



Ambitious Ambivalent

Ambitious Ambivalent



18% of 30-74 yr olds
in the sample

Ambitious Ambivalent have a lot going on and health is not a priority. Their focus is on developing themselves and other aspects of their lives. They have lower than average interest in the NHS Health Check, ranked 6th amongst the segments. They tend to be under 50, male, working full time and have young children at home or live alone. They are not all convinced you can do things to prevent serious illness and are very focused on the here and now.

"I decided to focus on myself...progressing at work. I want to go up the ladder... over the last year I've been really busy" (qual participant)

Ambitious Ambivalent characteristics:

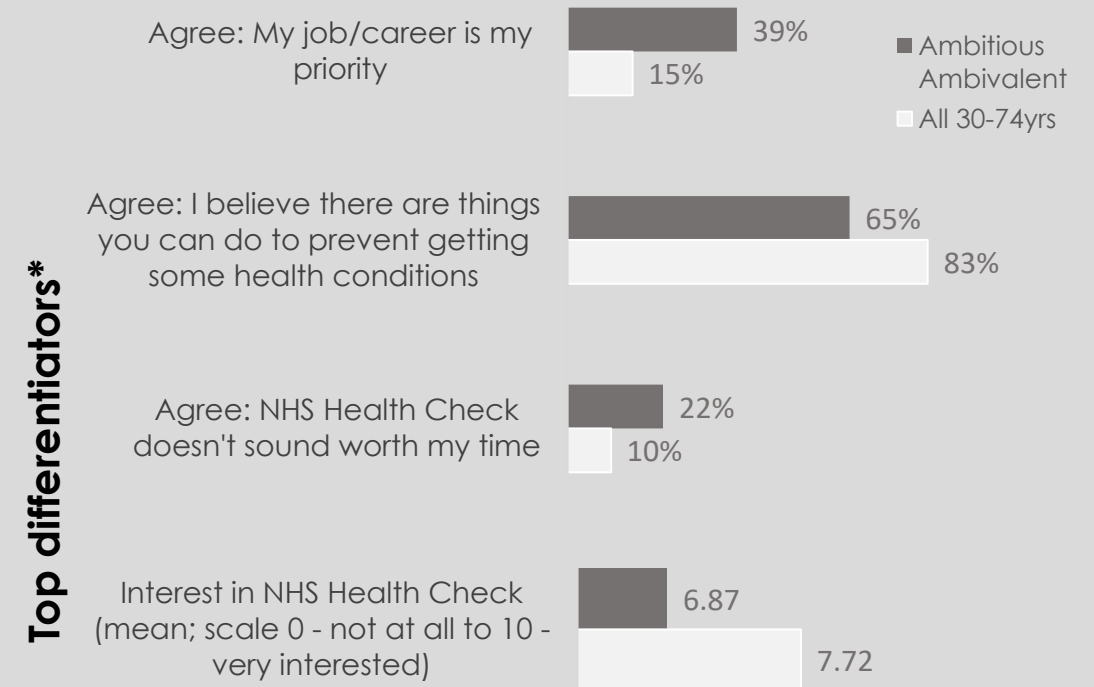
My **life is very full, I have a lot going on.**

I **don't give my health any thought.**

For me **health is all about feeling good** about myself and being fit. I'm not that convinced you have any real control over whether you develop an illness.

Life is really busy and there is **very little time spare** when I try to juggle work and family.

But it **might be good to know if there are hidden problems** and make sure I'm in a good place. Although I'd have to be open to it not being good news and I'm not sure I'm ready for that.



*largest observed difference in quantitative data between segment and all 30-74yrs in sample



This group are more likely than all 30-74 year olds in the sample to be under 50, male, working full time and have young children at home. They are more likely to be from Indian, Pakistani, Bangladeshi or Eastern European groups, and to not be digitally confident. They are from a range of socio-economic groups, but more likely in Social Grade D than all 30-74 year olds in the sample.

The characteristics listed are **more likely** in this segment than all 30-74 yr olds in sample

Gender	Male			
Age group	30-39	40-49		
Social Grade	C2D			
Household composition	Children <18yr	Live alone		
Employment status	Work full time			
Transport – typical week	Train, bus	Cycle		
Ethnicity	Indian	Pakistani	Bangladeshi	Eastern European
Digital confidence	Not very confident			
Location	Urban			
	London	West Midlands		
Health Conditions	None			

Areas **more** likely to be

Bristol
Buckinghamshire
Nottinghamshire
Cheshire
West Midlands
County Durham
E. Riding Yorkshire
South Yorkshire
Essex
Oxfordshire
London boroughs of – Lewisham;
Hounslow; Lambeth; Harrow

Areas **less** likely to be

Greater Manchester
Hampshire
Berkshire
Cornwall



DEFINING ATTITUDES - LIFE

My job/career is my priority
My main concern at the moment is money
Personal development is a key focus for me
I don't have enough time in the day to get everything done

DEFINING ATTITUDES – HEALTH

I can afford to put my health to one side to get ahead in life
If there is something wrong with me but I feel fine, I'd rather not know
I've got more immediate priorities than potential future health problems

CVD RISK FACTORS

1 in 7 have at least 2 CVD risk factors*

ENABLERS TO HEALTHIER CHOICES

- Want to feel good about themselves, as well as staying fit and fitting in clothes
- Look to stay healthy in case they get ill, to not be a burden on NHS
- Can engage with idea of link with family history and knowing about 'hidden' problems

BARRIERS TO HEALTHIER CHOICES

- Don't think much about their health, tend not to have anyone close with a serious condition – they are happy for it to remain in the background
- Have limited time available and some have stretched finances
- Don't necessarily believe there are things you can do to prevent illness
- Are focused on now, not the future – lack motivation of future benefit

DEMOGRAPHICS *more likely than all 30-74 year olds in sample to be...*

- Male
- 30/40s
- Working full-time
- Children in household or live alone
- Urban
- Indian; Pakistani; Bangladeshi; Eastern European
- Not digitally confident
- No existing health conditions

NHS HEALTH CHECK – attitudes and preferences

- 34% are aware of the NHS Health Check (compared to 38% of all 30-74 year olds in the sample)
- They do not reject the idea of NHS Health Check but are not particularly engaged with it either; they struggle to see a need and they show some concern about being judged or learning something scary
- They are unsure there are things you can do to prevent CVD
- Delivery preference: open to delivery models outside of healthcare settings, particularly self-directed digital or in workplace/community as can work around their lives
- Communications preference: email, letter, text, phone call

Base: Ambitious Ambivalent (n=319) *National GP data on 9.5 million people who had been offered an NHS Health Check between 2012 and 2017 were used to identify the risk factor characteristics of the segments. The CVD risk factor information presented should only be seen as illustrating a representative individual in the segment, rather than describing the CVD risks of the whole segment.



Awareness

Delivery

Risk communication / brief intervention

Do

- Take steps to increase awareness using the [PR toolkit](#)
- Use gain framing focussed on the here and now to encourage attendance - the check as part of a positive routine to keep yourself fit, keep on top of your health to get on with life and feel good
- Use opportunistic invitations to encourage spontaneous participation and avoid over thinking
- If you are sending a written invitation then include a booked appointment
- Make use of community spaces to raise awareness both on and offline communities
- Use the national NHS Health Check [image library](#) and [marketing templates](#) with NHS branding and use peers, community and employers as messengers to normalise attending a check
- Key themes to encourage engagement:
 - Easy, quick - 20 minutes
 - Free
 - Straightforward
 - Small changes make a big difference

Don't

- Focus on future benefits or problems

Do

- Digital is of more interest to this group than other segments and there is a high potential to self-complete for those who are digitally confident
- As not all are confident online, also offer delivery in community settings and workplaces to ensure fits with their schedules – be mindful that this group will need checks to fit in around work

Don't

- Make booking or accessing an NHS Health Check feel difficult or onerous

Do

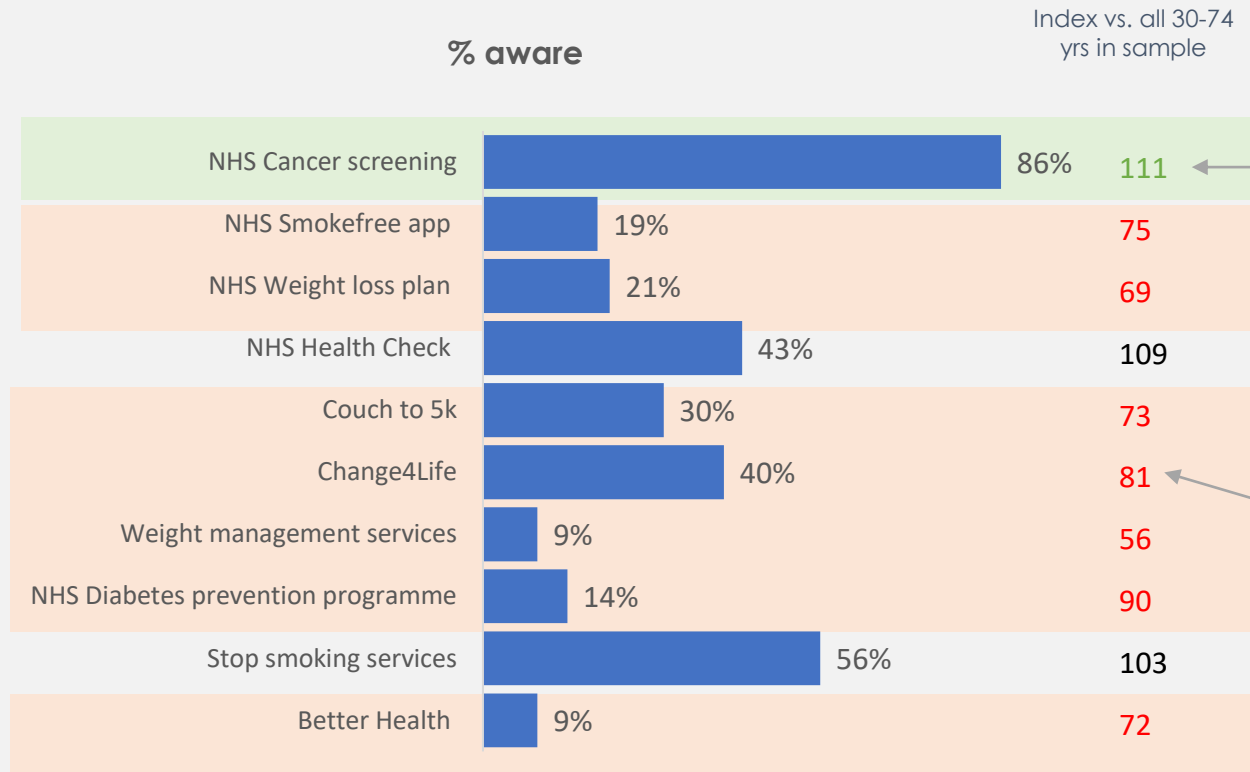
- Use behaviour change techniques such as motivational interviewing to:
 - Provide simple, bite sized advice
 - Communicate risk results within the context of feeling good about yourself today and mental wellbeing
 - Capitalise on their interest in CVD risk and what they can do about individual risk factors by offering personalised advice
 - Explore their context as it is likely they have significant time barriers: need to feel supported and focused on improving their wellbeing
 - Emphasise how healthier choices may help immediately

Don't

- Place too much emphasis on future benefits

Reading the data in the following slides

Data for the segment has been shown as percentage of the segment responding to the question, and as an **index** – which shows how the segment response differs from the average of all 30-74 year olds in the sample.



If the segment had the same likelihood to say they were aware as the average, their index would be 100.

The indexed awareness for this segment is 111, which means they are 11% more likely than the average to say they were aware of NHS Cancer screening

An index of **110 or more** is a statistically significant increase on the average and is denoted by green text in this document

The indexed awareness of Change4Life for this segment is 81, which means they are 19% less likely than average to be aware of the programme

An index of **90 or less** is a statistically significant decrease on the average and is denoted by red text in this document

A mixed method approach was used to develop this segmentation. This included qualitative group and depth interviews and an online survey. The participants were people aged 30-74 years old in England, without an existing diagnosis of cardiovascular disease. A total of 1750 respondents completed the survey. This total sample is referred to as **“all 30-74 year olds in sample”** in this document.

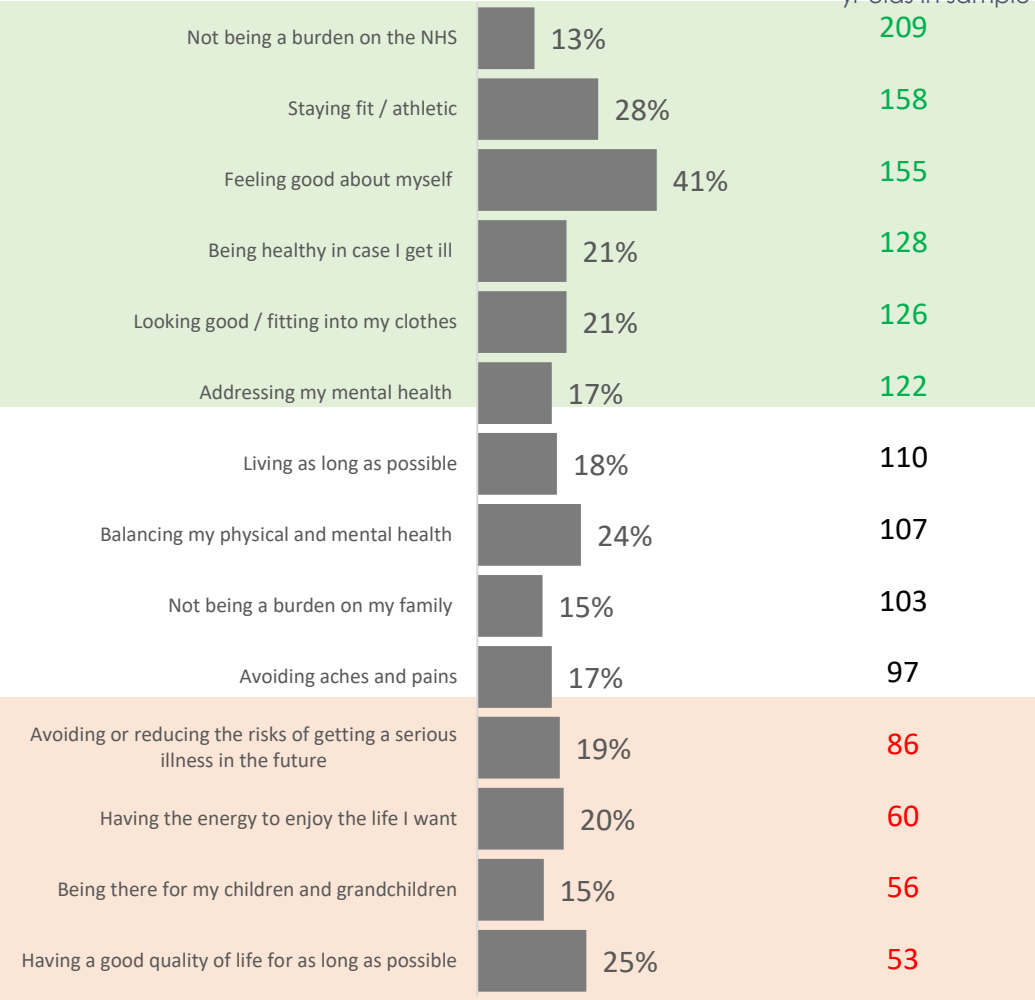


They are motivated by feeling good about themselves, along with staying fit and being healthy in case they get ill. However, time and money can get in the way, along with a perception that it is difficult to get support or advice.

Motivators to be in best possible health

Index vs. all 30-74
yr olds in sample

More likely than all 30-74yr
olds

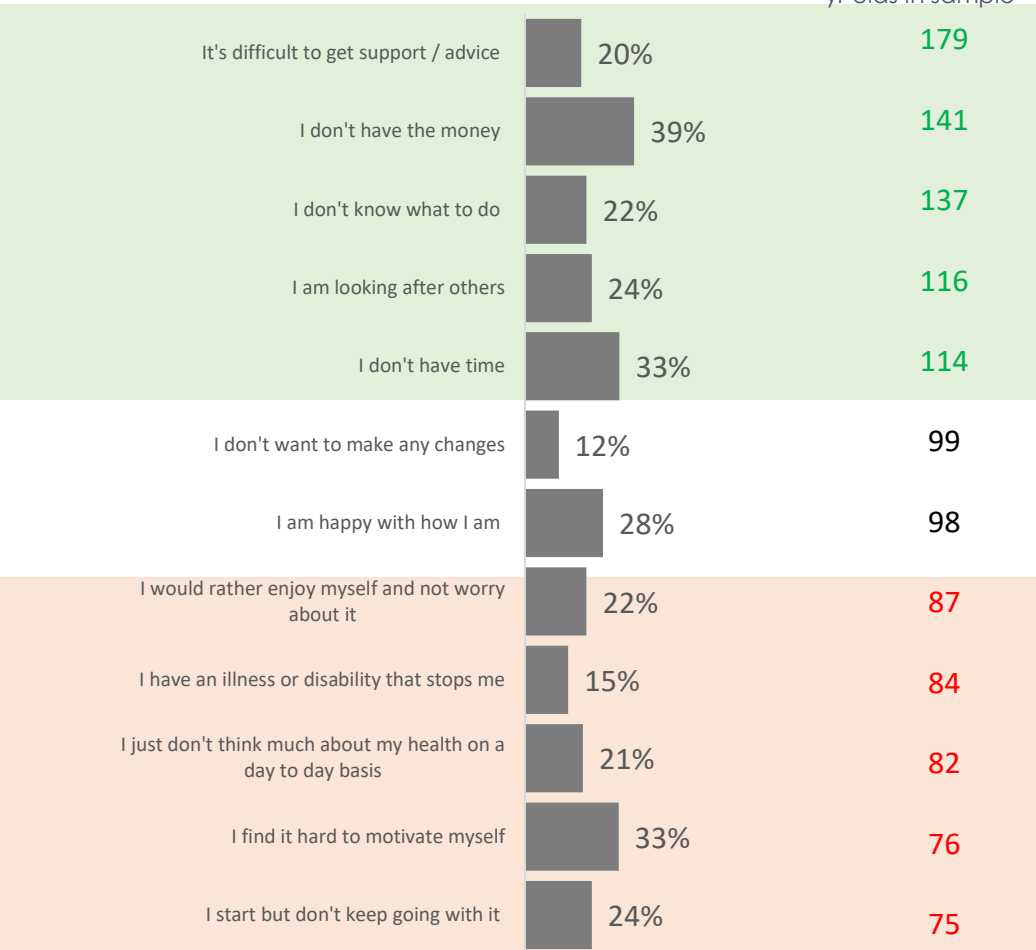


Less likely than all 30-74yr
olds

Barriers to be in best possible health

Index vs. all 30-74
yr olds in sample

More likely than all 30-74yr
olds



Less likely than all 30-74yr
olds

Key attitudes show that their focus is elsewhere – on their job/career, personal development and their finances. They would rather not know if something is wrong if they feel fine although they also say they need support to make healthier choices.

More likely than all 30-74yr olds

Key differentiators - <i>more likely to agree</i>		
	% agree	Index vs. all 30-74 yr olds in sample
I can afford to put my health to one side to get ahead in life	31%	292
My job/career is my priority	39%	256
If there is something wrong with me but I feel fine, I'd rather not know	41%	161
I've got more immediate priorities to think about than potential future health problems	45%	148
My main concern at the moment is money	56%	140
Personal development is a key focus for me	48%	137
If I feel fine, then I don't need to think about future health problems	41%	137
I struggle to make time for myself	41%	133
I tend to live in the moment and not think about the future	36%	126
I need support to help me make / keep up a healthy lifestyle	40%	120
I am happy with my weight	41%	120
I don't have enough time in the day to get everything done	45%	114

Bold indicates this segment are most likely of all segments to agree with this statement

A difference to other segments is that family is less likely to be their main priority. They are less likely than all 30-74 year olds in the sample to believe that there are things you can do to prevent health conditions, and to feel that they know what to do to prevent getting serious health conditions.

Less likely than all 30-74yr olds

Key differentiators - *less likely to agree*

	% agree	Index vs. all 30-74 yr olds in sample
Spending time with friends and family is really important to me	56%	71
I think it would be better to know if you are at risk of developing a serious illness	49%	76
I feel in control of my life	40%	77
I am very happy with my life how it is	34%	77
My family is my number one priority	62%	78
I believe there are things you can do to prevent getting some health conditions	65%	78
I am open to hearing advice on my lifestyle that would improve my health	54%	79
I know what I should do to prevent getting serious health conditions	47%	80
When I think about my health I tend to think about keeping well for the future	52%	82
Life is short, you have to just enjoy yourself	54%	83
I have tried to lose weight in the past but struggle to keep it off	32%	83
The idea of developing a serious illness really frightens me	49%	84
I want to lose some weight	52%	85
I believe that maintaining your weight is the way to keep healthy	58%	86
I find it hard to motivate myself to make changes to my lifestyle that would improve my health	38%	86
Taking care of my health and wellbeing is a priority	55%	88

They are more concerned than all 30-74 year olds about some CVD conditions – kidney disease, high blood pressure, high cholesterol and diabetes, but are not always aware of the link with CVD. They tend not to have friends or family who have been diagnosed with conditions.

More likely than all 30-74yr olds

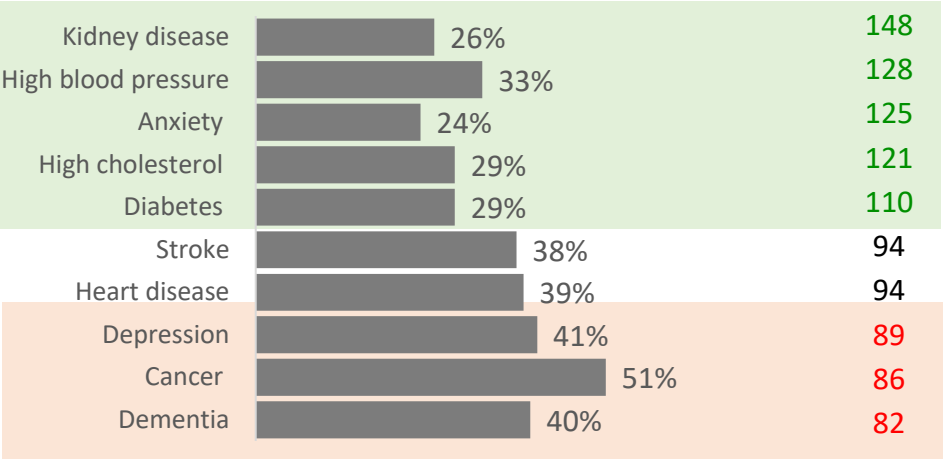
Less likely than all 30-74yr olds

More likely than all 30-74yr olds

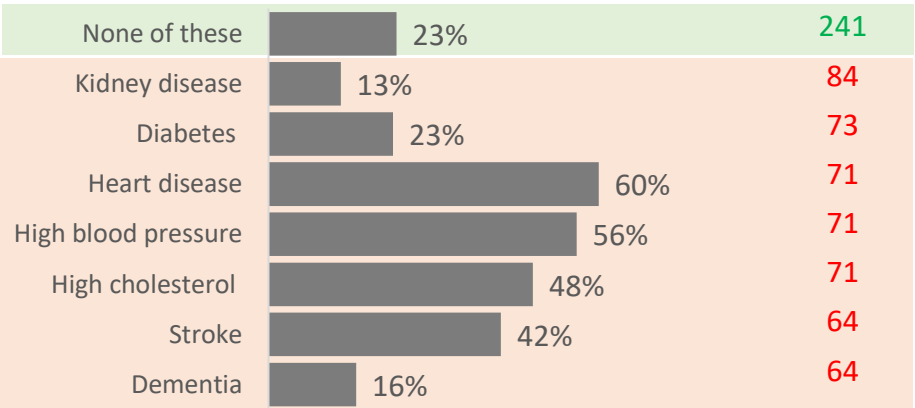
Less likely than all 30-74yr olds

% very concerned (rate 7-10*)

Index vs. all 30-74 yr olds in sample

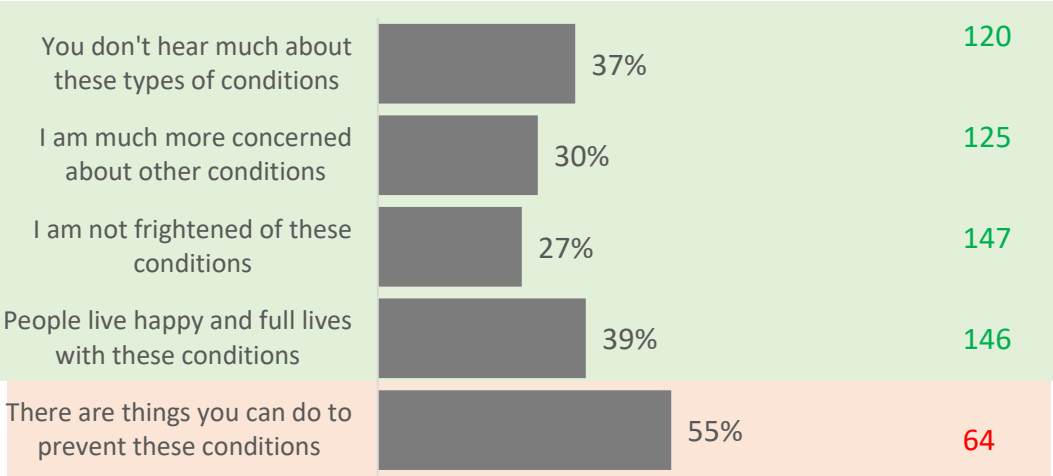


% aware link to CVD



Attitudes to CVD – % strongly agree/agree

Index vs. all 30-74 yr olds in sample



More likely than all 30-74yr olds

Less likely than all 30-74yr olds

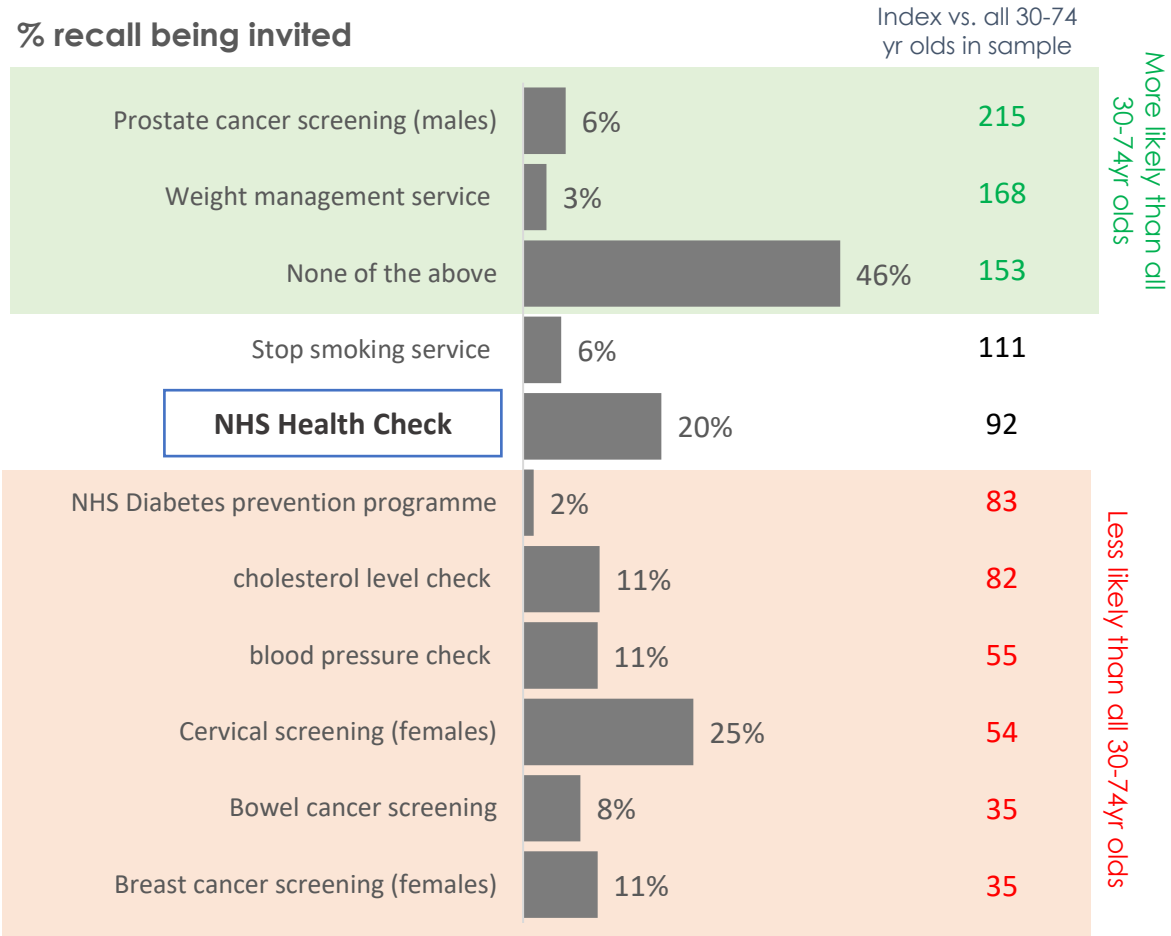
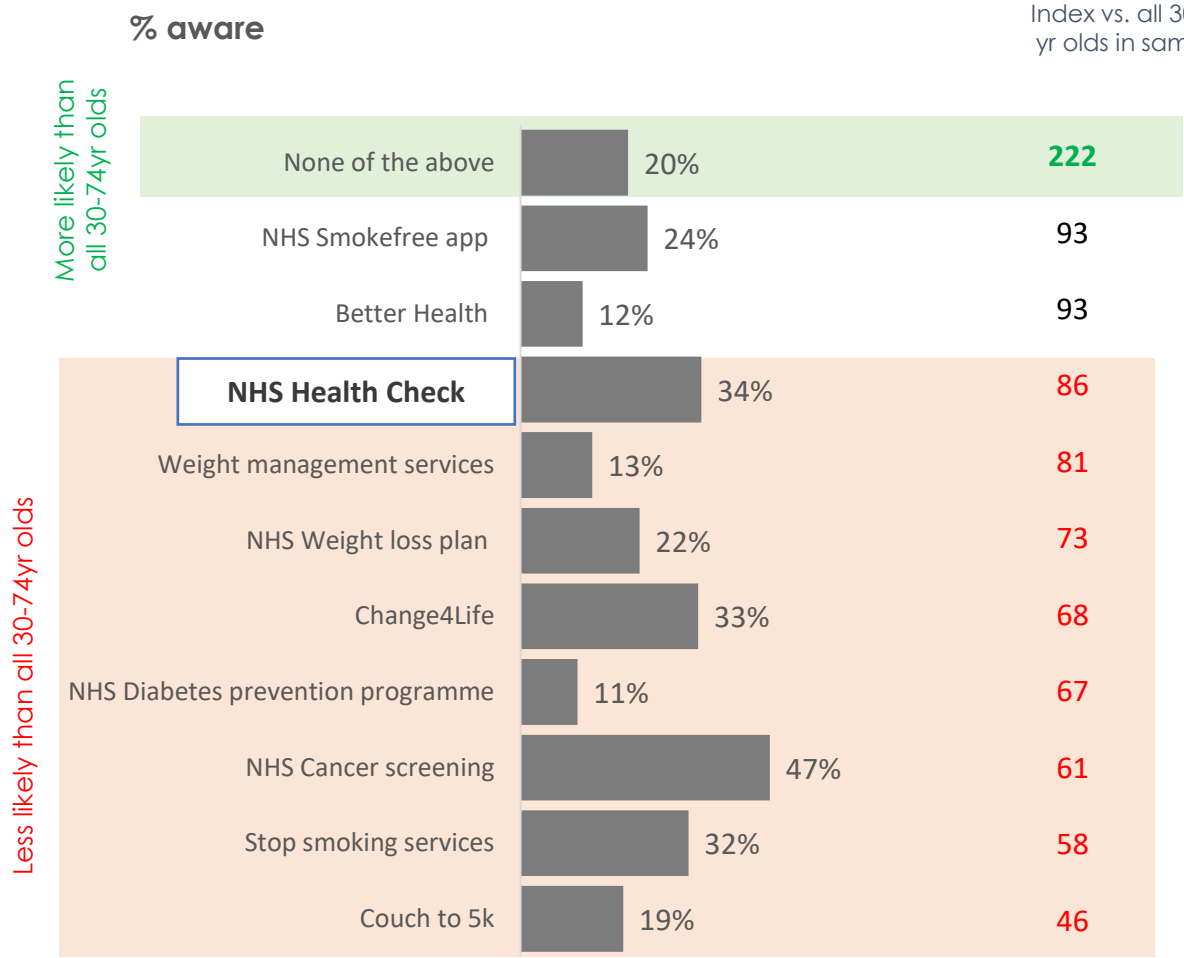
Friends diagnosed

None	40%	155
Depression	26%	72
Cancer	25%	60
High blood pressure	23%	69

Family diagnosed

None	30%	177
Cancer	32%	70
High blood pressure	25%	74
Diabetes	21%	71
Depression	20%	84
Heart disease	19%	75

They are less aware of preventative health services than all 30-74 year olds in the sample and almost half do not recall being invited to attend any listed. Although it should be considered that this segment over index on 30-39 year olds, who are not currently eligible for the NHS Health Check.

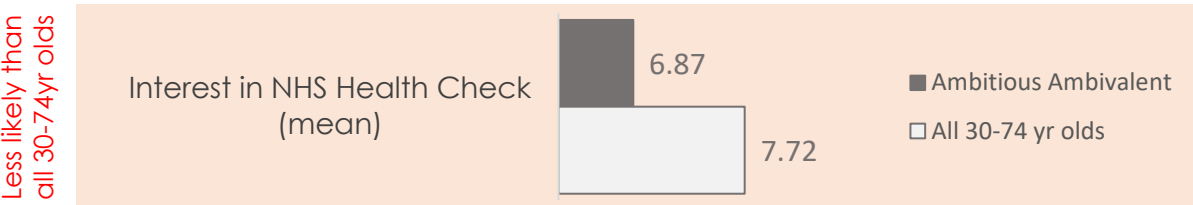


NHS Health Check: Of those invited 24% (92) attended

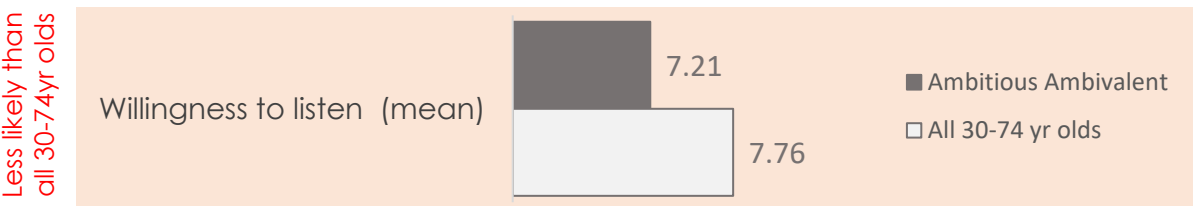


They do not reject the idea of the NHS Health Check but are not particularly engaged with it either. It needs to be low effort to engage them. There is the potential to frame the check as a 5 yearly routine. Highlighting that a check could help them find out about 'hidden health problems' may also engage this group.

Based on description, interest in NHS Health Check*



Willingness to listen to and act on any advice given*



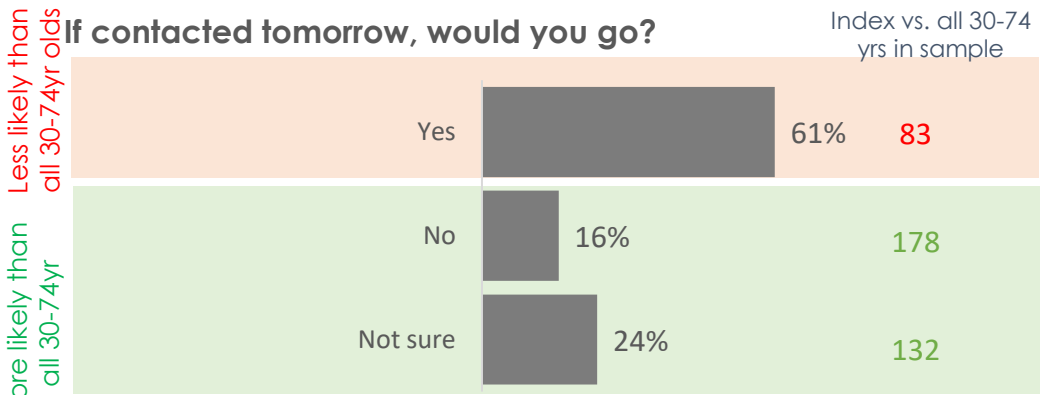
Qualitative findings on NHS Health Check

- Not particularly engaged with the idea as living their lives and not thinking much about health
- Can think 'why not?' if not too much effort
- Some engaged by potential for unearthing 'hidden health problems', to know what's going on inside
- More engaged if think of it as a regular health MOT

"I don't need someone telling me what I know already and some of the professionals can be judgemental and I'm not interested in talking to them if they are not offering me solutions and help"

"I'm not the slimmest woman and I know what they are going to say, weight you can visibly see, but the more internal things might be interesting to find out"

"Most people know if they are performing at their optimum... but it is hard to know the internal things..."



*scale 0 – Not at all interested to 10 – Very interested

**scale 0 – Would not listen to advice to 10 – Would listen to and act on advice



They struggle to see why they need an NHS Health Check as they feel ok. This is underpinned by not being sure there are things you can do to prevent CVD. Yet they also show some concern about being judged or learning something ‘scary’.

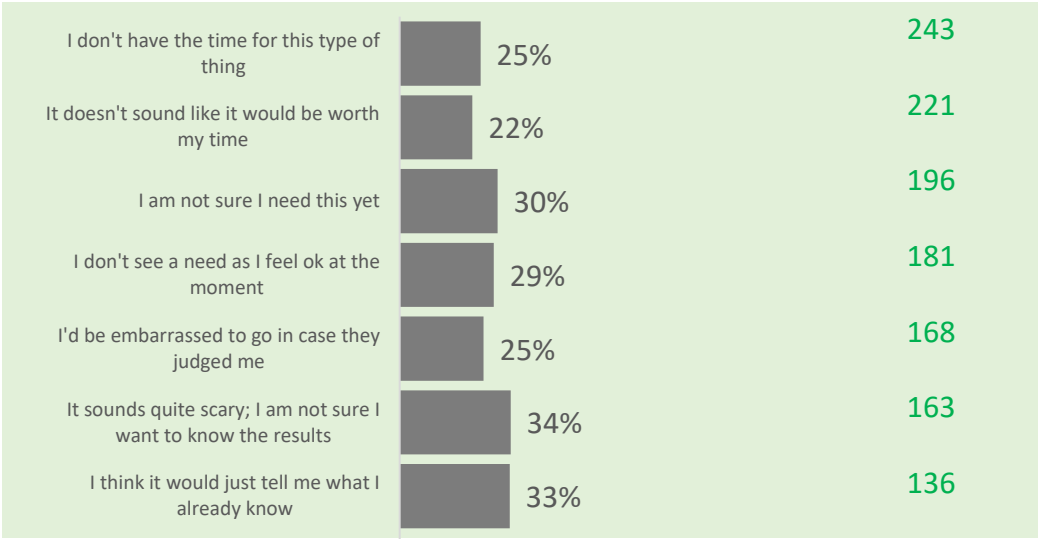
Attitudes to NHS Health Check

Index vs. all 30-74
yr olds in sample

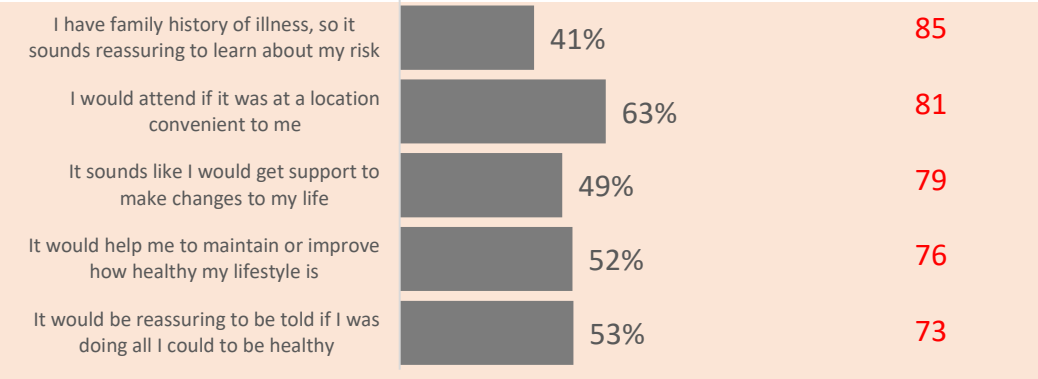
Attitudes to advice and support may receive

Index vs. all 30-74
yr olds in sample

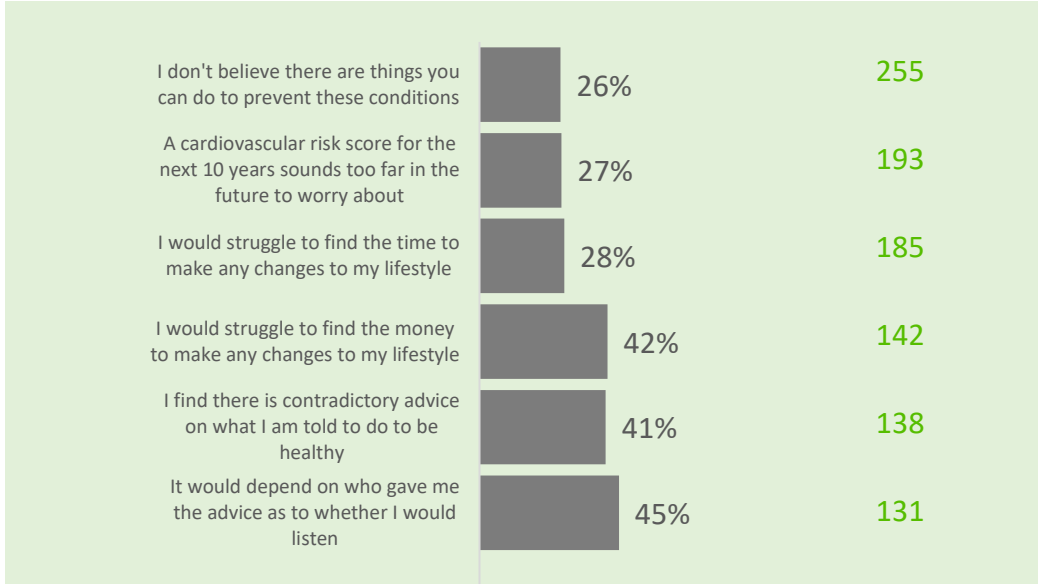
More likely than all 30-74yr olds



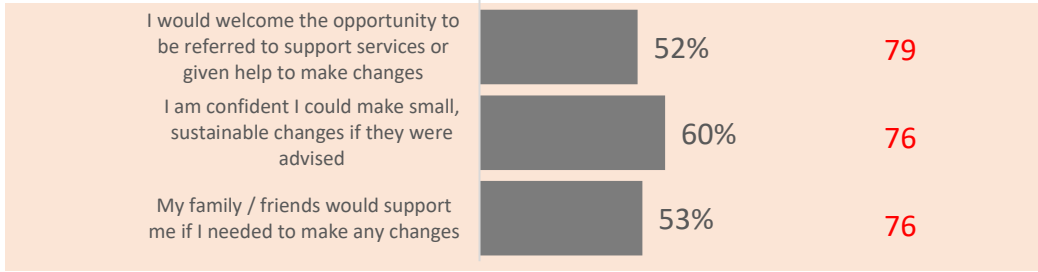
Less likely than all 30-74yr olds



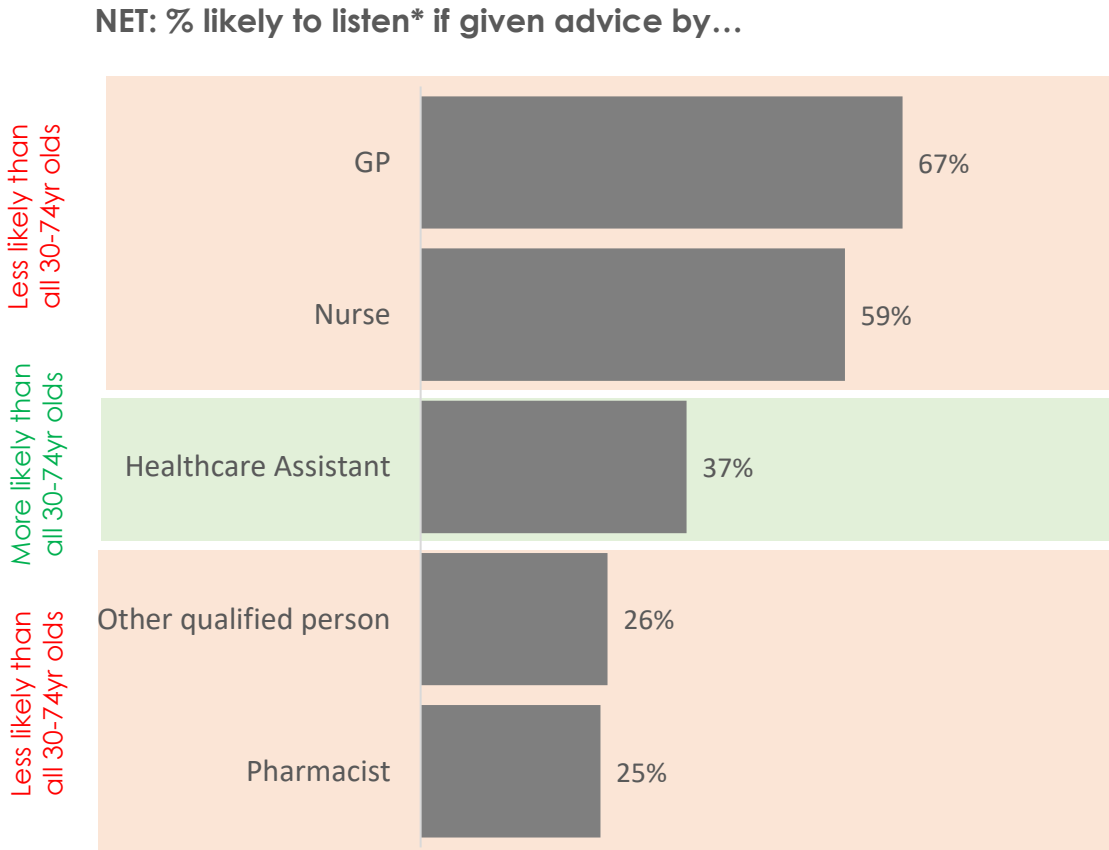
More likely than all 30-74yr olds



Less likely than all 30-74yr olds



While GPs are the practitioners they are most likely to listen to, overall, they are less likely than all 30-74 year olds to listen to advice from practitioners. They are more likely than the overall sample to listen to healthcare assistants – potentially this may be because they seem less intimidating. The elements of the check of most value to this group are their CVD risk score, personalised advice, blood pressure and diabetes risk.



NHS Health Check elements

	Highly valuable		Not valuable	
Your cardiovascular risk score	40%	69	10%	195
Personalised advice	38%	67	7%	183
Your blood pressure	38%	75	9%	129
Your diabetes risk assessment	37%	71	12%	183
Advice on how to prevent cardiovascular health problems	37%	70	9%	177
Your cholesterol levels	36%	68	10%	154
Your physical activity assessment	36%	88	14%	119
Practical tips to help make changes	35%	77	11%	156
Signs & symptoms of dementia	34%	67	9%	137
Referral to get medication to lower blood pressure or cholesterol	34%	80	13%	105
Referral to support services	33%	93	16%	93
Information on lifestyle changes	31%	78	13%	141
BMI	30%	92	22%	109
Your alcohol use score	25%	99	27%	77

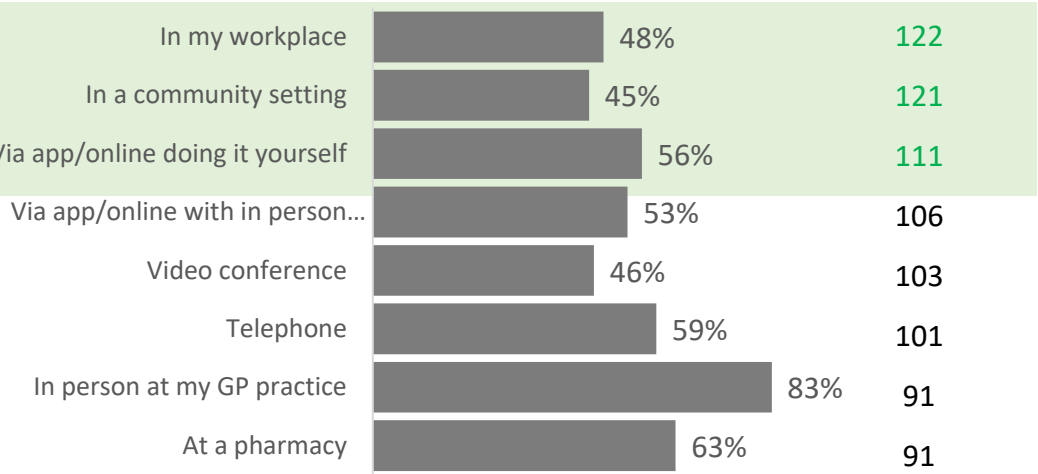


Compared to other segments they are more open to delivery outside of healthcare settings, particularly digital, in the workplace or a community setting as this can work around their lives. Messaging needs to be straightforward in tone and focus on the check being easy, free, and about small changes.

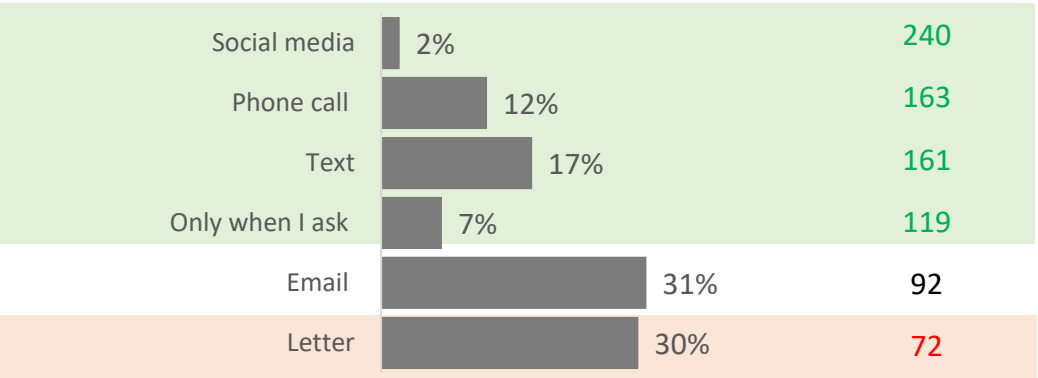
More likely than all 30-74yr olds

Delivery mode – % would attend

Index vs. all 30-74 yrs in sample



Preferred communication channel



More likely than all 30-74yr olds

Less likely than all 30-74yr olds

Base: Ambitious Ambivalent (n=319)

Qualitative findings on delivery needs

- Needs to feel easy to engage in: simple, work around lifestyle so are open to app/online options or non-healthcare settings

Qualitative findings on messaging that engaged

- Short, clear, straightforward messaging
- Do not respond to hearing about 'to do list', but do respond to making it seem easy, just 20 mins, free – taps into 'why not' attitude
- 'Small changes that can make a big difference' appeals
- Engaged by hearing about other people participating
- Although engaged by knowing their risk and being able to act early, list of conditions may be off putting at first

"I decided to focus on myself/on my career/progressing at work, I want to go up the ladder/my last job had no room for progression... over the last year I've been really busy"

"I don't have any serious illnesses, to be honest I'm just happy to be healthy from one day to another, I don't think about the future much, I work to live, not live to work"