find time to do the things that matter for my mental well-being	2%	3%	3%	4%	9%	11%	11%	14%	14%	8%	21%	

Prefer not to say for all statements: ≤1%

For each of the following statements, please answer on a scale of 0 to 10, where 0 is “strongly disagree”, 5 is “neither agree nor disagree”, and 10 is “strongly agree”.

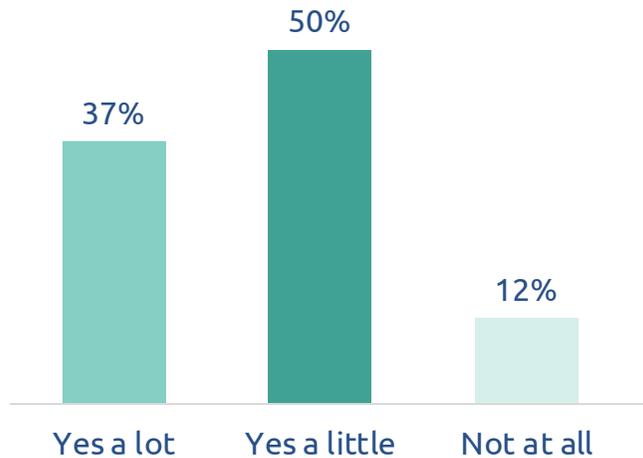
Parents of children aged under 18 years
unweighted data

	Strongly disagree				Neither agree nor disagree				Strongly agree			
	0	1	2	3	4	5	6	7	8	9	10	
I am confident I understand what the term mental well-being means	0%	<1%	<1%	<1%	0%	3%	2%	6%	16%	16%	56%	
I think it is important people take action to protect and improve their mental well-being	0%	0%	0%	<1%	<1%	2%	3%	6%	14%	13%	62%	
I know what actions I can take to protect and improve my mental well-being	1%	<1%	1%	1%	2%	7%	9%	16%	24%	12%	28%	
I am able to find time to do the things that matter for my mental well-being	5%	4%	8%	8%	13%	11%	13%	14%	11%	4%	9%	

Prefer not to say for all statements: <1%

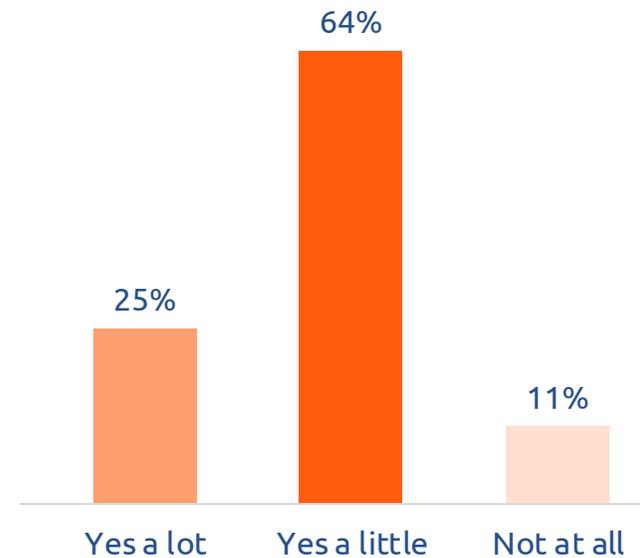
Do you currently take any action to help protect and improve your mental well-being?

General population
weighted data



Prefer not to say: 1%

Parents of children aged under 18 years
unweighted data



Prefer not to say: <1%

For each statement, please select the option that best describes your experience over the last 2 weeks.

General population
weighted data

	None of the time	Rarely	Some of the time	Often	All of the time
I've been feeling optimistic about the future	6%	19%	39%	28%	9%
I've been feeling useful	4%	13%	33%	35%	14%
I've been feeling relaxed	7%	19%	37%	28%	9%
I've been dealing with problems well	2%	8%	36%	40%	15%
I've been thinking clearly	1%	8%	29%	38%	23%
I've been feeling close to other people	5%	14%	30%	34%	18%
I've been able to make up my own mind about things	1%	6%	20%	36%	38%

Prefer not to say for all statements: <1%

For each statement, please select the option that best describes your experience over the last 2 weeks.

Parents of children aged under 18 years
unweighted data

	None of the time	Rarely	Some of the time	Often	All of the time
I've been feeling optimistic about the future	4%	14%	36%	36%	10%
I've been feeling useful	2%	10%	30%	42%	16%
I've been feeling relaxed	6%	32%	42%	17%	3%
I've been dealing with problems well	2%	8%	40%	42%	9%
I've been thinking clearly	1%	8%	33%	43%	15%
I've been feeling close to other people	2%	13%	29%	37%	19%
I've been able to make up my own mind about things	1%	5%	21%	40%	33%

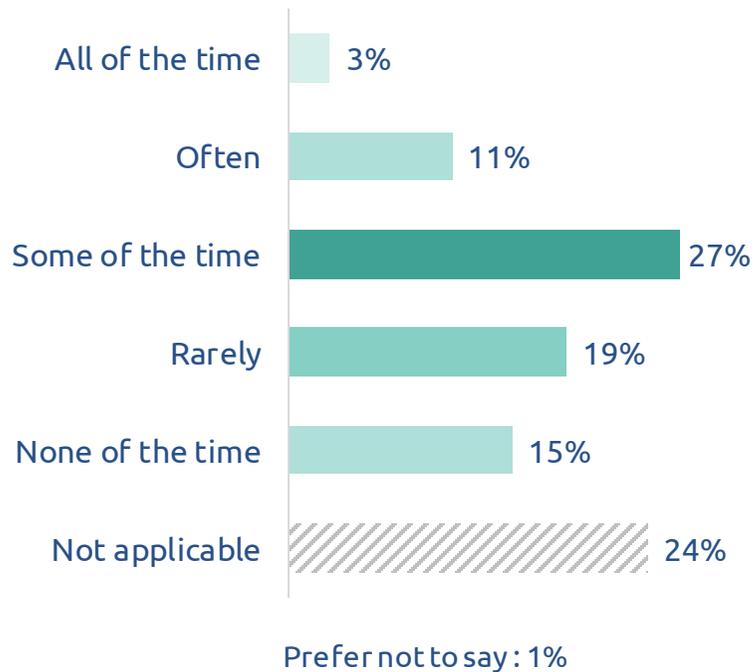
Prefer not to say for all statements: <1%

Technology use with family and friends

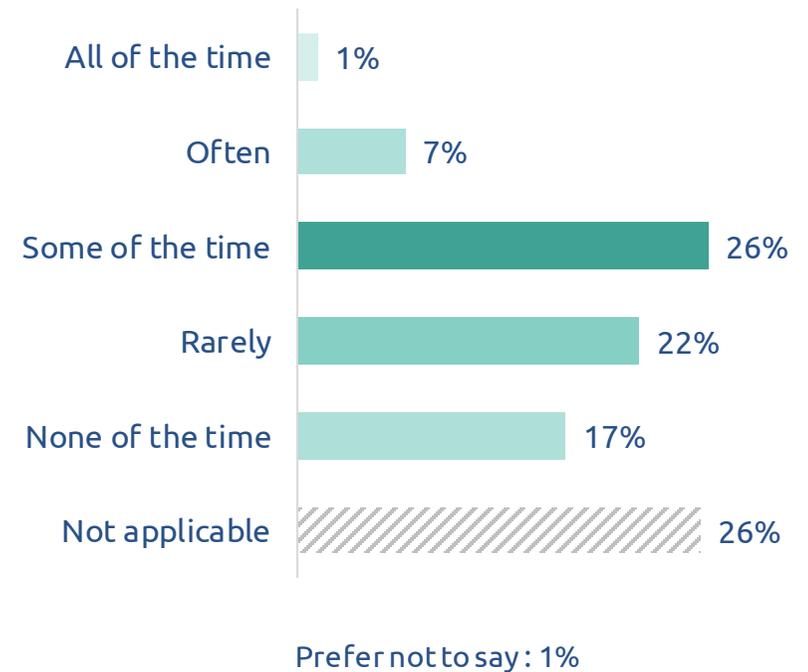
This section focused on understanding views on technology use. By technology we mean devices like mobile phones, computers, and tablets.

How often, if at all, would you say your partner's technology use has a negative impact on your relationship with them?

General population
weighted data

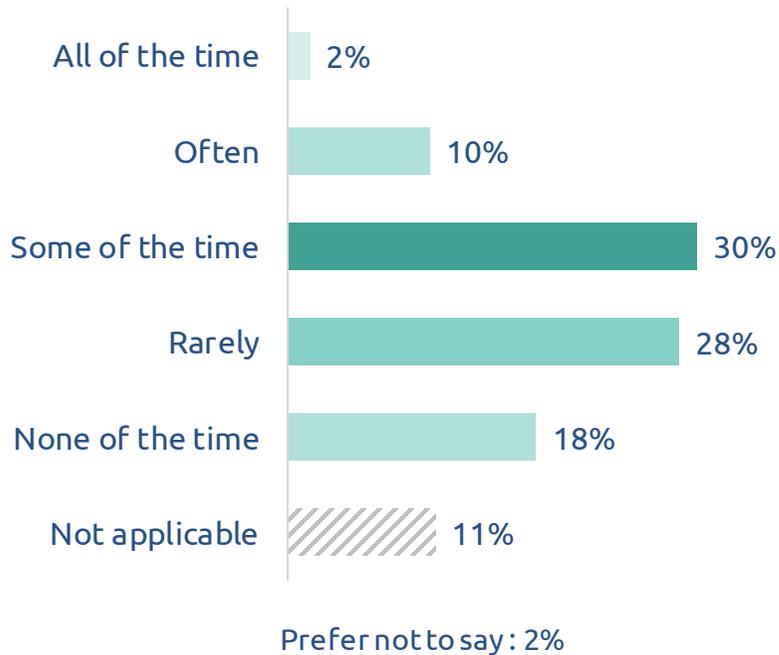


How often, if at all, would you say your technology use has a negative impact on your relationship with your partner?

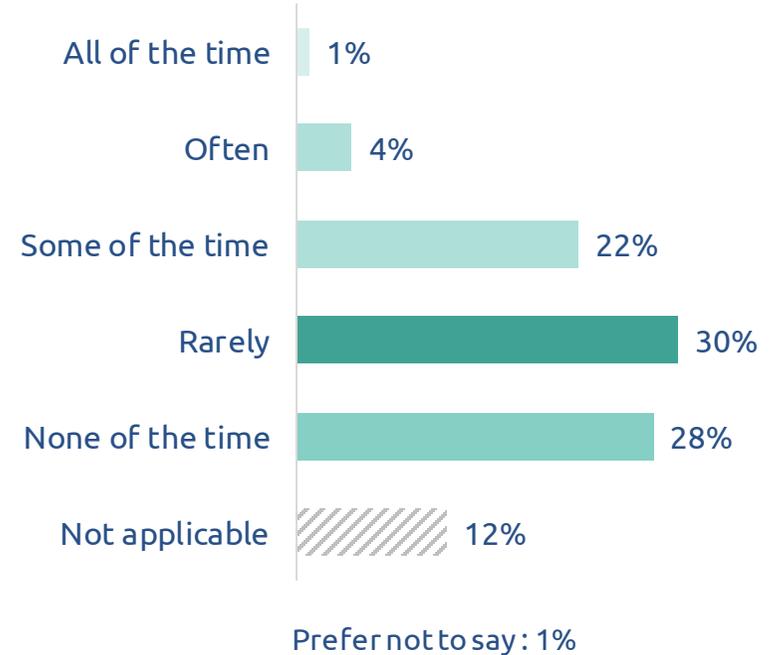


How often, if at all, would you say your other family members technology use has a negative impact on your relationship with them?

General population
weighted data

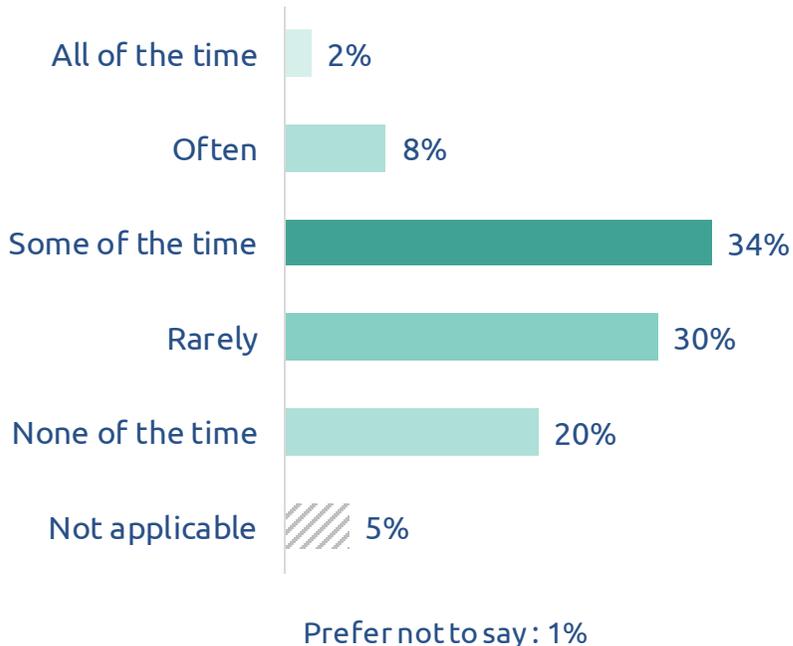


How often, if at all, would you say your technology use has a negative impact on your relationship with your other family members?

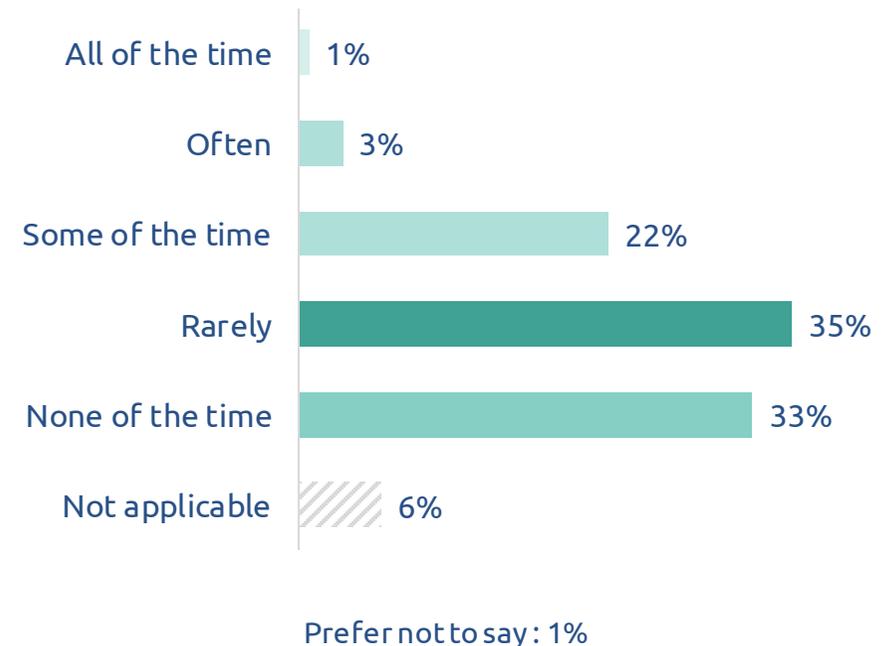


How often, if at all, would you say your friends' technology use has a negative impact on your relationship with them?

General population
weighted data



How often, if at all, would you say your technology use has a negative impact on your relationship with your friends?



To what extent do you agree or disagree with the following statements?

During the time I spend with my child/children...

Parents of children aged under 18 years

unweighted data

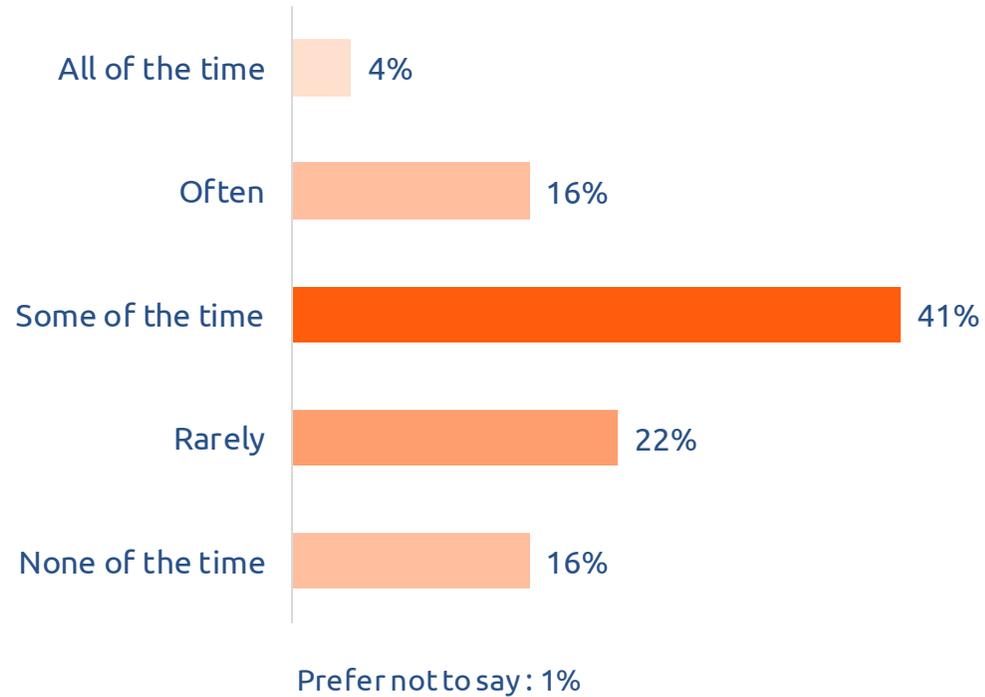
	Strongly agree	Agree	Somewhat agree	Somewhat disagree	Disagree	Strongly disagree
I find myself thinking about what I could be doing on my phone or mobile device, or messages / notifications I might receive	7%	14%	26%	17%	26%	10%
I find it difficult to stay away from checking my phone or mobile device	15%	19%	33%	12%	15%	6%
I feel like I use my phone or mobile device too much	21%	25%	31%	8%	12%	3%
There are times I could play or interact with my child, but I am on my phone or mobile device instead	7%	21%	32%	13%	19%	7%
I actively try not to use my phone or mobile device when I am doing something with my child(ren) (n=708; see note)	23%	42%	25%	5%	4%	1%

Not applicable – I do not have a mobile phone: <1%
Prefer not to say for all statements: ≤1%

Note: This question was changed after the initial stage of fieldwork based on feedback, so was not completed by nine parents.

How often, if at all, would you say your children's technology use has a negative impact on your relationship with them?

Parents of children aged under 18 years
unweighted data



Amser i Siarad Iechyd Cyhoeddus *Cymru*

Time to Talk Public Health *Wales*

Want to be involved in the Panel?

Recruitment to the Time to Talk Public Health Panel is continuous as we want to speak with a broad range of individuals across Wales.

If you live in Wales and are aged 16+ years, this is your opportunity to be heard.

 [TalkPHWales.com](https://www.talkphwales.com)

 01663 761976

 TalkPHWales@wales.nhs.uk

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panel

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the panel
work?

Have
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What is
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Public Health Wales works to protect and improve health and well-being and reduce health inequalities for the people of Wales.



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Questionnaire Development

The questions used in the February survey were developed in partnership with colleagues in Public Health Wales and Welsh Government.

Amser i Siarad
Iechyd Cyhoeddus
Cymru

Time to Talk
Public Health
Wales

Appendix

Sample demographics

Methods

		Population (16+ years)	Overall panel sample N = 3,074		TPH General population sample N = 1,261		Parents of children <18 years N = 717	
Gender	Male	49%	809	26%	387	31%	132	18%
	Female	51%	2214	72%	851	67%	580	81%
	Other	-	51	2%	23	2%	5	1%
Age group (years)	16-29	21%	485	16%	172	14%	66	9%
	30-49	29%	1299	42%	373	30%	558	78%
	50-69	31%	950	31%	505	40%	90	13%
	70+	19%	340	11%	211	17%	3	<1%
Deprivation quintile	1 (Most)	19%	499	16%	187	15%	121	17%
	2	20%	613	20%	241	19%	145	20%
	3	21%	614	20%	281	22%	134	19%
	4	21%	634	21%	260	21%	139	19%
	5 (Least)	20%	714	23%	292	23%	178	25%

Note. Population data from [the ONS Estimates of the population for the UK, England and Wales, Scotland and Northern Ireland \(Mid 2020\)](#) (opens in new window); Deprivation quintile data from [the Welsh Index of Multiple Deprivation \(2019\)](#) (opens in new window).

In order to enable recruitment of the parent boost sample, quota limits for demographic groups that are usually filled early in the data collection period (e.g. females, 30-69 year olds) remained open for the duration of data collection. This resulted in greater numbers of individuals in these demographic groups completing the survey, and thus slightly higher proportions across the general population sample. However, the number of people in other demographic groups who participated in the February survey is consistent with previous surveys. Due to lack of participation in four consecutive surveys, 304 people were removed from the panel. This process was outlined to panel members in the joining material.

		Population (16+ years)	Overall panel sample N = 3,074		TTPH General population sample N = 1,261		Parents of children <18 years N = 717	
Ethnicity	White	95%	2918	95%	1214	96%	690	96%
	Mixed/Multiple Ethnic Groups	1%	63	2%	23	2%	11	2%
	Asian, Asian Welsh or Asian British	2%	43	1%	11	1%	9	1%
	Black, African, Caribbean, Black Welsh or Black British	1%	21	1%	2	<1%	2	<1%
	Other Ethnic Group	1%	20	1%	8	1%	5	1%
	Prefer not to say	-	9	<1%	3	<1%	0	0%
Health Board	Aneurin Bevan UHB	19%	546	18%	234	19%	137	19%
	Betsi Cadwaladr UHB	22%	623	20%	268	21%	131	18%
	Cardiff and Vale UHB	16%	591	19%	197	16%	160	22%
	Cwm Taf Morgannwg UHB	14%	383	12%	163	13%	87	12%
	Hywel Dda University HB	12%	426	14%	194	15%	94	13%
	Powys Teaching HB	4%	142	5%	60	5%	26	4%
	Swansea Bay UHB	12%	363	12%	145	11%	82	11%

Note. [Population estimates by ethnicity](#) (opens in new window) retrieved from Stats Wales are for all ages due to data not being available for non-White residents aged 65+ years. [Population estimates by local health boards](#) (opens in new window) retrieved from Stats Wales. UHB: University Health Board; HB: Health Board.

- An initial target of 2,500 panel members was set in order to obtain a monthly survey sample of approximately 1,000 responses, with response rates to alternate month surveys estimated to be a maximum of 50%.
- To reach a range of individuals, three methods of recruitment were used:
 - Telephone
 - Social media
 - Face-to-face
- A professional market research company (DJS Research Limited) was procured to undertake recruitment and alternate month surveys.
- Telephone and face-to-face recruitment used stratified quota sampling. Quotas applied to:
 - Geography (Health Board)
 - Age
 - Sex
 - Deprivation quintile (WMD*)
- Social media targeting focused on demographic gaps in recruitment.
- Panel members completed an initial recruitment survey and are asked to complete a 15–20-minute survey every other month. Alternate month surveys are undertaken online or by telephone, depending on participants' preference.

*Welsh Index of Multiple Deprivation.

Further methodological detail is available in the [project protocol](#).

- For each survey, all panel members are invited to complete the questionnaire through their method of choice (telephone or online). Panel members have three weeks to complete the survey. Within that timeframe, gaps in the demographic profile required to achieve a sample representative of the age, gender, ethnicity and deprivation profile of Wales are identified, and reminders to complete the survey are sent.
- To increase representation across the survey sample, around 100 face-to-face interviews are undertaken per survey wave with targeted population groups. These individuals are invited to complete the survey and are then invited to join the panel. Thus, a proportion are one-off survey participants. In addition, social media advertising targeting specific population groups is conducted. These individuals provide demographic information and are then invited to complete the live survey. For the February survey, targeted programmatic advertising (e.g. in online games, websites) were also used groups to increase representation.
- Due to the focus of the survey, a parent boost sample was also recruited using social media advertising, telephone and face-to-face methods.

Participants (N = 1,715) who completed the February survey, were recruited via the following methods:

Recruitment Method	n	%
Online	1142	67%
Telephone	332	19%
Face-to-face (panel)	126	7%
Face-to-face (one-off)	115	7%

Participants (N = 1,715) who completed the February survey, completed via the following methods:

Participation Method	n	%
Online	1363	79%
Telephone	148	9%
Face-to-face	204	12%