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This report may be of interest to those working in public health, policy officials, commissioners of health and social care services and to the public to see the changes over time in the prevalence of obesity, some health conditions and health related behaviours like smoking and drinking alcohol.

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# Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Background</td>
<td>4</td>
</tr>
<tr>
<td>Data Collection and Burden</td>
<td>4</td>
</tr>
<tr>
<td>Timeliness</td>
<td>4</td>
</tr>
<tr>
<td>Accessibility</td>
<td>4</td>
</tr>
<tr>
<td>Confidentiality</td>
<td>4</td>
</tr>
<tr>
<td>Comparability</td>
<td>4</td>
</tr>
<tr>
<td>Accuracy</td>
<td>5</td>
</tr>
<tr>
<td>Users and Uses of the Statistics</td>
<td>5</td>
</tr>
<tr>
<td>Strengths and Limitations of the Statistics</td>
<td>6</td>
</tr>
</tbody>
</table>
Background
This survey is part of a series of annual surveys designed to measure health and health related behaviours in adults and children in England. It provides information that cannot be obtained from other sources on a range of aspects concerning the public’s health and many of the factors that affect health. The series of Health Surveys for England monitor trends in the nation’s health, and estimate the proportion of people in England who have specified health conditions, and estimate the prevalence of certain risk factors and combinations of risk factors associated with these conditions.

Each survey in the series includes core questions and measurements (such as blood pressure, height and weight and analysis of blood and saliva samples), as well as modules of questions on specific topics that vary from year to year. Some additional topic modules are repeated over the years and there is also scope to incorporate topics into the questionnaire for just one survey year.

Data Collection and Burden
Data for the Health Survey for England (HSE) 2014 were collected from the population living in private households in England.

As with all previous years the HSE 2014 involved a stratified random probability sample of households. Adults and children were interviewed at households identified at the selected addresses. Where there were three or more children in a household, two of the children were selected at random to limit the respondent burden for parents. The achieved sample for the 2014 survey was 8,077 adults (aged 16 and over) and 2,003 children (aged 0-15). 5,491 adults and 1,249 children had a nurse visit.

Timeliness
A report about the survey findings and trend data tables with commentary are published annually. Core elements are included every year and other topics in selected years.

Accessibility
The report is published online and is available free of charge alongside the Excel tables. An anonymised version of the survey dataset will be made available for analysis within 3 months of publication via the UK Data Service website at http://ukdataservice.ac.uk/.

Confidentiality
No personal/individual level information is received by the Health and Social Care Information Centre or contained in the report. Information is presented at a high level of aggregation.

Comparability
There have been over twenty annual surveys in the series. Since 1995, the surveys have included children who live in households selected for the survey; children aged 2-15 were included from 1995, and infants under two years old were added in 2001.

The data are weighted relative to the size of each group of the population making the results comparable over the time series. Chapter 7 in Volume 2 of the survey report gives further details on the weighting procedures used.
The core topics covered by the survey include; general health, fruit and vegetable consumption, height and weight, alcohol consumption and smoking. The trend tables present data for key measures for the years in which they were collected to make comparisons over time more accessible. The number of years of data available varies: from a few years for newer topics to others, such as general health, smoking status, height, weight and body mass index, for which data were first collected in 1993 or 1995.

**Accuracy**

As the data are based on a sample (rather than a census) of the population, the estimates are subject to sampling error. The HSE 2014 used a clustered, stratified multi-stage sample design and in addition, weights were applied when obtaining survey estimates. One of the effects of using the complex design and weighting is that standard errors for survey estimates are generally higher than the standard errors that would be derived from an unweighted simple random sample of the same size. The calculation of standard errors shown in the tables, and comments on statistical significance have been included in the report, all of which have taken into account the clustering, stratification and weighting of the data.

Details of the sample design, response rates, survey methods and sampling errors and design effects are in Volume 2: Methods and documentation of the survey report.

The scope for analyses of some data for children may be limited by relatively small sample sizes.

**Users and Uses of the Statistics**

From our engagement with customers, we know that there are many users of these statistics. They are used by the Department of Health, Public Health England, Local Government, NHS, charities, academics, the public and the media. Uses of the data include: informing and monitoring and evaluating policy; monitoring the prevalence of health or illness and changes in health or health related behaviours; comparing local indicators with national figures; informing the planning of services; and writing media articles. Universities, charities and the commercial sector use the data for health and social research. The survey data are also used for teaching purposes and by students in their work. The Media use the data to underpin articles in newspapers, journals etc.

We try to engage with users of these statistics to gain a better understanding of the uses and users and to ensure these statistics remain relevant and useful. The most recent consultation with users about the HSE was in 2013 and a report on the findings is available on the HSCIC website at [http://www.hscic.gov.uk/article/3659/Health-Survey-for-England](http://www.hscic.gov.uk/article/3659/Health-Survey-for-England).

We also receive comments, feedback and suggestions from other users of the report, as ad-hoc requests via email or by completing the on-line feedback form on our website 'haveyoursay'. This form includes the following questions:

- Title of publication
- How useful did you find the content in this publication?
- How did you find out about this publication?
- What did you use the report for? What was most useful?
- Were you happy with the data quality?
- What changes would you like to see?
- What type of organisation do you work for?
We received over 60 enquiries about HSE data in the past year. We also capture information on the number of unique page views the reports and trend tables receive and this survey is one of our most frequently viewed publications. In the year since their publication there were 21,062 unique page views for the 2013 Health Survey for England report and trend tables combined and 20,854 downloads of the documents or tables they contain. In the same time period there were also 9861 downloads of content from the 2012 Health Survey for England report and trend tables web pages.

**Strengths and Limitations of the Statistics**

The Health Survey for England has many strengths; the longevity of the survey means there is a long time series of comparable data available. It is one of the longest running health surveys across Europe. As well as the core questions asked each year, some of the additional topics, such as cardiovascular disease, hypertension and diabetes are also comparable over time as the questions are repeated every few years.

The HSE report is a National Statistics publication. National Statistics are produced to high professional standards, as set out in the Code of Practice for Official Statistics. The HSE was assessed in 2010 by the United Kingdom Statistical Authority (UKSA) for compliance with the Code of Practice and the publication was recommended for continued designation as National Statistics.

The survey covers the population living in private households in England. Those living in institutions are outside the scope of the survey. This should be borne in mind when considering survey findings, since the institutional population is different, (and much smaller), and is likely to include older and less healthy people than those living in private households.

There are certain limitations to how the HSE data can be used. The data are subject to inaccuracies which sampling may introduce (see the ‘Accuracy’ section of this document). The sample size also means the data are not available at Local Authority level. The scope for analyses of some data for children may be limited by relatively small sample sizes.

Although there are a lot of data available at England level, differences in survey methodology and questionnaire design between this survey and health surveys carried out in other countries may sometimes limit comparisons across countries. Users are advised to check these details when using information from different sources for countries within the United Kingdom and Europe as well as for non-European countries.